



# Caso clinico

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- Paziente di anni 48 con anamnesi negativa per patologie di rilievo
- Riscontro occasionale di PSA 5.4
- Non sintomatologia
- Esplorazione rettale con modesta flogosi, non noduli palpabili.

## Quesiti



- Ripetizione PSA
- Terapia prima della ripetizione del PSA
- RMN e/o biopsia prostatica

Recommendations for screening and early	Strength rating
detection	
Do not subject men to prostate-specific	Strong
antigen (PSA) testing without counselling	
them on the potential risks and benefits.	
Offer an individualised risk-adapted	Strong
strategy for early detection to a well-	
informed man with a good performance	
status (PS) and a life-expectancy of at least	
ten to fifteen years.	
Offer early PSA testing in well-informed	Strong
men at elevated risk of having PCa:	
<ul><li>men &gt; 50 years of age;</li></ul>	
<ul> <li>men &gt; 45 years of age and a family</li> </ul>	
history of PCa;	
<ul> <li>African-Americans &gt; 45 years of age.</li> </ul>	
Offer a risk-adapted strategy (based on	Weak
initial PSA level), with follow-up intervals of	
two years for those initially at risk:	
<ul> <li>men with a PSA level of &gt; 1 ng/mL at 40</li> </ul>	
years of age;	
<ul> <li>men with a PSA level of &gt; 2 ng/mL at 60</li> </ul>	
years of age.	
Postpone follow-up to eight years in those	
not at risk.	
Stop early diagnosis of PCa based on life	Strong
expectancy and PS; men who have a	
life-expectancy of < 15 years are unlikely to	
benefit.	

Choosing Wisely – Promoting conversations between providers and patients

Recommendations Urology AUA – Treating elevated PSA with antibiotics

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- Don't treat an elevated PSA with antibiotics for patients not experiencing other symptoms.
- It had previously been suggested that a course of antibiotics might lead to a decrease in an initially raised PSA and reduce the need for prostate biopsy; however, there is a lack of clinical studies to show that antibiotics actually decrease PSA levels. It should also be noted that a decrease in PSA does not indicate an absence of prostate cancer.

# quesiti

- Terapia antiflogistica ?
- Serenoa?
- Deprox?



### Conclusioni

- Deprox supposte 2 settimane
- Serenoa 20 giorni
- Al termine PSA 2.3