



# Improving the way prostate cancer is diagnosed across Dorset, Hampshire and Isle of Wight

Our response to patient, care-giver and public feedback  
April 2024



# Background

Over the past year, Wessex Cancer Alliance, local hospitals and GPs have worked together to find ways to improve the way prostate cancer is diagnosed. A series of workshops were held, including a focus group involving patient, care-giver and public representatives. The final 'Prostate Cancer Pathway Deep Dive' report has just been produced. Set out below is a summary of the actions that will be taken as a result of the feedback given by these representatives during the project.

## Key findings from the patients, care-givers and the public

- There needs to be clearer, more consistent public messaging about prostate cancer, all prostate cancer diagnostic tests, especially PSA tests, the benefits and risks of tests, and the prostate cancer pathway end to end. This should be aimed at encouraging men to seek help earlier.
- Overall feedback was that the prostate cancer diagnostic process needs to ensure the maximum number of people can benefit from a speedy diagnosis; whilst being mindful some people may need more time or steps in this process for a variety of reasons.
- It was felt that GP testing could be better streamlined to speed up time to hospital referral and therefore diagnosis.
- Most people preferred the proposed one stop option (for diagnostic tests) because of its convenience; with the more staggered diagnostic pathway options being available to accommodate those who may need more time.
- Any good patient journey will be predicated on clear and accessible patient information delivered in a variety of ways, including being able to speak to a person, at all stages of the diagnostic pathway.

## Recommendations from the 'Prostate Cancer Pathway Deep Dive'

- 1** Raise awareness of prostate cancer, particularly in target groups such as black men and others with higher risk.
- 2** Make information easily available to support shared decision making at key points including:

### When considering PSA testing

- Describing the purpose and process (make sure patients know it is a blood test)
- Describing the limitations of the test and what might influence results (recent infection or sexual activity)
- Describing the likelihood of onward testing and what this will mean.

### After an abnormal PSA test is received

- Describing the risk in relation to PSA for that patient
- Describing in detail next stages of testing
- Describing in detail what may affect which tests a patient has and potential complications from diagnostic tests
- Describing in brief the treatment options if cancer is detected.

### At the point of diagnostic testing (whether a scan and/or biopsy)

- Describing more in-depth the next steps if cancer is or is not detected (recognising that many patients have prostate symptoms but do not have cancer)
- Describing in detail post-test care
- Recording patient wishes for how they wish to receive test results.

- 3** Clarify and share best practice on PSA testing, information to support shared decision making and the requirement for digital rectal examinations and repeat PSA testing so people have more consistent access to the right advice and appropriate tests from their GP, wherever they are in Wessex.
- 4** Review the current referral form to include a frailty score and any additional support needs.
- 5** Hospital Trusts to work towards delivery of one stop diagnostic appointments, identifying and addressing site - specific barriers to this delivery currently.

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