PROSTATE SCREENING RESULTS  Prostate cancer is the most commonly diagnosed non-skin cancer in men in the United States, with a lifetime risk for diagnosis currently estimated at 15.9%. Most cases of prostate cancer have a good prognosis, even without treatment, but some are more aggressive and may require therapy. Louisiana continues to rank as one of the highest in the nation when looking at the incidence of new prostate cancer cases. In an effort to provide screening and education, the Cancer Center of Thibodaux Regional offered free prostate screenings (PSA) during the third week in September. The results of the screening are displayed in the graph to the right. We notified all participants of results via mail the week of October 9, 2015. Participants with abnormal results received a follow-up phone call the week of November 9, 2015 to ensure that results were received and acted upon.

According to the American Cancer Society, an estimated 220,800 new cases of prostate cancer will occur in the United States during 2015. For reasons that remain unclear, incidence rates are about 60% higher in blacks than non-Hispanic whites. This disparity is eye opening. Studies have shown that African-American men may have reduced access and quality of care that may result in diagnosis and treatment of prostate cancer at later stages (after the disease has spread outside of the prostate). In an effort to reach a demographic that may not otherwise have testing, the Cancer Center of Thibodaux Regional concentrates outreach efforts on raising awareness and educating African-American men in the community through participation in faith-based and employment-based programs that are attended by a primarily African-American population. Attendees are educated on risk reduction, signs and symptoms and screening recommendations. In 2014, 16% of participants were African American men.

Our goal for the 2015 screening was to increase this number by 10% and to increase the total screening number by 20%. In order to meet the aforementioned goals, the Cancer Center staff increased community outreach and advertising efforts. The screening dates and locations were publicized a month prior in multiple media outlets including print ads, radio announcements and several social media posts. A registered nurse spoke to a large faith-based group just two days prior to one of the screening dates. Efforts proved successful and the 2015 total screening number was 158 as compared to 120 in 2014; that’s an increase of 24%. The number of African-American men screened increased to 24%.