

My name is Becky Campbell, and I'm a senior manager of medical content here at PCF. I'm excited to be joined today by Dr. Quoc Trinh to discuss this publication on racial differences in PSA screening following the pandemic. Dr. Trinh, thank you for being here today. Of course, it's my pleasure.

So Dr. Trinh is an associate professor of surgery at Harvard Medical School, Section chief of urology at Brigham and Women's Faulkner Hospital, and co-director of the Dana-Farber Brigham Cancer Center's Prostate Program Prostate Cancer program. His main clinical interest is prostate cancer, and his research focuses primarily on inequity and outcomes of prostate cancer care. He also received a PCF Young Investigator Award in 2016.

So Dr. Trinh, congratulations on this publication. Before we get into the research at a very high level, can you remind us about PSA screening? What it is and how it's used?

Yeah. of course. So prostate cancer screening is mostly done through a blood test, the prostate specific antigen or PSA test. it's somewhat of a controversial test, and the guidelines have changed over the course of time. but there is definitely, the idea that this blood test can diagnose prostate cancer at an early stage and, it is a test that should be discussed, with men of a certain age. And the guidelines, again, will vary. And the guidelines will also vary according to, things, including race. because, for example, Black race is associated with a higher risk of developing prostate cancer and also prostate cancer mortality and also family history.

Because if you have a family history, you have a higher risk of getting prostate cancer yourself.

Good. Then. So helpful to have that background. And please tell us, what do we know in general about PSA screening rates and race? Prior to the pandemic?

Yeah, that's a very interesting question. you know, traditionally there was, data that suggested, that Black race, Black men were less likely to get prostate cancer screening, and, and many have, have advanced the idea that because of that may be that is why mortality for, prostate cancer in Black men is higher. But thanks to a lot of advocacy, patient education, some work done by the Prostate Cancer Foundation, among others, that has changed. And I would say that in the pre-pandemic period, let's say in the last few years, we have seen that Black men are actually more likely to get the PSA test, and there's actually a lot of data to support that.

Yeah, that was so interesting. When I was reading the paper, that was something that I did not know either. So thank you for, for raising that point. So following on from that, what questions did you have that inspired you to undertake this research project that I should add, was published in *JNCI Cancer Spectrum* earlier this year?

Yes. So one of the questions we had is that, you know, when you're in a situation like the pandemic, there's always this concern that marginalized populations, things will, whatever disparities already exist, things could only get worse. and there's actually a lot of data about that. You know, we heard a lot about hospitalization rates and mortality rates due to Covid, but also due to other conditions as we dealt with the pandemic and all the issues that arose from the pandemic.

We actually wrote an op-ed in the Boston Globe about how we were concerned about such factors. And, in fact, some of these were actually true. We published a paper looking at PSA screening rates and also rates of screening for other cancers like mammography for breast cancer or colonoscopy for colon cancer.

And we did find that there were a number of factors that impacted the likelihood of men and women getting screening tests during the pandemic and more importantly, after the pandemic, as we recovered and tried to get things back on track. So that was the idea behind the project was to try to understand well, for prostate cancer screening, specifically at the national level, what trends would we see and if potentially disparities could present themselves as a result of the pandemic.

Absolutely. So it's such an important topic that was, you know, obviously top of mind for many folks in the cancer community. So tell us about this study, about a little bit about the data, and what did you find.

Yeah. So we used, data from the BRFSS [editor's note: Behavioral Risk Factor Surveillance Survey], which is a national survey that is conducted continuously in the United States.

In fact, only a few states collected data on PSA screening in 2022. So we relied on those few states that had data consistently in 2018, 2020 and 2022. And we were interested in seeing what kind of trend we would find. So if you look at, that figure that we had in the paper, you'll see that, as I described earlier, Black men were more likely to get screened for prostate cancer in the pre-pandemic period in 2018.

And then you can see that there was a drop around 2020. And as we can imagine, some of this related to the pandemic. And what's interesting is the recovery. I think that's the highlight of this paper was, let's say, more pronounced among White men, and was not as pronounced among Black men.

And that that slope is different, between races. And it's suggesting that that recovery period for Black men has been slower -in other words, a recovery rate.

Understood. We can see that here. Black men are depicted in red and White men in green. And so what you're focusing sort of this time period.

Yeah. And so I guess what we did find does raise the concerns that I mentioned earlier, which is that the pandemic seemed to have affected,

Black men more than White men with regards to getting their prostate specific antigen tested.

Absolutely. And so what do you see are some potential solutions to increasing access to preventive care, especially PSA screening among Black men and maybe even prostate cancer more generally?

Yeah, I think the, to think about solutions, you want to think about what hypothesis we may have, because obviously this data doesn't really tell us why this happened, but rather we can only speculate.

But some of it is my concerns and shared concerns with others about, for example, access to primary care in the post-pandemic period. How much, you know, Black men are getting their care. What about the resources of the hospitals? you know, some hospitals are you have even closed or have been under-resourced in the post-pandemic period.

So when you think about these issues and you try to think about solutions, some of them includes outreach. And, many of you may know I've been very involved in outreach efforts at my institution, in our health system. And I think that part of the solution is really getting the word out, providing education and really ... doing effective outreach to make sure that everybody gets a care deserve.

Absolutely. 100%. Agreed. At PCF, we have some initiatives coming up this year that are that are completely aligned with that. So thank you for that underscoring that point. So this this is really a video for patients and families who may be watching today. What should men and families take away from this study and this, this general body of work? What should they do in terms of their health?

Yeah, I think it's very important for our patients to advocate for themselves. You know, with regards to prostate cancer screening you know, it's a topic that has the guidelines have changed over time. It confuses primary care physicians and understandably, because the guidelines have been confusing. But I would say that if you are at risk of prostate cancer, whether because you are African-American or whether because you have a strong family history, or both, it's very important to advocate for yourself and say, hey, you know, I heard about this PSA test and am I eligible? Should I be getting that test and have that shared decision making process with their primary care physicians who are, you know, probably thinking 400 different things at the same time and may not be very focused on prostate cancer screening.

Absolutely. Well thank you. That's really good advice. And, and I hope that, that folks out there will we'll hear this and be able to take that next step with their doctor.

Do you have any additional research planned on this topic?

Yeah, I think maybe not necessarily research, but I, you know, I'm very passionate about outreach and, and this is the focus of some of the work that we're doing. I think that getting the word out to communities of

color about the importance of prostate cancer screening is, high priority for myself, my department and the health system in general, and a lot of our efforts are targeted towards that because feels that we've made so much progress in terms of advocating, educating, everyone about prostate cancer screening. And we lost some of it because of the pandemic. So we have to put in the effort again to try to get back to where we should be.

Wonderful. Well, Dr. Trinh, thank you so much for joining me today and for telling us a little bit about your research. And, we wish you, much, strength and luck in your continued efforts to reach out to patients in your area.

Thank you. See you soon. Bye bye.