



<sup>1</sup> Donnington Medical Partnership, Oxford, UK

<sup>2</sup> Nuffield Department of Primary Care Health Sciences, University of Oxford, Oxford

sharon.dixon@phc.ox.ac.uk

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## DIAGNOSING PROSTATE CANCER IN ASYMPTOMATIC PATIENTS

### Expert wisdom on prostate cancer testing not evident in NHS commissioning guidance

Sharon Dixon,<sup>1,2</sup> Julian Treadwell,<sup>2</sup> Patrick James McNally,<sup>1</sup> Brian D Nicholson<sup>2</sup>

In their editorial on diagnosing prostate cancer in asymptomatic patients, Bradley and colleagues highlight both the need for caution in the use of screening tests and the implications for the almost non-existent resource of GP time to support evidence based, shared decision making with patients who approach their GPs to discuss risk.<sup>1</sup>

The authors highlight NHS England's ambition to "find" the 14 000 missing cases of prostate cancer. They do not mention, however, that this has resulted in a requirement in the 2022-2023 directed enhanced service contract for primary care in England, which includes the following as part of the early cancer diagnosis raft of requirements: "A primary care network is required to: focusing on prostate cancer, and informed by data provided by the local Cancer Alliance, develop and implement a plan to increase the proactive and opportunistic assessment of patients for a potential cancer diagnosis in population cohorts where referral rates have not recovered to their pre-pandemic baseline."<sup>2</sup>

This recommendation makes no sense and is so vague as to be near meaningless. Perhaps it is the result of a desire to reduce prostate cancer mortality meeting the reality of the evidence base which reveals no clinical mechanism to do so (otherwise we would have a proper national screening programme).

We are concerned about what this will mean in practice, given the uncertainties and resource implications highlighted in Bradley and colleagues' editorial. Patients will be encouraged to seek out a screening test which is more likely to do them harm than good, and precious primary care resources will be wasted for uncertain benefit.

We call for a review of this contractual requirement. There is no doubt that cancer detection initiatives should be permitted flexibility to tackle local priorities. To achieve this, we require further national investment in local health system analytics to allow real time cancer surveillance.

The views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care.

Competing interests: None declared.

<sup>1</sup> Bradley SH, Funston G, Jones D, Watson J. Diagnosing prostate cancer in asymptomatic patients. *BMJ* 2022;377:e071076. doi: 10.1136/bmj-2022-071076 pmid: 35640965

<sup>2</sup> NHS England. Network contract directed enhanced service. March 2022. [www.england.nhs.uk/wp-content/uploads/2022/03/B1357-Network-Contract-Directed-Enhanced-Service-contract-specification-2022-23-primary-care-network-requireme.pdf](http://www.england.nhs.uk/wp-content/uploads/2022/03/B1357-Network-Contract-Directed-Enhanced-Service-contract-specification-2022-23-primary-care-network-requireme.pdf).