

Perception of Pharmacists and Patients on Point-of-Care Testing for PSA

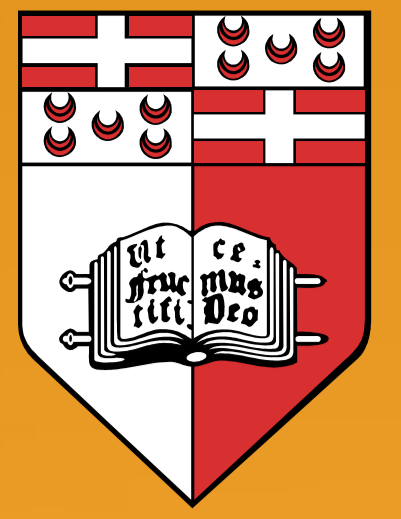
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INTRODUCTION

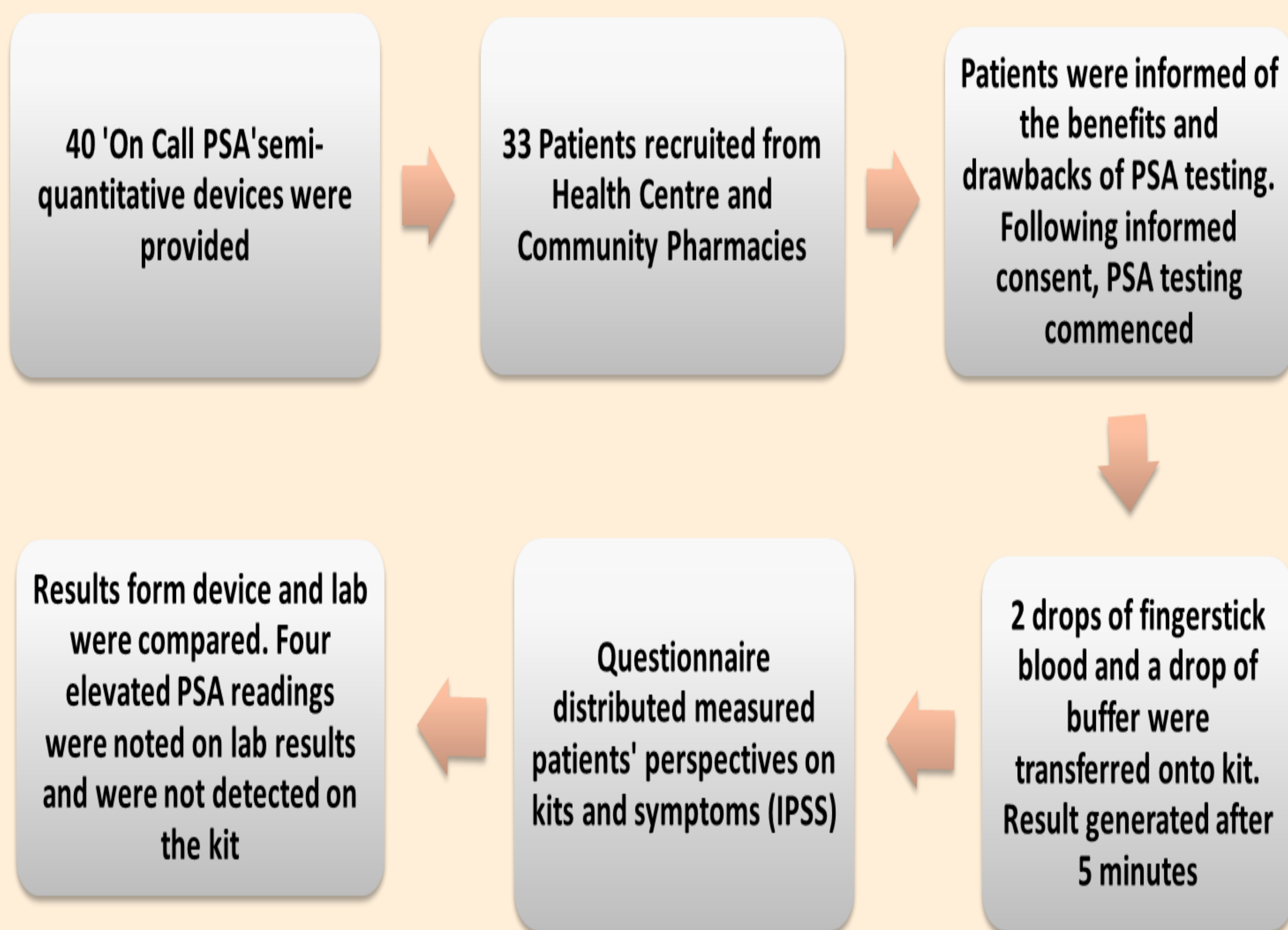
- Point-of-care (POC) tests are a means of near patient investigation carried out by qualified non-laboratory personnel. The Prostate Specific Antigen (PSA) is secreted by the prostate gland and its detected levels in blood vary according to patients' age and pathologies. Although PSA is tissue specific, it is not limited to specific conditions¹. 'The On-Call PSA' semi quantitative test was used in this study.

AIMS

To measure pharmacists and patient views on point-of-care testing for PSA. Objectives included:

- Measure device accuracy and validating device
- Identify advantages and disadvantages of using point-of-care testing method for PSA
- Establish the feasibility of introducing such tests in community pharmacy

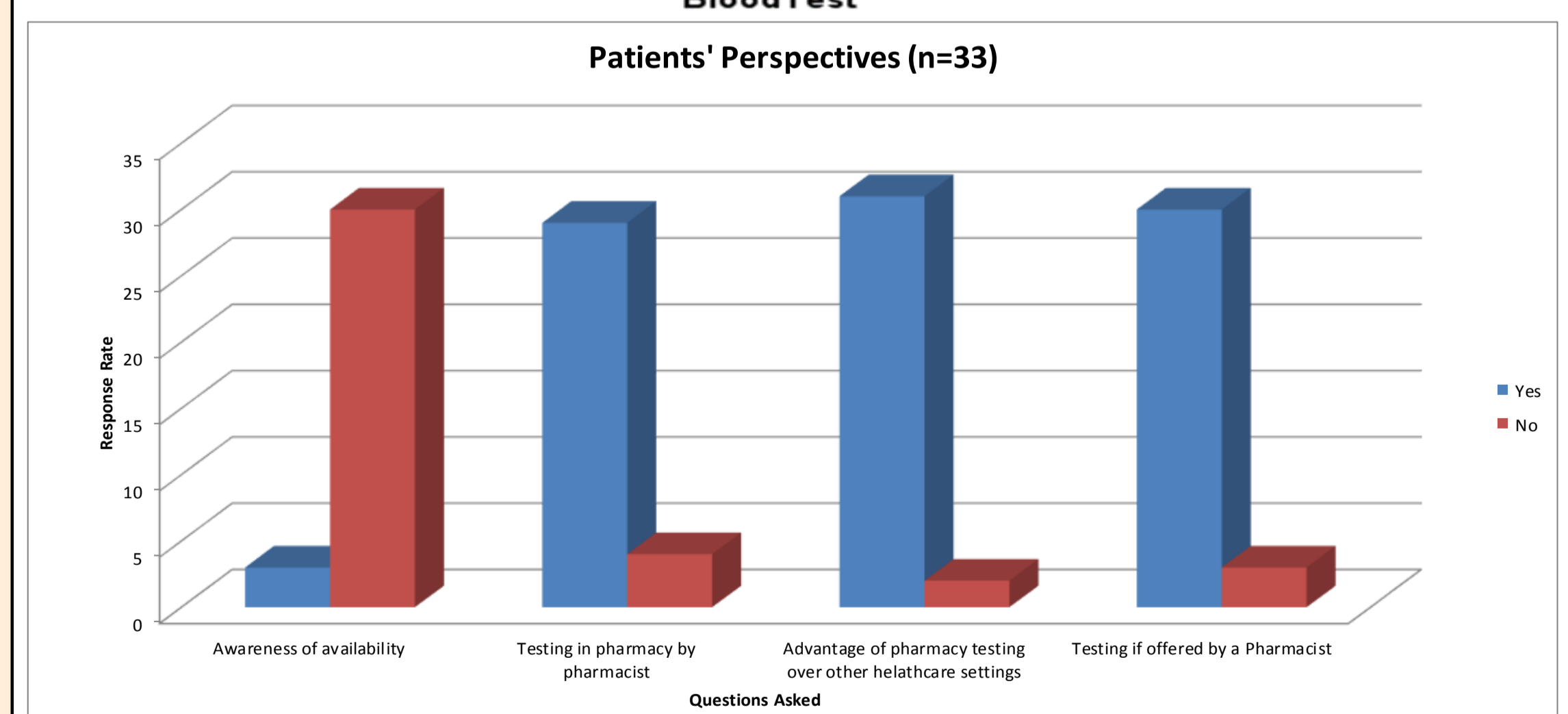
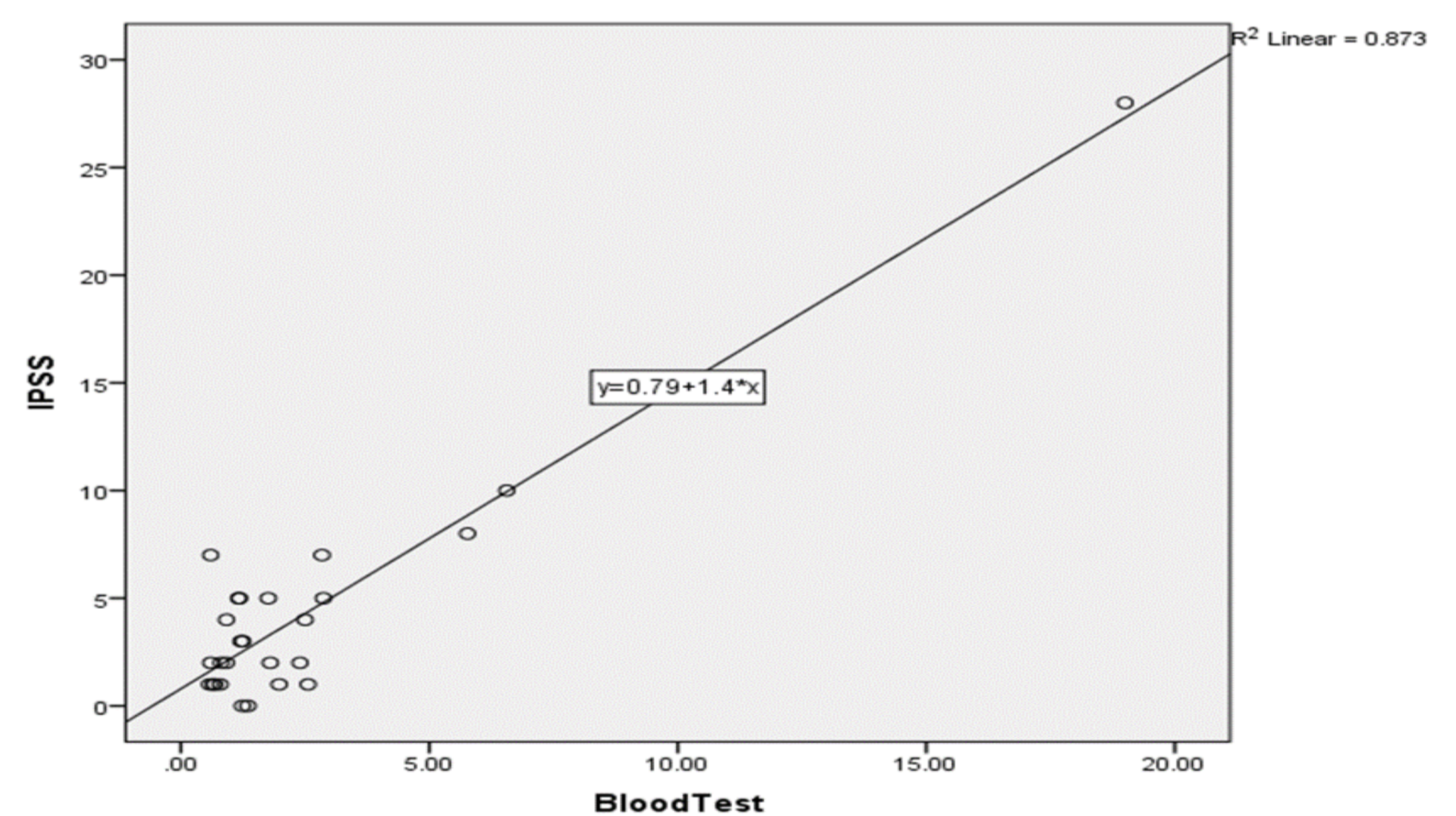
Method



- Deviated results lead to further literature review on test kits. Device had stability issues and provided false negative results leading to recall. Patient testing was stopped.
- A recall was issued for the medical device. Since there were no registered Maltese companies, the Maltese Authorities were not informed about the recall.
- Pharmacist perception on introducing POC devices for the measuring of PSA was measured through a questionnaire.
- Electronic Questionnaires were sent through the Maltese Pharmacy Council and a local wholesaler. Due to low response rates, a random sample of pharmacies was selected and visited. 121 pharmacists participated in the study.

RESULTS

- Comparison of lab and POC tests resulted in the POC kit not detecting 4 elevated PSA readings detected by the lab based test. (n=33) Elevated blood results had readings of 5.58ng/ml, 5.77ng/ml, 19ng/ml, and 6.56ng/ml while kit indicated a level less than 4ng/ml.
- Accessibility, quicker results, closer proximity to residential homes, time efficiency, were the cited POC beneficial properties
- 96% (n=121) of the participating pharmacists think POC testing for PSA is beneficial to patients and 91% think it should be available in pharmacies. 90% would offer this test to patients. 17% of the pharmacists were aware of the IPSS.



CONCLUSION

Results indicate both pharmacists and patients would carrying out point-of-care tests for PSA levels. Patient education on the benefits and drawbacks of PSA testing is required prior to testing. Other conditions such as prostatitis and Benign Prostate Hyperplasia and prostate biopsy and Digital Rectal Examination (DRE)² may also elevate PSA thus all PSA elevating conditions must be excluded prior to a diagnosis.

References
 1. A. Heidenreich, P.J. Bastian, J. Bellmont, M. Bolla, S. Joniau, M.D. Mason et al. members of the European Association of Urology (EAU) Guidelines Office. Guidelines on Prostate Cancer. In: EAU Guidelines 2013.
 2. Burford DC, Kirby M, Austoker J. Prostate Cancer Risk Management Programme: information for primary care; PSA testing in asymptomatic men. NHS Cancer Screening Programmes, 2009