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because of it.

I waited three more years and raised it with him again. While I still had no symptoms he agreed that for my peace of mind I should have a PSA blood test. The result was only slightly above normal and the test was repeated twice more during the next six months with similar results. He agreed to refer me for the more invasive tests including a biopsy.

The tests were normal and after a digital rectal examination the specialist said everything felt OK to him. The biopsy results, however, showed extensive cancer present in six of the eight samples and without treatment I had a life expectancy of five to 10 years - if I was lucky.

I had surgery for the removal of my prostate and now, five years later when I could well have been one of the 600 men who die each year, I can look forward to spending many happy and productive years in retirement.

Men should take an interest in their health and ask questions and

GPs should provide the information clearly and objectively. Then maybe we can reduce the annual death toll of this disease.

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Prostate precaution

The most important point in Olivia Carville's article (Jan 18) on prostate cancer is that men are encouraged to talk to their GPs about the disease. While some GPs may not like the format or wording of the leaflet, anything that encourages men to take an interest in their health is to be applauded.

Eight years ago, at the age of 60, I asked my GP about a PSA test. I had no obvious symptoms and he pointed out that most men will die with prostate cancer rather than