

**FOR IMMEDIATE RELEASE:** November 9, 2011  
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## **Representatives Edolphus “Ed” Towns, Gregory Meeks and Elijah Cummings Send Joint Letter Urging HHS to Protect High-Risk Groups Affected by Prostate Cancer**

WASHINGTON, DC – Today, Representative Edolphus “Ed” Towns (NY-10), Representative Gregory Meeks (NY-6) and Representative Elijah Cummings (MD-7) sent a joint letter to U.S. Department of Health and Human Services (HHS) Secretary Kathleen Sebelius regarding the U.S. Preventive Services Taskforce (USPSTF) draft recommendation against the use of the Prostate Specific Antigen (PSA) test for the early detection screening of prostate cancer.

“Prostate Cancer is a devastating disease that disproportionately impacts African American men,” stated Rep. Towns. “Though the PSA test is not perfect, it is an effective tool that has brought the mortality rate of prostate cancer down by 40 percent over the course of its use. We cannot discount this fact, and must be sure that any recommendation by the USPSTF relies on sound data that takes into consideration the needs of the African American community.”

“While prostate cancer generally develops slowly and has low mortality rates when detected and treated early, it occurs earlier and is more aggressive in African American males,” said Rep. Meeks. “PSA screenings seem to be a key to early detection for this high-risk group. This is why I am deeply concerned that the U. S. Preventive Services Task Force’s recommendation may have been made without a sufficient scientific sample of African American males and an adequate study of their experience with the PSA. This recommendation should not include African American men unless and until ‘compelling and conclusive evidence’ sustains its underlying assumptions.”

“I introduced the PRIME Act last Congress to provide funding to improve the diagnostic tools used to detect prostate cancer, which kills so many American men, particularly in minority communities,” said Rep. Cummings. “Though that bill did not pass, we cannot let up. We must ensure that the methods used to test for prostate cancer are not discarded unless there is clear, clinical evidence present that the Task Force’s recommendations for discarding those testing methods should also be applied to those at high risk for prostate cancer. I want to ensure that all communities are served by recommendations made by the Task Force.”

The letter requests that careful consideration be given to the role of PSA testing for high risk groups and the USPSTF, prior to the issuance of the final recommendation, provide the evidence and assumptions used to include men regardless of race and family history within its recommendation. A copy of the letter was sent to President Barack Obama; Dr. Virginia Moyer,

Chairwoman of the USPSTF; and Dr. Garth Graham, Deputy Assistant Secretary for Minority Health at HHS.

The text of the letter is below:

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November 8, 2011

Honorable Kathleen Sebelius  
Secretary  
Department of Health and Human Services  
200 Independence Ave SW  
Washington, DC 2021

Dear Secretary Sebelius:

As Members of Congress who have been very actively engaged in the effort to both develop effective screening technologies to identify prostate cancer and to ensure that appropriate treatments are available, we write today regarding an issue of utmost concern to us. As you know, on October 7, 2011, the U. S. Preventive Services Task Force (USPSTF) rendered a draft recommendation against the use of the Prostate Specific Antigen (PSA) test for the early detection screening of prostate cancer absent "symptoms that are highly suspicious for prostate cancer."<sup>[1]</sup> We are particularly concerned about the possible impact of this recommendation on populations at high risk for prostate cancer.

African American men have the highest prostate cancer incidence and mortality rates of any racial or ethnic group in the United States. According to the Office of Minority Health at the Department of Health and Human Services, African Americans were 1.4 times more likely to be diagnosed with prostate cancer and 2.5 times more likely to die from prostate cancer than non-Hispanic whites.<sup>[2]</sup> For this reason, African American men have been designated as a high risk group for prostate cancer. However, it is our understanding that the randomized clinical trial evidence cited by the USPSTF, and used in its decision to revise its recommendations regarding the use of the PSA test, did not include a statistically significant number of African Americans and possibly not even a significant number of men with a family history of the disease, which is another high risk group.

Therefore, we are concerned that the USPSTF's recommendation may not have had enough scientific evidence with which to make a conclusion regarding the appropriate role of the PSA test to screen for prostate cancer in high risk groups. We strongly urge that the USPSTF, in a public forum, provide the data and assumptions that it used to include men "regardless of ...race and family history"<sup>[3]</sup> within its recommendation. If no compelling and conclusive evidence is

available and presented to the public for review and comment, then we believe that men at high risk for prostate cancer cannot be responsibly included in the final USPSTF recommendation.

We applaud the USPSTF for raising concerns about the harms inflicted on men who are diagnosed and treated for prostate cancer when there may be no benefit from such treatment, and we recognize that African American men and all high risk men could be subject to these harms. However, we strongly believe that careful consideration must be given to the role of PSA testing for high risk groups and that the clinical evidence used in making any recommendation must include adequate representation from high risk groups.

We thank you for your time and efforts to bring increased awareness to prostate cancer and hope that someday, we can prevent this deadly disease entirely. We certainly hope that this will be the outcome of this critical moment in the fight against prostate cancer and we stand ready to support efforts towards this goal.

Sincerely,

Edolphus "Ed" Towns  
Member of Congress

Gregory W. Meeks  
Member of Congress

Elijah E. Cummings  
Member of Congress

CC:

President Barack Obama

Virginia Moyer, M.D., M.P.H.  
Chairwoman  
United States Preventive Services Task Force

Garth N. Graham M.D., M.P.H.  
Deputy Assistant Secretary for Minority Health  
Office of Minority Health  
U.S. Department of Health and Human Services

[1] U.S. Preventive Services Task Force, *Draft Recommendation Statement* (online at <http://www.uspreventiveservicestaskforce.org/draftrec3.htm>)

2 HHS Office of Minority Health (online at <http://minorityhealth.hhs.gov/templates/content.aspx?lvl=3&lvlID=4&ID=2826>)

3 U.S. Preventive Services Task Force, *Draft Recommendation Statement* (online at <http://www.uspreventiveservicestaskforce.org/draftrec3.htm>)