# UNDERWRITING: Tests for Prostate Cancer

Since Prostate Cancer is the second leading cause of death in men, a few facts are in order:

• In 2002, an estimated 189,000 American men were diagnosed with prostate cancer.

• Prostate cancer tends to run in families. A man with one close relative with prostate cancer is twice as likely to contract it, with two close relatives the risk increases five fold, and with three close relatives his risk of prostate cancer is 97%.

• African-American men have the highest prostate cancer rate in the world. They are at least 35% more likely to contract prostate cancer, and twice as likely to die of the disease.

• Prostate cancer, while common in North America and Western Europe, is rare in South America, Africa, and Asia for reasons that we do not today understand. Scientists however believe that a low-fat diet, high in fiber may reduce the risk of contracting the disease.

• Prostate cancer is significantly higher among men with a high intake of fat in their diet.

•In clinical tests selenium has been found to significantly reduce the incidence of both skin and prostate cancer.

• Prostate cancer has been observed to much less prevalent amongst men who eat two or more servings of cooked tomatoes per week.

In view of the high risk of prostate cancer the American Cancer Society recommends that both Digital Rectal Examination and PSA Testing be offered to men at age 50 and over annually, and that men at high risk should begin being tested annually at age 45.

Digital Rectal Examination (DRE) is neither accurate nor sensitive in the detection of prostate cancer, however where the physician notes nodularity in the prostate in 15% to 25% of cases prostate cancer is diagnosed.

Prostate Specific Antigen (PSA) is considered to be the best and most definitive measure of aggressive prostate carcinoma. Unfortunately however, even PSA testing is also neither accurate nor sensitive enough for the accurate diagnosis of prostate cancer.

A PSA level of less than 4 is usually a clear indication that prostate cancer is not present. Except in unusual circumstances these cases do not present any underwriting problems for life insurance.

A PSA level of between 4 and 10 indicates that prostate cancer may be present. In fact in 25% of such cases prostate cancer is present. The underwriter's dilemma is to try to determine whether your applicant is likely to be among the unlucky 25%.

A PSA level of over 10 indicates that prostate cancer is likely to be present in at least 60% of cases. These cases will invariably be postponed pending definitive testing.

Percent Free PSA Testing, a relatively new procedure using sophisticated laboratory technology, measures the percent of PSA which is free (not bound to the blood protein) to distinguish those individuals who have benign prostatic hyperplasia and other non life threatening prostate disorders.

Increasingly, Percent Free PSA testing is being used with PSA levels of between 4 and 10 to sort out those individuals who do have prostate cancer, and those who can be favorably underwritten for insurance.

Prostate Needle Biopsy, usually performed as an office procedure, without the need for anesthesia, is indicated whenever a PSA level of over 10 is encountered. It is the "Gold Standard" used to determine whether a serious condition requiring immediate aggressive treatment is present.

Amazingly, even with a PSA of over 10, in many cases the results of the prostate needle biopsy indicate that life insurance can be offered immediately on a highly favorable basis.

### UNDERWRITING RECOMMENDATIONS

All too frequently, your first indication of trouble occurs when your company advises that your case in "Declined" or "Postponed" for "Confidential Medical Reasons" or "Elevated PSA's".

What should you do? 1. Tell your client that he has been Declined or Postponed.



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2. Have him write to the company and ask to have the results sent to his physician.

3. His personal physician who is usually a general practitioner or internist is NOT QUALIFIED to properly advise and treat him. Strongly recommend that he consult a urologist and have his own tests performed.

## UNDERWRITING PROGNOSIS

Even though your client has just been declined for life insurance, you may have just saved his life.

You will usually be successful in obtaining life insurance for this client, but only after he has been sufficiently frightened to seek proper, competent medical testing and treatment.

Once his urologist has determined whether in fact he even has prostate cancer, or possibly just an enlarged prostate, the stage of the prostate cancer if present, and the appropriate treatment that is indicated, the results when presented to the Underwriter should enable him to offer coverage (possibly rated) that you should be able to place.

### UNDERWRITER:

Defined as someone sitting in an ivory tower 900 miles from here, trained to say, "NO."

## Your Job:

To convince that underwriter, with truthful information, presented in as favorable a light as possible that it is desirable, even possible to say "YES."