# Rishi Sunak advocates for targeted prostate cancer screening to save lives and cut costs



Prostate cancer screening targeted at high-risk men could save thousands of lives annually and have a transformational impact on men’s health across generations, former Prime Minister Rishi Sunak asserted at a recent parliamentary event. Sunak, speaking alongside Labour’s Deputy Prime Minister David Lammy, emphasised the urgency of shifting from reactive care to proactive prevention, highlighting mounting evidence that early detection and treatment dramatically improve survival rates and reduce healthcare costs.

The call came during the launch of a report by Prostate Cancer Research, which argues that implementing a targeted national screening programme for men aged 45 to 69—particularly those who are Black or have a family history of prostate cancer—would cost the National Health Service (NHS) just £18 per patient annually. This would amount to about £25 million a year, representing a mere 0.01% increase in the NHS budget. The report projects that such a programme would add 1,254 years of life annually, while requiring relatively modest additional resources such as five MRI scanners and 75 extra staff members.

Sunak stressed that prostate cancer is often symptomless in its early stages, meaning men are unlikely to seek medical advice until the disease has progressed. “That instinct, though, is costing children their dads, costing friends precious time together and costing lives,” he said. The former PM’s appeal for government will to act was matched by Lammy, who described the campaign as deeply personal due to his family’s experience with cancer. The deputy prime minister underscored the importance of an evidence-led approach, noting the UK National Screening Committee’s ongoing review of prostate cancer screening as a priority.

The report’s emphasis on a targeted approach aligns with health secretary Wes Streeting’s recent backing of enhanced prostate cancer screening efforts. Streeting has expressed particular sympathy for screening men at highest risk first, in line with existing NHS cancer screening programmes for breast, bowel, and cervical cancers. Industry experts and campaigners, including Oliver Kemp, chief executive of Prostate Cancer Research, urge that this strategic step could reduce health inequalities, particularly impacting Black men who face disproportionately higher risks.

While the idea of prostate cancer screening holds promise, the conversation is nuanced by the consideration of cost-effectiveness and innovations in diagnostic technology. A study from Imperial College London supports cost-effective treatment options such as minimally invasive focal therapies, which may improve outcomes and quality of life by reducing side effects compared to traditional treatments like surgery and radiotherapy. Additionally, advances in testing, including the Stockholm3 screening method evaluated by NICE, suggest potential improvements over conventional PSA testing by reducing unnecessary biopsies and enhancing diagnostic precision.

Further innovation is underway: researchers at The Institute of Cancer Research in London have developed a saliva test capable of predicting prostate cancer risk through DNA analysis, which could revolutionise early diagnosis and potentially save the NHS hundreds of millions annually by avoiding expensive late-stage treatments.

However, some economic evaluations urge cautious optimism. A systematic review published in PubMed questioned the overall cost-effectiveness of widespread prostate cancer screening, noting costs per quality-adjusted life year that exceed typical thresholds. Such assessments underscore the need for rigorous evidence and careful allocation of resources.

Adding to the evidence base, Prostate Cancer UK has launched the £42 million TRANSFORM trial—the largest prostate cancer screening study in two decades. This extensive research initiative aims to identify the most effective screening protocols through the participation of hundreds of thousands of men, with the goal of providing definitive answers to improve survival while optimising resource use.

Sunak’s advocacy, backed by cross-party support, health leadership, and mounting research, positions a targeted prostate cancer screening programme as a potentially life-saving, cost-effective intervention. The UK National Screening Committee’s forthcoming decision later this year will be pivotal in determining how the NHS can best implement this strategy to reduce the burden of prostate cancer, save lives, and alleviate pressures on the health system for years to come.

### 📌 Reference Map:

* Paragraph 1 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490)
* Paragraph 2 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490), [[2]](https://www.prostate-cancer-research.org.uk/life-saving-targeted-prostate-cancer-screening-would-cost-just-0-01-of-annual-nhs-budget-reveals-new-report/)
* Paragraph 3 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490), [[2]](https://www.prostate-cancer-research.org.uk/life-saving-targeted-prostate-cancer-screening-would-cost-just-0-01-of-annual-nhs-budget-reveals-new-report/)
* Paragraph 4 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490)
* Paragraph 5 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490)
* Paragraph 6 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490), [[2]](https://www.prostate-cancer-research.org.uk/life-saving-targeted-prostate-cancer-screening-would-cost-just-0-01-of-annual-nhs-budget-reveals-new-report/)
* Paragraph 7 – [[3]](https://www.imperial.ac.uk/news/249673/prostate-cancer-focal-therapy-cost-effective/), [[4]](https://www.nice.org.uk/advice/mib303/chapter/Clinical-and-technical-evidence)
* Paragraph 8 – [[6]](https://www.urologynews.uk.com/news/post/prostate-cancer-spit-test-could-save-the-nhs-500-million-a-year)
* Paragraph 9 – [[7]](https://pubmed.ncbi.nlm.nih.gov/25675126/)
* Paragraph 10 – [[5]](https://prostatecanceruk.org/research/transform-trial)
* Paragraph 11 – [[1]](https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490), [[2]](https://www.prostate-cancer-research.org.uk/life-saving-targeted-prostate-cancer-screening-would-cost-just-0-01-of-annual-nhs-budget-reveals-new-report/), [[5]](https://prostatecanceruk.org/research/transform-trial)

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## Bibliography

1. <https://www.dailymail.co.uk/health/article-15191835/Prostate-cancer-screening-generational-impact-sunak.html?ns_mchannel=rss&ns_campaign=1490&ito=1490> - Please view link - unable to able to access data
2. <https://www.prostate-cancer-research.org.uk/life-saving-targeted-prostate-cancer-screening-would-cost-just-0-01-of-annual-nhs-budget-reveals-new-report/> - A report by Prostate Cancer Research reveals that implementing a national prostate cancer screening programme targeting high-risk men would cost the NHS an additional £25 million annually, approximately 0.01% of its budget. This investment is projected to save 1,254 years of life each year, equating to about £20,000 per extra year of life saved. The programme would involve a 23% increase in diagnostic activities and require a modest increase in NHS workforce, addressing health inequalities among Black men and those with a family history of prostate cancer.
3. <https://www.imperial.ac.uk/news/249673/prostate-cancer-focal-therapy-cost-effective/> - A study led by Imperial College London indicates that minimally invasive focal therapies for prostate cancer, such as cryotherapy and High Intensity Focused Ultrasound (HIFU), are cost-effective and may improve patient outcomes. Compared to traditional treatments like surgery or radiotherapy, these therapies are associated with lower overall costs and fewer side effects, leading to a better quality of life for patients. The research suggests that focal therapy represents good value for money within the NHS.
4. <https://www.nice.org.uk/advice/mib303/chapter/Clinical-and-technical-evidence> - The National Institute for Health and Care Excellence (NICE) provides an evaluation of the clinical and technical evidence for the Stockholm3 test, a prostate cancer screening method. The assessment highlights strengths such as appropriate randomisation and a large sample size, while noting limitations like non-blinding of clinicians and the study being conducted outside the NHS. The findings suggest that Stockholm3 could be more effective than traditional PSA testing, potentially reducing unnecessary biopsies and increasing cost-effectiveness.
5. <https://prostatecanceruk.org/research/transform-trial> - Prostate Cancer UK has launched the £42 million TRANSFORM trial, the largest prostate cancer screening trial in 20 years. The trial aims to identify the most effective screening methods by involving hundreds of thousands of men. Supported by the NHS, the National Institute for Health and Care Research (NIHR), and the UK Government, the study seeks to provide definitive evidence on the best approach to screen for prostate cancer, potentially saving thousands of lives annually.
6. <https://www.urologynews.uk.com/news/post/prostate-cancer-spit-test-could-save-the-nhs-500-million-a-year> - Researchers at The Institute of Cancer Research, London, have developed a saliva test that could revolutionise prostate cancer diagnosis. The test analyses DNA from saliva to calculate the risk of prostate cancer, enabling earlier detection when the disease is more treatable. The study estimates that this test could identify up to 12,350 cases earlier, saving the NHS around £500 million annually by reducing the need for extensive treatments associated with late-stage diagnoses.
7. <https://pubmed.ncbi.nlm.nih.gov/25675126/> - A systematic review published in PubMed examines the economic evaluation of prostate cancer screening. The study found that the cost per quality-adjusted life year (QALY) gained from screening was significantly higher than the cost-effectiveness threshold, suggesting that prostate cancer screening may not be cost-effective. The review highlights the need for careful consideration of the economic implications of implementing screening programmes for prostate cancer.