

428 – Men's Health

With Steven Bruce, Professor Bill Ribbans and Allan Lamb

This discussion centred on the pressing issue of men's health, with particular emphasis on the challenges surrounding prostate cancer awareness, screening, and diagnosis. It highlighted the critical role healthcare professionals play in identifying red flags, initiating timely referrals, and breaking down cultural and psychological barriers that prevent men from seeking help.

The dialogue opened by recognising the high prevalence of prostate cancer and the complexity of early detection. The participants explored the limitations of the PSA (prostate-specific antigen) test, noting both its clinical utility and its lack of specificity. While not a definitive diagnostic tool, PSA testing was acknowledged as a valuable starting point for raising suspicion and triggering further investigations when interpreted alongside patient history and clinical presentation.

The conversation underscored the issue of late presentation in men with prostate cancer, often due to stigma, embarrassment, or a general reluctance to engage with healthcare services. It was suggested that healthcare practitioners, especially those working in musculoskeletal care such as chiropractors and osteopaths, are in a strong position to initiate conversations about prostate health. Given their regular contact with men experiencing back or pelvic pain, practitioners were encouraged to consider underlying systemic causes, particularly when symptoms deviate from typical musculoskeletal patterns.

Anatomical pathways for metastasis, including spread to the lumbar spine, were briefly addressed, reinforcing the need for vigilance in identifying non-mechanical or disproportionately persistent spinal pain. The discussion also touched on the importance of considering weight loss, fatigue, and urinary symptoms when taking a history, as these may signal serious pathology requiring referral.

Another key theme was the importance of interdisciplinary collaboration and clear referral protocols. The panel supported a proactive stance, suggesting that practitioners who suspect prostate pathology should liaise confidently with GPs or specialists, armed with clear clinical reasoning. Additionally, there was emphasis on the need to overcome patient resistance by framing the conversation in terms of health optimisation and personal responsibility, rather than disease suspicion alone.

The discussion expanded to cover the broader cultural barriers that influence men's health behaviours. Traditional masculinity, stoicism, and fear of vulnerability were identified as significant obstacles to early detection and treatment. Healthcare professionals were encouraged to foster environments where open discussion is normalised, and male patients feel empowered to speak about their health concerns.

Finally, the importance of continuing professional development was reinforced, particularly the need for practitioners to remain informed about current screening

guidelines, referral pathways, and communication strategies for discussing sensitive issues. The conversation served not only as an educational resource but as a call to action for all healthcare providers to play a more active role in advocating for and supporting men's health.

In summary, the discussion provided a comprehensive overview of the clinical, cultural, and communicative factors involved in prostate cancer detection and broader male health engagement, offering practical strategies for early recognition, patient dialogue, and collaborative care.