WHY WE SHOULD PAY ATTENTION TO MEN’S HEALTH

Over the past decade, men have shown poorer health outcomes than women across all racial and ethnic groups as well as socioeconomic status. Risks to their health and well-being are on the rise due to a lack of education on, awareness of, and pursuit of preventive screening and care. Men are leading in 9 out of the top 10 causes of death. According to the American Cancer Society, 1 in 2 men versus 1 in 3 women will be diagnosed with cancer in their lifetime. In the United States, men die at an overall rate 1.4 times higher than women. Studies show that women are 100 percent more likely than men to visit a doctor, have regular physician check-ups, and obtain preventive screening tests for serious diseases. Appropriate use of tests such as prostate cancer screening exams and blood pressure, blood sugar, lipid panel, and colorectal screenings in conjunction with clinical exams or self-testing, can result in the early detection of many problems and in increased survival rates.

Common urological conditions impacting men which would benefit from improved coordination of public awareness and screening programs include prostate cancer, bladder cancer, and erectile dysfunction.

**Prostate Cancer:** The most commonly diagnosed cancer in men is prostate cancer and it is the second most common cause of male death from cancer. In 2018, approximately 164,690 men in the United States will be diagnosed with prostate cancer and an estimated 29,430 will die from it. In addition, there are major population disparities in prostate cancer incidence and mortality, with African American men experiencing 2.5 times greater risk of prostate cancer death compared to Caucasian men.

**Bladder Cancer:** Bladder cancer is the fourth most common cancer and the eighth leading cause of cancer death in men. The five-year survival rate for bladder cancer has not improved in over 30 years. Bladder cancer is more commonly diagnosed after the age of 55 and has the highest cost of health care delivery per patient compared to all other malignancies. In 2018, approximately 62,380 men in the United States will be diagnosed with bladder cancer and an estimated 12,520 will die from it.

**Erectile Dysfunction (ED):**
The National Institutes of Health (NIH) estimates that ED affects as many as 30 million men in the United States. Lack of appropriate treatment for ED may be associated with comorbid conditions such as hypertension, diabetes, and treated heart disease. ED also has severe psychological emotions associated with anger, isolation and depression and it can result in serious adverse impacts to functioning in a marriage or partnership.

Unfortunately, a significant proportion of ED treatment is not covered by public or private payers. Recognizing this disparity in men’s health care, the American Medical Association’s (AMA) House of Delegates, which is the policymaking body of the house of medicine, passed a measure supporting patient access to the full continuum of care of evidence-based ED treatment modalities including oral pharmacotherapy, penile vasoactive injection therapy, vacuum erection device therapy and penile prosthetics. A federal measure has also been introduced (i.e., H. Res. 106 – 114th Congress) urging protection of Medicare or veterans’ benefits for medical device treatments for male impotence that result from treatment for diseases such as prostate cancer.
WHAT CAN BE DONE

- Preserve access to important health screenings such as prostate cancer screening exams and blood pressure, blood sugar, lipid panel, and colorectal screenings
- Increase research funding to support the study of diseases in vulnerable populations
- Support an Office of Men’s Health to provide oversight and recommendations on men’s health screening

WHO TO CONTACT

For more information or to discuss the AUA’s advocacy efforts, please contact legislativeaffairs@AUAnet.org.