



Mission: To improve public health in Maryland through education and advocacy ***Vision:***
Healthy Marylanders living in Healthy Communities

**Testimony In Support of SB0078
Public Health – Prostate–Specific Antigen Testing (Protect
Our Prostate Act)
Before the Finance Committee
By: Maryland Public Health Association (MdPHA)
February 12, 2026**

Dear Chair Beidle and Members of the Senate Finance Committee,

We submit this written testimony in favorable support of Senate Bill 78, which proposes evidence-based safeguards to improve the accuracy, standardization, and transparency of prostate-specific antigen testing in Maryland.

Prostate-specific antigen (PSA) testing remains a central tool in prostate cancer screening, but it is also well documented as a diagnostic test that carries substantial risks of false-positive results, invasive procedures, and overtreatment. Senate Bill 78, the Protect Our Prostate Act, provides a measured, evidence-based response to these challenges by strengthening safeguards around PSA testing in Maryland.

Medical literature consistently demonstrates that PSA levels are highly sensitive to external factors unrelated to cancer, including ejaculation within 48 hours of testing, urinary tract infections, prostatitis, and recent prostate manipulation. Studies show that ejaculation alone can increase PSA levels in up to 87% of individuals, with effects lasting up to two days [1]. Infections and inflammation can further elevate PSA, increasing the likelihood of misleading results [2]. SB 78 addresses this by requiring clear, written patient preparation guidance, reducing preventable false-positive findings and unnecessary downstream interventions. Published studies estimate PSA false-positive rates ranging from 15% to over 70%, depending on the population and threshold used [3–5]. One real-world cohort study found a false-positive rate of 46.6%, meaning nearly half of men with elevated PSA did not have prostate cancer [6]. These results often lead to invasive prostate biopsies, which carry documented risks including infection, bleeding, hospitalization, and long-term anxiety [7–10].

SB 78 also addresses the lack of standardization in PSA testing methodologies. PSA assays may be calibrated to either the Hybritech or World Health Organization (WHO) standard, yielding results that can differ by 20–25% despite no true biological change [11–12]. By requiring

laboratories to use nationally recognized calibration standards, standardized reporting units, and clear disclosure of assay methodology, SB 78 promotes transparency and safer clinical interpretation. Importantly, the bill does not restrict access to PSA testing nor impose unreasonable burdens on laboratories. Instead, it aligns testing practices with FDA-approved assays, recognized proficiency standards, and best practices recommended by professional medical organizations.

Prostate cancer remains a significant public health concern, and PSA testing continues to play an important role in early detection. SB 78 strengthens that role by improving accuracy, reducing avoidable harm, and supporting informed decision-making. We respectfully urge a favorable report on Senate Bill 78.

The Maryland Public Health Association (MdPHA) is a nonprofit, statewide organization of public health professionals dedicated to improving the lives of all Marylanders through education, advocacy, and collaboration. We support public policies consistent with our vision of healthy Marylanders living in healthy, equitable, communities. MdPHA is the state affiliate of the American Public Health Association, a nearly 145-year-old professional organization dedicated to improving population health and reducing the health disparities that plague our state and our nation.

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