

## Treatment Options

The treatment of prostate cancer has evolved considerably in recent years and, if the disease is treated before it has spread, it is usually curable. Depending on a number of factors, such as your age and the nature of the cancer, the consultant may offer a range of options for you to consider. Your decision may be one of the most important in your life, so you need to understand and explore the options available to you. These are:

**Active Surveillance**, or for older patients, **Watchful Waiting**. These avoid radical intervention (unless later found necessary) and may be appropriate in selected cases.

**Surgery**, usually keyhole or robotically assisted, to remove the whole prostate.

**Radiotherapy**, either by external beam radiotherapy or **Brachytherapy**, involving the implantation of tiny radio-active seeds.

Other less invasive treatments such as **High Intensity Focused Ultrasound** (HIFU), a method using high frequency sound waves, and **Cryotherapy**, which destroys cancer cells by freezing, are newer treatments, where long-term statistics are not yet available.

**Hormone therapy** is normally given for those who may not be eligible for surgery or radiotherapy, due to the nature of their cancer. Hormone treatment is also sometimes used prior to other treatments in order to reduce the tumour size. Some of the above treatments may be used in combination.

## Side Effects

All active treatments have side effects, including infertility. Many patients, however, lead a normal life.

**For further details of treatment options, side effects and dietary advice, ask for our free Information Booklet**

## Here To Help

**PCaSO Prostate Cancer Support Organisation** is your support organisation for Dorset, Hampshire and Sussex. It is a charity managed entirely by volunteers, many of whom are prostate cancer patients. Our services are available to all who may be affected by or concerned about prostate cancer – patients, families, friends.

**PCaSO provides free and confidential HELP - SUPPORT - INFORMATION**

**Regular meetings are held in Dorset - Hampshire - Sussex**  
**Quarterly Newsletters**

Ask for a copy of our free comprehensive **Information Booklet**

**CALL OUR HELP LINE**

**0800 035 5302**

Monday to Friday: 10am to 7pm

**Email:** info@pcaso.org

**Postal address:**

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# PROSTATE CANCER

**Don't Get Caught Out!**

# KNOWLEDGE



**Prostate Cancer  
Support Organisation**

**www.pcaso.org**

Registered Charity No. 1170536

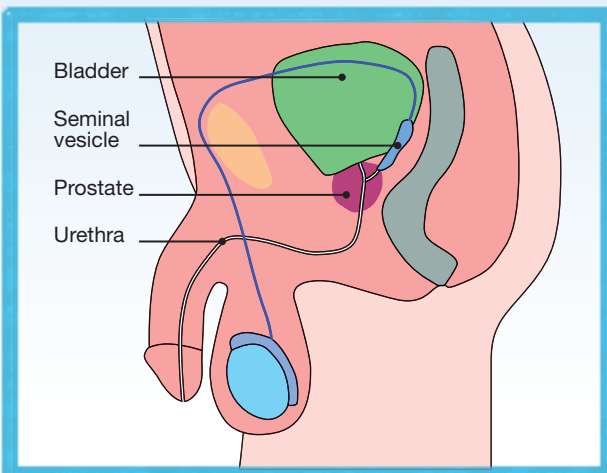
# Prostate Cancer is now the most common cancer in men

## Some Facts

- Each year in the UK some 47,300 men will be diagnosed with prostate cancer and about 10,800 will die of it.
- Many more men may have the disease without even knowing about it.
- Many men may not have any symptoms.
- More and more men below the age of 60 are developing the disease.
- Nearly 85% of the public have no idea where the prostate is, what it does, or what can go wrong with it.

## The Prostate

The prostate is a male sex gland located underneath the bladder. It is normally about the size of a walnut and fits around the tube (the urethra) which carries the urine out of the bladder. The prostate plays a key role in producing the bulk of the fluid in the semen.



## Prostate Problems

The most common prostate problem in men over 50 is **Benign Prostatic Hyperplasia** (BPH), or enlargement of the prostate. Another problem is caused by inflammation or infection, called **Prostatitis**. Whilst these can cause discomfort and problems, they are treatable and not usually life threatening.

**Prostate Cancer** sometimes shares similar symptoms to BPH and prostatitis but, unlike these, aggressive prostate cancers can eventually lead to death if left undetected and untreated.

## Prostate Cancer

Cancer is a cellular disease where normal cells grow out of control to form tumours. Early Stage prostate cancer, when the tumour is contained within the gland, is often curable. This offers a wider choice of treatments. If the cancer escapes the gland, it is said to be Locally Advanced or Advanced. Locally Advanced cancer may in some cases be curable; Advanced prostate cancers can only be controlled.

We simply do not know what causes prostate cancer. We do know the risk may be increased where there is a family history of prostate cancer and possibly breast cancer. The highest incidence of prostate cancer is found amongst the African-Caribbean male community.

It is believed that a Western diet, high in saturated fats, and obesity may contribute to the development and progression of the disease.

*It is also known that many men may have early stage prostate cancer without ever having any symptoms.*

Unfortunately, owing to lack of knowledge, many men delay seeing their GP and may miss an important opportunity of detecting the cancer before it has spread.

**Early detection and early treatment could help save your life**

**Early stage prostate cancer does not generally have any symptoms. If you think you are at risk, such as having a family history of prostate or breast cancer, or have any of the symptoms below, it is important that you visit your doctor to discuss your concerns.**

## Symptoms

### Urinary symptoms:

- frequent need to urinate, especially at night
- bursting to urinate, slow flow, difficult, painful
- stop/start and dribbling, or blood in the urine

### Other symptoms:

- aches or pains in the lower back or upper thighs, the pelvic area, scrotum or penis
- difficulty getting and/or keeping an erection

## The GP and the Consultant

Your doctor will ask you about your concerns and may be able to identify a prostate problem by feeling the prostate through the wall of the rectum. This simple test is referred to as a Digital Rectal Examination (DRE).

In addition, a blood test should be requested to measure your Prostate Specific Antigen (PSA). There is controversy over the suitability and reliability of the PSA as a test for prostate cancer, but PCaSO recommends that all men at risk monitor their PSA annually and check for any abnormal rise.

PSA levels are dependent on many factors, and mildly elevated readings often do not indicate cancer. If your doctor has concerns, you will be referred to a specialist consultant for further tests at your hospital. If cancer is diagnosed, the results will help you and your consultant decide which treatment is appropriate for you.

**Any man over the age of 50 who asks for a PSA test after careful consideration of the implications should be given one.**