

WHAT EVERY MAN Should Know **ABOUT PROSTATE CANCER**

Prostate cancer is the most common non-skin cancer among American men. Prostate cancer begins in the tissues of the prostate gland, which is the male sex gland responsible for the production of semen and is located just below the bladder and in front of the rectum.

If caught early, prostate cancer is one of the most treatable malignancies.

More than

1 in 8 men will be diagnosed during his lifetime.



299,010 new cases of prostate cancer will be diagnosed.

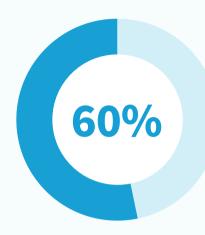
About

3 million American men

who were diagnosed at some point in their lives are still alive today.

Risk Factors

Knowing the risk factors can help you and your physician decide on a prostate cancer screening schedule that's right for you.

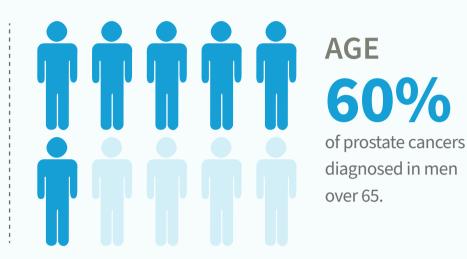


African-American men are about

RACE



more likely to develop prostate cancer than Caucasian or Hispanic men.





to develop the disease.



HIGH TESTOSTERONE

Men who use testosterone

therapy are more likely to develop prostate cancer. An increase in testosterone stimulates the growth of the prostate gland.



PROSTATIC INTRAEPITHELIAL NEOPLASIA (PIN)

PIN is a condition in which prostate gland cells look abnormal. Nearly one half of men will **be diagnosed** before age 50.



CHANGES Certain genes have

been known to elevate risks, such as BRCA1 and BRCA2 genes.

Treatment Options

Understanding the different treatment options is important for quality of life. Men who require treatment typically choose between surgery or radiation therapy. But many also opt for active surveillance as a first step.

Because prostate cancer is one of the most treatable malignancies when caught early, it is important to consider the side effects of treatment.



ACTIVE SURVEILLANCE

For patients whose prostate cancer is caught early, contained, not causing symptoms and expected to grow slowly.

Men are monitored closely for changes in the progression of their cancer and tested at regular intervals.

RADIATION THERAPY

Uses targeted energy to kill cancer cells, shrink tumors and provide relief of certain symptoms. Used to target difficult-to-reach tumors.

Two primary types of therapy: External beam radiation therapy and brachytherapy (internal radiation)

SURGERY

Surgery to remove the prostate gland is called a prostatectomy.

Being a candidate for surgery depends on type, size, location, grade and stage of the tumor, as well as patient's age and physical fitness.

HORMONE THERAPY

Form of systemic therapy that adds, blocks or removes hormones to slow or stop cancer cell growth, or shrink advanced tumors before they are treated with radiation.



Uses a drug combination to lower testosterone and other hormone levels.

BLADDER

NORMAL PROSTATE

The small. walnut-sized prostate wraps around the urethra, the tube that carries urine out of the body.

URETHRA

CANCEROUS PROSTATE

An enlarged, cancerous prostate would press against the urethra.

Understanding the Disease

Prostate cancer begins in tissues of the prostate gland. The prostate is the male sex gland responsible for the production of semen and is located just below the bladder and in front of the rectum.

Urinary symptoms can be associated with prostate cancer because of the prostate gland's proximity to the bladder and urethra.

Urinary symptoms

- Burning or pain
- Difficulty urinating or trouble starting and stopping while urinating
- More frequent urges to urinate at night
- Loss of bladder control
- Decreased flow or velocity of urine stream
 - Blood in urine

CHEMOTHERAPY

Typically used for patients with advanced or metastatic prostate cancer.

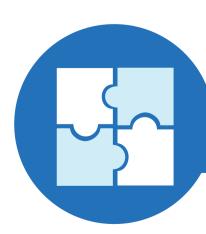
Carefully selected anticancer drugs designed to interfere with and stop the growth of rapidly dividing cancer cells.



IMMUNOTHERAPY

Typically reserved for metastatic and more advanced disease.

Uses immune system to fight cancer; treatment may be used alone or in conjunction with other treatments.



INTEGRATIVE CARE

An integrative approach to cancer care treats the disease with surgery, chemotherapy and other conventional tools, while also supporting patients' strength, stamina and quality of life with evidence-informed therapies like pain management and nutritional support.

Other signs and symptoms

- Blood in semen
- Erectile dysfunction
- Painful ejaculation
- Swelling in legs or pelvic area
- Numbness or pain in the hips, legs or feet
- Bone pain that doesn't go away or leads to fractures

Prevention and Screening Guidelines



Digital rectum exams

Doctor checks for abnormal lumps on the prostate gland and may order a biopsy.

Only 20 percent of men with abnormal test results actually have cancer.

PSA test

The National Comprehensive Cancer Network (NCCN) recommends that high-risk men begin annual PSA and prostate exams at age 40.

For more information, visit cancercenter.com

SOURCES www.cancer.gov; www.cdc.gov; www.nccn.org; www.cancer.org

