

SEPTEMBER 2013 • MEMBERS

Prostate Cancer

September is prostate cancer awareness month...

So it's a good time to think about prostate cancer. Let's review what we know about it. Prostate cancer is the most common cancer in men. It is the second most common cause of cancer-related death in men.¹ According to the American Cancer Society,¹

- About 238,600 men will be diagnosed with it in 2013.
- About 29,700 will die from it in 2013.
- 1 of every 6 men will have it.
- More than 90% of men live at least 10 to 15 years when it is diagnosed early.
- Only 28% of men live 5 years or more when it is diagnosed late.
- 93% of cases are diagnosed early.

Risk factors

There are 3 things that put a man at higher risk:

- Age (≥50 years)
- Prostate cancer in a father, brother, or son
- African American race

A diet high in processed meat or dairy foods may also be a risk factor. Men who are overweight or obese have a greater risk for advanced prostate cancer.

Symptoms

There are usually no symptoms in the early stage. As the cancer advances, men may have:

- Blood in the urine or semen
- Trouble when starting to pass urine
- Weak flow of urine
- Trouble completely emptying the bladder
- Frequent need to pass urine, especially at night
- Pain or burning when passing urine
- Pain in the back, hips, or pelvis
- Pain when ejaculating

These symptoms are not specific to cancer. Some may be seen in men with benign prostatic hyperplasia (BPH) or other conditions. If a man has any of these symptoms, he should talk with his doctor to find out exactly what the cause is.



Facts about prostate cancer and screening

- Prostate cancer is very common.
- Most prostate cancers progress slowly and will not bother the patient.
- Some prostate cancers cause death.
- Screening increases the chance of early diagnosis and cure.
- Screening tests can be positive when there is no cancer.
- Follow-up biopsy can cause soreness, blood in the urine, bleeding from the rectum, or infection. These occur in no more than 1/3rd of men.
- Side effects from treatment can be mild or serious. They include:
 - Difficulty in getting an erection or keeping one long enough for sexual activity
 - Decrease in, or loss of, bladder control
 - Bowel problems: diarrhea, urgency, frequent bowel movements, or pain
 - Small risk of death or serious complications
- Not all men with prostate cancer need treatment.
- It's hard to know which cancers need treatment and which do not.

Prostate cancer screening

Two tests are available for screening: the digital rectal exam (DRE) and the PSA. The doctor can do a DRE in his/her office. The PSA test is done by a laboratory using a blood sample. These tests are good at finding the cancer early.

Men generally don't start screening until the age of 50. They might start earlier if they are African American or have a close relative with prostate cancer.

Screening recommendations

Some experts recommend screening and some do not. A couple of large studies have been done to try to show whether screening saves lives. But these studies had different results. So right now, the decision is pretty much left up to the man and his doctor.

Making an informed decision

When deciding whether to be screened, a man should look at:

- The facts about prostate cancer and screening (on page 1)
- His medical history and risk factors
- His age and current health
- His lifestyle
- His feelings and preferences

References

1. American Cancer Society. Cancer Facts and Figures 2013. <http://www.cancer.org/acs/groups/content/@epidemiologysurveillance/documents/document/acspc-036845.pdf>. Accessed July 19, 2013.