

## Prostate cancer

The prostate gland is part of the male reproductive system. It produces some of the fluid that makes up semen. Prostate cancer affects one in 11 Australian men and is common in the over-65 age group. Around 5600 Victorian men are diagnosed with prostate cancer every year. Many cases are not life threatening because the cancer may be slow growing and usually occurs in older men.

### Risks and causes of prostate cancer

The exact causes of prostate cancer are unknown. However, there are some risk factors we know about including:

- **Getting older** – more than half of all cases are diagnosed in men over 70 years of age.
- **Family history** – having a family history of prostate cancer. Your risk is increased if you have a father or brother who had prostate cancer. The risk becomes greater if they were diagnosed at an early age.
- **Family history of breast cancer** – having a strong family history of breast cancer.
- **Obesity** – having a waist circumference of 100cm or greater could increase your risk.

Researchers are constantly looking at ways to help prevent cancer. Eating a healthy diet can lower your risk of many cancers, but it's still too early to say whether diet can affect prostate cancer risk.

### Symptoms of prostate cancer

Early prostate cancer usually causes no symptoms. When symptoms do occur, they may include:

- Difficulties starting and stopping urination
- Pain or a burning sensation when passing urine
- Urinating more often than usual, particularly at night
- The feeling that the bladder can't be fully emptied
- Dribbling urine
- Blood in the urine or semen
- Pain during ejaculation.

All of these symptoms can also be caused by conditions other than prostate cancer. You should discuss them with your doctor.

### Diagnosing prostate cancer

Prostate cancer is diagnosed using a number of tests, which may include:

- **Prostate specific antigen (PSA) test** – the prostate makes a protein called PSA. Large quantities of PSA in the blood can indicate prostate cancer or other prostate problems.
- **Digital rectal examination** – using a gloved finger in the back passage, the doctor feels for enlargement and irregularities of the prostate.
- **Biopsy** – six to 12 tissue samples are taken from the prostate and examined in a laboratory for the presence of cancer cells.

If prostate cancer is diagnosed, more tests may be needed to see if the cancer has spread to other areas of the body. These may include computed tomography (CT) scans, magnetic resonance imaging (MRI) scans and bone scans.

Test results can take a few days to come back. It is very natural to feel anxious waiting to get your results. It can help to talk to a close friend or relative about how you are feeling. You can also contact the Cancer Council Helpline on 13 11 20 and speak with a cancer nurse.

## Treatment options for prostate cancer

Prostate cancer treatment depends on a range of factors such as the man's age, physical condition, the stage of his prostate cancer and his personal preference. Treatment options include:

- **Watchful waiting** – sometimes your doctor will advise that treatment is not needed. However, you will still need to be examined and have PSA tests regularly to monitor any changes. This is usually for older men (over 70) with a slow growing cancer. This is because older patients with slowly growing cancer are more likely to die of something else other than prostate cancer. If the cancer begins to grow too fast or you develop symptoms then your doctor will discuss treatment to help control your symptoms.
- **Active surveillance** – means regular PSA tests and repeat biopsies. It is sometimes offered to younger men with a very early-stage prostate cancer. It involves very close monitoring with early, curative treatment in those with evidence their disease is progressing.
- **Surgery** – removal of the prostate is called a radical prostatectomy. The operation can be performed by open surgery (the traditional way), or by a 'keyhole' (laparoscopic) approach. Depending on whether the surgery is open or 'keyhole', hospital stay is one to 10 days. Recovery can take up to six weeks.
- **Transurethral resection of the prostate (TURP)** – if the prostate can't be removed, TURP surgery may be performed to remove blockages in the prostate to relieve urination (peeing) problems.
- **External radiotherapy** – x-rays are used to target and destroy cancer cells. Treatment usually lasts a few weeks, although this depends on the cancer and the person's general health.
- **Internal radiotherapy (brachytherapy)** – a radioactive implant is placed inside the prostate to target cancer cells. The implant may be temporary or permanent.
- **Hormone therapy** – prostate cancer relies on the hormone testosterone for growth. Hormone therapy reduces testosterone levels and 'starves' the tumour – this is given with either medication or hormone injections. Sometimes surgical removal of the testicles (orchidectomy) is suggested which has the same effect.
- **Complementary and alternative therapies** – when used alongside your conventional cancer treatment, some of these therapies can make you feel better and improve quality of life. Others may not be so helpful and in some cases may be harmful. Details of the Cancer Council Victoria's booklet *Complementary and alternative cancer therapies* are in the **Where to get help** section.

## Possible side effects of prostate cancer treatment

The side effects of treatment vary from man to man depending on several factors. However, side effects can be distressing. You should talk through options and concerns with your doctor before making a choice. The most common side effects include:

- **Surgery** – many men will have temporary urinary incontinence (loss of bladder control). Almost all men will have a change to their sexual function and most men will have erectile dysfunction (impotence).
- **Radiotherapy** – a small number of men will have bowel problems. Between 40 and 80 per cent of men who have radiotherapy will experience immediate or delayed erectile dysfunction.
- **Brachytherapy** – erectile dysfunction and bowel problems can occur. Some men may experience painful urination and irritation of the bladder for several months after therapy. Urinary incontinence is not usually a problem.
- **Hormone therapy** – side effects may include erectile dysfunction, tiredness, mood changes, hot flushes and loss of sex drive.

Coping with some of these side effects can be very difficult. It is important you discuss possible side effects with your specialist before treatment.

## When a cure isn't possible

If the cancer has spread and it is not possible to cure it with surgery, your doctor may still recommend treatment that focuses on improving quality of life by relieving the symptoms (this is called palliative treatment).

## Caring for someone with cancer

Caring for someone with cancer can be a difficult and emotional time. If you or someone you know is caring for someone with prostate cancer they may find it helpful to download and read some of the Cancer Council Victoria booklets that are available.

## Where to get help

- Your local doctor
- Urologist specialist
- Urology or continence nurse
- Cancer Council Helpline, which can link you to prostate cancer support groups Tel. 13 11 20
- Continence Foundation of Australia Tel. 1800 330 066
- Multilingual Cancer Information Line, Victoria Tel. (03) 9209 0169
- Cancer Council Victoria's booklet *Complementary and alternative cancer therapies..*

## Things to remember

- Prostate cancer affects one in 11 Australian men and is most common in men over 65.
- Prostate cancer can be treated in a variety of ways, including watchful waiting, surgery, radiotherapy and hormone therapy.
- Possible side effects of treatment include incontinence and impotence – treatment options should be discussed thoroughly with your doctor.

**This page has been produced in consultation with, and approved by:**

Cancer Council Victoria

Content on this website is provided for education and information purposes only. Information about a therapy, service, product or treatment does not imply endorsement and is not intended to replace advice from your doctor or other registered health professional. Content has been prepared for Victorian residents and wider Australian audiences, and was accurate at the time of publication. Readers should note that, over time, currency and completeness of the information may change. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions.

For the latest updates and more information, visit [www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)

**Copyright** © 1999/2012 State of Victoria. Reproduced from the Better Health Channel ([www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)) at no cost with permission of the Victorian Minister for Health. Unauthorised reproduction and other uses comprised in the copyright are prohibited without permission.