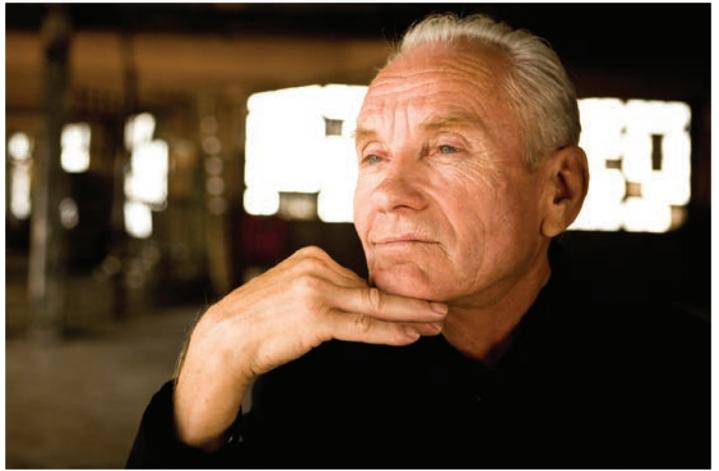




Prostate Cancer



Basic description

In American men, prostate cancer is the most common cancer (other than skin cancer) and the second leading cause of cancer death. Most prostate cancers grow very slowly, but when they spread, they can do so quickly. Most early cases of prostate cancer cause no symptoms, but some early signs may be frequent urination, especially at night; blood in urine; difficulty starting urination or inability to urinate; and weak or painful urination.

Opportunities

Prevention Although the causes of prostate cancer are not yet completely understood, researchers have found several factors that increase the risk of developing the disease. Many risk factors, such as a man's age, race, and family history, are beyond his control, but since high-fat diets have been linked to prostate cancer, eating a diet that is low in saturated fat and red meats and high in fruits, vegetables, and whole-grain foods may help reduce a man's risk for developing the disease. In large clinical trials, drugs such as finasteride and dutasteride have been shown to lower prostate cancer risk, although these medicines are not without side effects.

Detection At this time, there is insufficient evidence to recommend for or against routine prostate cancer screening for average-risk men. For this reason, the American Cancer Society does not recommend routine screening for prostate cancer. Rather, the American Cancer Society recommends average-risk men, beginning at age 50, have the opportunity to make an informed decision about screening after discussing the potential benefits and limitations of prostate cancer early detection testing with a health care professional. Men at higher risk, including African American men and men with a first-degree relative diagnosed with prostate cancer before age 65, should have this conversation with their doctor beginning at age 45. Men at even higher risk (because they have several close relatives diagnosed with prostate cancer at an early age) should have this discussion with their doctor at age 40. If a man chooses to be tested, the recommended test is the prostate-specific antigen (PSA) test with or without a digital rectal exam (DRE).

Treatment If prostate cancer is found early, treatment with curative intent is often given. Such treatment usually consists of either radical prostatectomy or radiation. If the cancer is believed to be slow growing and is not causing symptoms, "watchful waiting" may be chosen, especially for older men. Active treatment will be started later if the cancer begins to grow more quickly or symptoms appear. For cancer that has spread beyond the prostate gland, treatments such as hormone therapy, chemotherapy, and or immunotherapy may be recommended.

Prostate Cancer

Who is at risk?

Age Although men of any age can get prostate cancer, the chance of having it increases rapidly after age 50. More than 60% of all prostate cancers are diagnosed in men older than 65.

Racial/Ethnic background African American men have the highest documented prostate cancer incidence rates in the world. Furthermore, in the US, the prostate cancer death rate for African American men is more than twice the rate for white men.

Other risk factors

- **Family history** Having a father or brother with prostate cancer more than doubles a man's risk of developing it. The risk is much higher for men with several affected relatives, especially if their relatives were young when the cancer was found.
- **Diet** A high-fat diet may play a part in causing prostate cancer.

Quality-of-life issues

From the time of diagnosis, the quality of life for every cancer patient and survivor is affected in some way. They may be affected socially, psychologically, physically, and spiritually.

Concerns that patients and survivors most often express are fear of recurrence; chronic and/or acute pain; sexual problems; fatigue; guilt for delaying screening or treatment, or for doing things that may have caused the cancer; changes in physical appearance; depression; sleep difficulties; changes in what they are able to do after treatment; and the burden on finances and loved ones. For prostate cancer patients and survivors, quality-of-life concerns most often revolve around the potential for incontinence and sexual dysfunction.

Bottom line

Age and gender are the main risk factors for developing prostate cancer. Detecting prostate cancer in an earlier, more treatable form may increase the success of treatments and survival. All men age 50 and older should talk to their doctors about the risks and benefits of prostate cancer testing to decide if it's right for them. Men diagnosed with prostate cancer should discuss all available treatment options with their doctor, especially since it is not clear whether all men need to be treated for prostate cancer right away.

Prostate cancer in the United States: 2014 estimates

- New cases: 233,000
- Deaths per year: 29,480
- 5-year relative survival rate for localized stage: 100%
- 5-year relative survival rate for all stages combined: 99%
- 10-year relative survival rate for all stages combined: 99%



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