

### **About Prostate Cancer**

Prostate cancer can start in any area of the prostate. The prostate is a gland found only in males. In the US, prostate cancer is the most common type of cancer in men (other than skin cancer) and the second-leading cause of cancer death (after lung cancer) among men.

### **Risk Factors**

- Age Men of any age can get prostate cancer, but the risk of having it is higher after age 50.
- Race/Ethnicity The risk of getting prostate cancer is higher in African-American men and in Caribbean men of African ancestry than in men of other races.
- Family history Men who have a close relative (father or brother) who has had prostate cancer are at a higher risk of developing this disease. Having more than one close relative who has had the disease increases the risk even more, especially if their relatives were young when the cancer was found.
- Inheriting gene changes Certain gene changes (most commonly BRCA1 and BRCA2 genes) or having Lynch syndrome can increase a man's risk of getting prostate cancer.
- **Diet** Men who eat a lot of red meat or high-fat foods may have a higher risk of getting prostate cancer.

### **Prevention**

There is no sure way to prevent prostate cancer, and some risk factors can't be changed such as age, race, and family history of the disease. But there are some things that might help lower the risk. Regular physical activity, staying at a healthy weight, and eating a diet high in vegetables and low in fat might help lower the risk of prostate cancer.

# **Screening and Early Detection**

Screening is testing for cancer in people who have no symptoms. At this time, it's not clear if the benefits of prostate cancer screening outweigh the risks for most men. The American Cancer Society recommends that men have a chance to make an informed decision with their health care provider about whether to be screened for prostate cancer. The decision should be made after getting information about the risks and potential benefits of prostate cancer screening. **Men should not be screened unless they have received this information.** The discussion about screening should take place at:

- Age 50 for men who are at average risk and are expected to live at least 10 more years
- Age 45 for men at high risk, including African
   Americans, Caribbean men of African ancestry, and
   men who have a first-degree relative (father or brother)
   diagnosed with prostate cancer at an early age
   (younger than 65)
- Age 40 for men at even higher risk, including those with more than one first-degree relative who had prostate cancer at an early age

After this discussion, men who decide to get screened should be tested with the prostate-specific antigen (PSA) blood test. Some doctors might do a digital rectal exam (DRE) as part of screening. How often a man is tested will depend on their PSA level, general health, preferences, and values.

## **Signs and Symptoms**

Early-stage prostate cancer usually has no symptoms. More advanced prostate cancer (cancer that may have spread outside the prostate) may have symptoms, such as:

- Problems urinating like pain or burning during urination or the need to urinate more often, especially at night
- Blood in the urine or semen
- Trouble getting an erection
- Weakness or numbness in the legs or feet, or not being able to control the bladder or bowel from cancer pressing on the spinal cord
- Pain in the hips, spine, ribs, or other areas from cancer that has spread to the bones

#### **Treatment**

Treatment for prostate cancer depends on the type and stage of the cancer, special testing that might be done on the tumor, as well as the person's age, other health problems, and the personal choices. Men who are diagnosed with prostate cancer should discuss all treatment options and make informed treatment decisions together with their doctors.

## **Living With Prostate Cancer**

From the time a person is diagnosed with prostate cancer, their quality of life is affected in some way. Different physical, social, psychological, spiritual, and financial issues come up at any time during the cancer experience and after treatment is over.

Some types of prostate cancer can be serious. Palliative care is focused on helping to improve the quality of life and dealing with issues that people living with a serious illness might have. People with advanced prostate cancer may benefit from having palliative care at any time from the point of diagnosis, throughout treatment, and beyond.

Good communication between a person with cancer and the health care team is important and involves:

- · Asking and answering questions
- · Working together to set care goals
- Making shared decisions
- Managing side effects and other issues
- Making sure to schedule follow-up tests and care

To learn more, visit www.cancer.org/cancer/prostate-cancer/about.html.



