

# Mental Health Linked to Higher Death Rates Among Those With Urological Cancers

Mental health care before cancer treatment is associated with higher death rates for those with kidney, prostate or bladder cancer.

March 22, 2019 By [Alicia Green](#)

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Sometimes, a cancer diagnosis or even cancer treatment can affect a person's mental health. Now, according to new study findings presented at the 2019 European Association of Urology Congress (EAU19), treatment for mental health issues prior to treatment for prostate cancer and other urological cancers is associated with higher death rates, according to an [EAU19](#) press release.

In their first analysis, researchers evaluated the mental health records of more than 190,000 Canadians from Ontario with prostate, bladder or kidney cancer. Participants were assigned a score based on whether they had used mental health services within the previous five years and were matched to a group of people who did not have any cancers.

Those who had received psychiatric care before cancer treatment had an increased risk of death from their specific cancer compared with those who had received no such mental health treatment. What's more, the risk increased with the intensity of the previous mental health treatment. Indeed, individuals who had been hospitalized for mental illness were 1.78 times more likely to die from cancer than those in the control.

A second analysis examined suicide rates following diagnosis and treatment of prostate, bladder and kidney cancers. Like those of past studies, these findings indicated a higher risk of suicide after diagnosis. Overall risk increased by 16 percent for people who were diagnosed with these cancers and rose by nearly 40 percent in those with no previous history of mental health treatment.

According to lead study researcher Zachary Klaassen, MD, of the Georgia Cancer Center in Augusta, these findings highlight "the importance of identifying at-risk patients and having a multidisciplinary approach (including psycho-oncology) to managing these patients."

[Another study](#) presented at EAU19 reported that hormone treatment may be a driving factor for

depression in men with prostate cancer. An investigation into more than 5,000 Danish men found that 773 of these individuals were treated for depression following surgery.

Men who were treated with hormone therapy after prostate removal surgery (prostatectomy) were 80 percent more likely to suffer from depression compared with those who didn't receive this treatment. Hormone therapy prevents the production of testosterone and other male hormones that spur prostate cancer growth.

"It is important to note that compared to men without prostate cancer, the patients treated with prostatectomy as a whole had an increased risk of depression," said lead researcher Anne Sofie Friberg, MD, of the Rigshospitalet in Copenhagen. "After surgery, erectile dysfunction and urinary incontinence are frequent symptoms."

Friberg continued, "In case of recurrence and hormonal treatment, these symptoms may worsen, and in addition, altered body image and loss of libido are common. These treatment effects are likely to increase the risk of depression. Also, low testosterone levels may directly affect mood centers of the brain."

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