Cancer

Prostate Cancer

What is prostate cancer?
Cancer develops when cells grow out of control. Prostate cancer is a typically slow-growing cancer of the prostate gland, a walnut-sized organ located under the bladder and in front of the rectum. But in some cases, the cancer can grow rapidly and spread beyond the prostate, a process known as metastasis.

Who gets prostate cancer?

Prostate cancer is the most common cancer in men besides skin cancer, and 1 in 7 men will be diagnosed with the disease in their lifetime. About 164,700 men in the United States will develop prostate cancer this year, according to the American Cancer Society. But because it usually progresses slowly, the death rate is relatively low at around 29,400 per year.

Older men are more likely to get prostate cancer. About 60 percent of cases are diagnosed in men age 65 or older, and it is rare in men under 40. African-American men are more likely to develop prostate cancer that white or Hispanics men, while Asian men have a lower risk.

What are the risk factors for prostate cancer?
The major risk factors for prostate cancer are genetics and family history. Studies looking at the link between prostate cancer and a diet high in red meat, chemical exposures including smoking, sexually transmitted infections and having had a vasectomy have produced conflicting results.

What is prostate cancer screening?

Doctors primarily use two tests to screen for prostate cancer: the prostate-specific antigen (PSA) blood test and the digital rectal exam (DRE), in which a finger is inserted into the rectum to feel for lumps or swelling of the prostate.

Experts disagree about when prostate cancer screening should be done. Because it usually grows slowly, most men with prostate cancer will die from other causes and early treatment carries some risks. The American Cancer Society and others recommend that men between the ages of 55 and 70 men should make an individual decision about screening. African American men and those with a family history of prostate cancer should discuss screening with their provider sooner, at age 45.

What are the symptoms of prostate cancer?
Usually early-stage prostate cancer, when tumors are small, causes few or no symptoms. As

cancer progresses, some men may experience symptoms including:

- A frequent urge to urinate
- Difficulty urinating
- Blood in the urine or semen
- Difficulty getting an erection
- Pain in the lower back and hips

Some of these symptoms may also be caused bynoncancerous enlargement of the prostate, known as benignprostatichyperplasia. Men with metastatic prostate cancer may experience other symptoms, such as bone pain, as the cancer spreads.

How is prostate cancer diagnosed?

The process of diagnosing prostate cancer starts with a physical exam and health history. A doctor may do a digital rectal exam to determine the size and location of tumors. A biopsy, or small tissue sample, may be taken and examined in the laboratory to see if a growth is cancerous or benign. PSA tests and transrectal ultrasound (TRUS) imaging may be done to determine how advanced the cancer is. Other imagining methods such as computed tomography (CT) and MRI scans may be used to check whether the cancer has spread.

How is prostate cancer treated?

Treatment for prostate cancer depends on how advanced the cancer is when it is detected, including how large it is and whether it has spread to nearby lymph nodes or other parts of the body.

Watchful waiting: a common approach is active surveillance, meaning treatment is not started immediately but the cancer is monitored using regular scans and PSA tests to see whether it progresses.

Surgery: Surgery for prostate cancer usually removes the entire prostate gland, known as radical prostatectomy. This can lead to side effects including urinary incontinence and problems getting an erection.

Cryotherapy: Very cold temperatures may be used to destroy cancer cells by freezing, especially for early-stage or recurrent prostate cancer.

Radiation: Radiation may be used to kill any cancer cells that remain after surgery or to shrink tumors that cannot be surgically removed. It is often used in conjunction with other forms of treatment.

Chemotherapy: Traditional chemotherapy works by killing fast-growing cells, including cancer cells. It can also destroy rapidly dividing healthy cells, such as those in the gut or hair follicles, leading to side effects including nausea and hair loss.

Hormone therapy: Androgen deprivation therapy works by depriving tumors of male hormones that stimulate their growth. Side effects may include reduced sexual desire, hot flashes, bone loss and breast enlargement.

Immunotherapy: The newest type of treatment helps the immune system fight cancer. One method involves removing a sample of T cells, training them in the laboratory to attack cancer cells and putting them back into the body. So far this type of vaccine is only approved for prostate cancer that has stopped responding to hormone therapy. Immunotherapy drugs known as checkpoint inhibitors are not very effective against prostate cancer on their own, but researchers are studying combination approaches that appear more promising.

Click here for a list of approved medications used to treat prostate cancer.

For more information about prostate cancer, please visit our sister site Cancer Health.

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