

Prostate Cancer

Prostate cancer afflicts 1 in 6 American males according to The National Prostate Cancer Coalition. Risk factors for prostate cancer noted by The National Institute of Health include

- Age
- Family history
- African American ethnicity
- Diet high in saturated fat

In fact, over 65% of all patients diagnosed with prostate cancer are over the age of 65. Depending on an individual's risk factors, a doctor can recommend when patients should begin PSA screening for prostate cancer. It is possible for a male to have no risk factors and still develop the disease just as it is possible for a man to have many risk factors and never develop prostate cancer.

Symptoms of Prostate Cancer

Prostate cancer can be often asymptomatic but can often presents with symptoms, including the

- Need to urinate frequently, particularly at night
- Difficulty starting urination
- Weak flow of urine
- Incomplete voiding
- Pain or burning with urination
- Difficulty in obtaining erection
- Blood in urine or semen
- Painful erection

If you have any of the above symptoms, talk to your doctor immediately. These symptoms can be caused by prostate cancer but also by other less serious medical problems including Benign Prostatic Hyperplasia or BPH (non-cancerous prostate growth) and prostatitis (inflammation of the prostate).

Prostate Cancer Screening

The main screening tools for prostate cancer recommended by the American Cancer Society are a blood test called prostate specific antigen (PSA) and digital rectal exam (DRE). PSA is a commonly available blood test. Elevated PSA does not always indicate cancer. BPH and prostatitis are also common causes of elevated PSA. Only a biopsy can determine whether an

elevated PSA indicates an underlying prostate cancer.

Prostate Cancer Treatment Options

If prostate cancer is found by biopsy, possible medical approaches espoused by the National Comprehensive Cancer Network (NCCN) include

- surgically removing the prostate (prostatectomy)
- radiation therapy (utilizing tight x-ray beams or radioactive seed implants to eradicate the tumor)
- 'watchful waiting' without treatment

According to the American Urological Association (to which almost all US urological surgeons are members) Clinical Guideline, No Information has shown one treatment is better than the other. Studies have shown that early stage prostate cancer has equivalent survival with either surgery or radiation therapy. Four facts are very important when choosing a treatment for prostate cancer. These are how long a life you are expected to live (life expectancy), your overall health status, the tumor's characteristics (as discussed above) and your values or personal preferences:

Life Expectancy: How long are you expected to live?

Life expectancy, rather than patient age, is important to keep in mind when choosing a treatment. When a man's life expectancy is quite long, localized prostate cancer may cause illness and death. In the later years or when he has other serious diseases, the chance that a man's cancer will get worse or that he will die from prostate cancer is less.

Overall Health Status: What other health problems do you have?

Overall health status includes your health history and your family health history. It also includes your current health and the seriousness of any other diseases you may have. Overall health influences how long a man will live. For some men, their overall health may influence the risk of problems they may experience with some prostate cancer treatments. Urinary, sexual and bowel functions may be affected by certain treatments in some men more than others.

Values or Personal Preferences: What is important to you?

Each man has different priorities when deciding whether to be treated for his prostate cancer. If he wishes to be treated, he also may have different values when choosing the best treatment.

Some men want their cancer removed, no matter how old they are or what grade or stage their tumor is. They are willing to face the complications of the treatments for the chance of a cure. Others are worried about how certain treatments could affect the quality of their lives. Their choice may be made in order to avoid certain complications. Each man's personal values, when discussed with his family members, are the most important issues in choosing a treatment. Hormonal inhibitors of the prostate cancer are sometimes prescribed in the treatment of prostate cancer after radiation. In more advanced stages, patients sometimes need chemotherapy to limit their disease and improve survival. Potential side effects of surgery include, but are not limited to pain, infection, erectile dysfunction, and incontinence (the inability to control urination). Radiation Therapy also has known side effects, including but not limited to erectile dysfunction and proctitis (inflammation of rectum). Ask your doctors which approach is best for your disease.

CT Scan Image Guided Radiation Therapy (IGRT) using Intensity Modulated Techniques (IMRT) is the preferred latest method of precise radiation published of in the meeting of the American Society of Therapeutic Radiation Oncology (ASTRO) of external beam radiation of prostate cancer based on many clinical trials. On December 1st, 2009, the Corpus Christi Precision Cancer Center became the first radiation center in Corpus Christi to offer precision real time cone beam CT Scan Image Guided Radiation Therapy. Treatment planning for radiation therapy is performed using a 16 slice Philips Brilliance™ CT scan quipped with respiratory gating which enables 4-Dimensional planning for superior radiation treatment delivery. Call 361-334-5130 today for a consult with a physician to assess what the best choice is for you.