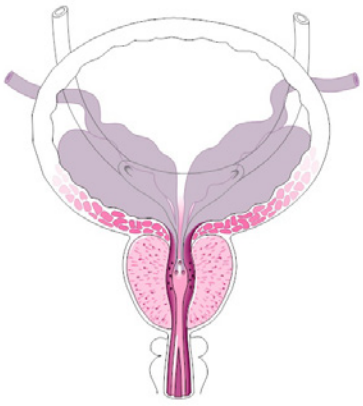
UniPath
Palm Beach Pathology
Eastern Carolina Pathology

PROSTATE CANCER

Prostate Cancer

Prostate cancer is a malignant tumor that begins in the prostate. It is important to quickly and effectively evaluate the extent of the prostate cancer. Through a pathologist review of a microscopic prostate tissue sample (biopsy), the surgical pathologist determines whether an abnormality exists and, if so, whether it is benign or malignant. The treatment and the outlook for your recovery depend on the grade and stage of the cancer. The system used most often for grading prostate cancer is called the Gleason system. Samples from two areas of the prostate cancer are each graded from 1 to 5, and the numbers are added to give a combined number called your Gleason score. The lower the number, the closer to normal your prostate cells look. The higher the number, the more abnormal your prostate cells look and the more likely the cancer is to grow more quickly. Your healthcare provider will recommend any additional testing that he/she feels are needed to evaluate the cancer prior to treatment.

Prostate Cancer Background Information



The prostate is an organ found only in men that is about the same size and shape as a walnut.

The prostate gland is located just below the bladder, in front of the rectum, and surrounds the urethra, the tube that carries the urine out of the body. In most men, prostate cancers grow very slowly, however in some situations, especially with younger men, it has been seen to grow more quickly. Prostate cancer is the most common type of cancer found in American men, other than skin cancer, with about 185,000 new cases diagnosed in the United States each year. The incidence of prostate cancer increases with age. Fortunately, most prostate cancers found in older men (>70 yrs) are of low risk to the patient.

Symptoms: After the age of 50, most men are given a DRE (digital rectal exam) and a PSA (prostate-specific antigen) blood test at their annual exam. Prostate cancer is often detected by these tests since symptoms are rare. An individual with late stage prostate cancer may experience pain during urination, blood in the urine and impotence. However, these symptoms are also common with other diseases and conditions so your physician should perform a biopsy to confirm the diagnosis.

Risk Factors: Although the cause of prostate cancer is unknown, it can sometimes be associated with known risk factors. Many risk factors are able to be changed, though not all can be eliminated.

Some of the most common risk factors are:

- *As men age, they have an increased risk of developing prostate cancer.*
- *A lack of exercise and diets high in red meat and dairy products and low in fruits and vegetables have been linked to prostate cancer.*
- *Individuals who have a family history of prostate cancer are at a higher risk for developing it. These individuals should likely be screened earlier and more frequently.*

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Follow-up and Treatment Options for Prostate Cancer

The treatment or therapy depends on the stage or grade of the cancer, your age, overall health and your feelings about the treatment options. Below is a listing of potential treatment options for prostate cancer. The main treatments for prostate cancer are surgery, radiation therapy and hormone therapy. Only a physician can determine the most appropriate treatment.

Watchful Waiting: One alternative to treatment is watchful waiting. Although this is not an active treatment, it may be a good choice for some men. Your doctor may suggest a "watch and wait" approach if you are older and if the cancer is small and has not spread outside the gland. Because prostate cancer often grows slowly, many older men who have the disease may never need any treatment.

Surgery: The purpose of prostate surgery is to remove the cancer from your body. The main types of prostate surgery are radical prostatectomy (removal of the prostate gland) and cryosurgery (freezing of the prostate).

Radiation Therapy: Radiation therapy involves the use of high-energy rays to kill cancer cells. Radiation therapy is focused directly on the affected area and is sometimes given after surgery to kill any remaining cancer cells. Radiation is used most often for cancer that has not spread outside the prostate gland, or has spread only to nearby tissue. If the disease is more advanced, radiation may be used to shrink the tumor and provide pain relief.

Hormone Therapy: Hormone therapy is designed to lower the level of male hormones, testosterone specifically, which is known to cause cancer to grow. By lowering the amount of testosterone, the cancer is likely to shrink or grow more slowly. This is a good alternative for patients whom surgery or radiation is not appropriate or for those whose cancer has spread outside of the prostate gland. Hormone therapy does not cure cancer, but can delay progression of the cancer and provide relief of the symptoms.

Questions to Ask Your Healthcare Provider

- *Are there any other tests that we need to perform?*
- *Where is my cancer located and has it spread?*
- *What treatment do you suggest?*
- *What are the benefits of this type of treatment?*
- *What are the risks and side effects of this treatment option?*
- *Is there anything I should be doing or not doing during treatment?*
- *What are the steps after treatment?*
- *What are the chances of recurrence after my treatment plan?*

Sources for Additional Information

- *American Cancer Society:* **www.cancer.org**
- *National Cancer Institute:* **www.cancer.gov**
- *CancerCare:* **www.cancercare.org**