

Lifelines

from the National Cancer Institute



Information for Hispanic Men on Prostate Cancer

By the National Cancer Institute

It is not always easy to talk about prostate cancer. For some, it may be an embarrassing topic; for others, it may be a confusing subject—especially when it comes to prostate cancer screening and treatment options. But prostate cancer is the second most common cancer among men in the United States, so one fact is crystal clear—it's time to start talking about it.

For Hispanic men, prostate cancer is the most commonly diagnosed cancer and is the third leading cause of death, according to the National Cancer Institute (NCI). National Prostate Cancer Awareness Month is the perfect time to learn about the latest findings and advances in prevention, screening, and treatment.

Prevention

What if you could prevent prostate cancer? Well, cancer researchers are working on it. In 2003, the NIH-sponsored Prostate Cancer Prevention Trial showed that finasteride, a drug approved for the treatment of benign prostatic hyperplasia (a noncancerous enlargement of the prostate), reduced the risk of developing prostate cancer by 25 percent. In 2010, a similar drug, dutasteride, was also found to reduce the risk of prostate cancer. Although neither drug has yet been approved for the prevention of prostate cancer, two major medical organizations (ASCO and AUA) recommend that men who are receiving regular prostate cancer screening talk with their doctors about whether these drugs might be right for them. To learn more about prostate cancer prevention, visit www.cancer.gov (*search term*: prostate cancer prevention), or call 1-800-4-CANCER.

Screening

A lot of controversy has surrounded prostate cancer screening. Screening for prostate cancer using the prostate-specific antigen (PSA) test leads to early detection of prostate cancer. But so far, there is little evidence that PSA screening reduces deaths from the disease. The reason that screening is not the solution to the prostate cancer problem is that many cancers diagnosed and treated as a result of PSA screening would never have caused symptoms or threatened a man's life. In addition, some prostate cancers will relapse and ultimately prove fatal despite having been detected by screening and treated at an early stage. To screen or not to screen—that has become the question. What's the answer? It depends—that's why being informed is so

important. Decisions about screening tests can be difficult because not all screening tests are helpful and all are associated with at least some risk. Before having PSA screening or any screening test, you should talk with your doctor about the potential benefits and known harms of screening in your own particular situation. This way, you can make a decision that reflects your own values and personal preferences.

Treatment

Today, men with prostate cancer have many more treatment options than they did even a decade ago. But the treatment that is best for one man may not be best for another. Many factors must be taken into account. These include a man's age, health status, and how advanced the disease is at diagnosis. Treatment options may include active surveillance (which means that you will be followed closely with testing and offered treatment if test results change in certain ways), surgery, radiation therapy, hormone therapy, chemotherapy and combinations of treatments. New treatments are being studied all the time, so it's important to stay informed. This spring, the Food and Drug Administration (FDA) approved sipuleucel-T (PROVENGE[®]), to treat prostate cancer. This therapy is a cancer treatment vaccine that is created using a patient's own immune cells.

Your doctor can describe your treatment choices, the expected results of each, and the possible side effects. You and your doctor can work together to develop a treatment plan that meets your medical and personal needs. You may also want to talk to your doctor about taking part in a clinical trial of a new prostate cancer treatment (www.cancer.gov, *search term*: clinical trials).

Information

You can always visit www.cancer.gov at any time for all the latest research on prostate cancer. If you see a story about prostate cancer in the newspaper or on the television and you're not sure how the findings might affect you, call the NCI Cancer Information Service toll-free at 1-800-4-CANCER (1-800-422-6237). A trained Cancer Information Specialist will answer your questions *in Spanish or English* and direct you to resources. There are many ways to start a conversation about prostate cancer -- with a call to 1-800-4-CANCER, a chat with a relative about information you found on www.cancer.gov/espanol, or a discussion about screening or treatment with your doctor. It's time to start talking about prostate cancer.

NCI leads the National Cancer Program and the NIH effort to dramatically reduce the burden of cancer and improve the lives of cancer patients and their families, through research into prevention and cancer biology, the development of new interventions, and the training and mentoring of new researchers. For more information about cancer, please visit the NCI Web site at www.cancer.gov or call NCI's Cancer Information Service at 1-800-4-CANCER (1-800-422-6237).