

Deciding What Treatment Path is Best for You

When you find out that you have prostate cancer, a normal reaction is to wonder what treatment options are available. Your prostate cancer treatment options depend on several factors, including the Grade (aggressiveness) of your cancer, how much it has spread and your overall health and age, as well as the benefits and the potential side effects of the treatment. The best way to make your decision is to read information about all the treatment options, talk to your physician, and then take into account all the factors you should consider in your treatment and recovery. This handout will give you a brief outline of the various treatment options available. We recommend the following website as a resource for you: http://www.urologyhealth.org/.

Active Surveillance:

This approach isn't right for everyone, but can be selected if you have:

- A small tumor that's limited to the prostate
- A slow growing cancer
- A low risk that the cancer will cause health problems in your life span.

With active surveillance treatments such as surgery and radiation therapy are put off because tests indicate that the tumor is slow growing. You will be actively monitored and periodically reevaluated to ensure the tumor hasn't changed characteristics or become more active. Your healthcare team will monitor your PSA level, perform periodic digital rectal exams, and may re-biopsy you at certain intervals to check your Gleason score.

Urology of Virginia is one of a handful of programs that participates in a study protocol sponsored by the Canary Foundation's active surveillance research program. This program allows patients who select active surveillance to be followed in a national registry which also gives them access to some additional testing that one day may benefit their cancer treatment.

Robotic Surgery to Remove the Prostate Gland (Radical Prostatectomy):

Robotic surgery using the *DaVinci* robot is a common surgical choice to try to cure prostate cancer. The prostate gland, some surrounding tissue, and occasionally the pelvic lymph glands are removed with assistance from the robot that is controlled by the physician. Several small incisions will be needed in the abdomen to reach the prostate gland.

Side effects from the surgical procedure can include urinary incontinence and erectile dysfunction.

Radiation:

Radiation therapy uses high levels of radiation to kill prostate cancer cells or keep them from growing. Prostate cancer radiation can be produced in 2 ways: Outside of the body and inside of the body.

• Radiation that comes from outside of your body (external beam radiation). During external beam radiation therapy, you lie on a table while a machine directs high-powered energy beams to

your prostate cancer. You typically undergo external beam radiation treatments five days a week for several weeks. There are two types of external beam radiation: **IMRT** (Intensity Modulated Radiation) and **Proton Therapy**. Many studies demonstrate no difference in overall side effects between the two.

Radiation placed inside your body (brachytherapy). Brachytherapy involves placing many ricesized radioactive seeds in your prostate tissue. Your doctor implants the radioactive seeds in your
prostate where they emit a low dose of radiation to the cancer cells over a period of time. This
option is not a first choice if the prostate gland is unusually large.

Side effects of radiation therapy can include painful, frequent and/or urgent urination, as well as rectal symptoms, such as loose stools or pain when passing stools.

Delayed side effects include: blood in the urine, erectile dysfunction, and secondary cancers of the bladder and rectum (1%).

Hormonal Therapy:

Prostate cancer cells use testosterone to help them grow. Hormone therapy, also known as ADT (androgen deprivation therapy) is a treatment used to stop your body from producing the male hormone testosterone. Prostate cancer cells use the testosterone to help them grow. This therapy is normally utilized in conjunction with some types of radiation to more effectively attack prostate cancer cells.

Side effects of using hormonal therapy can be: hot flashes, reduced sexual desire, erectile dysfunction, fatigue, osteoporosis, weight gain, anemia, and muscle loss and changes in cardiovascular health.

Cryosurgery:

Cryosurgery is sometimes used to treat early-stage prostate cancer by freezing it, but most doctors use it as an option if the cancer has come back after other treatments. Very cold gases are passed through needles to freeze and destroy the prostate tissue under anesthesia. As with brachytherapy, this may not be a good option for men with large prostate glands. Cryosurgery is less invasive than radical prostatectomy, so there is usually less blood loss, a shorter hospital stay, shorter recovery period, and less pain than with surgery.

Short term side effects can include blood in the urine, swelling of the penis or scrotum, and pain and burning sensation in the rectum and bladder. Long term side effects can be erectile dysfunction and urinary incontinence.

HIFU:

High Intensity Focused Ultrasound (HIFU) uses sound waves to create heat at a precise point. HIFU is used to heat and destroy targeted tissue during a 1-4 hour outpatient procedure, depending on the size of the prostate. HIFU is not a covered service by many insurance companies.

Side effects include urethral strictures and fistulas.