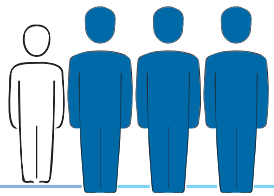


Understanding localized prostate cancer

This resource is for men who have been diagnosed with localized prostate cancer, which is also known as early stage disease.



3 in 4

Canadian men diagnosed with prostate cancer have early stage disease.

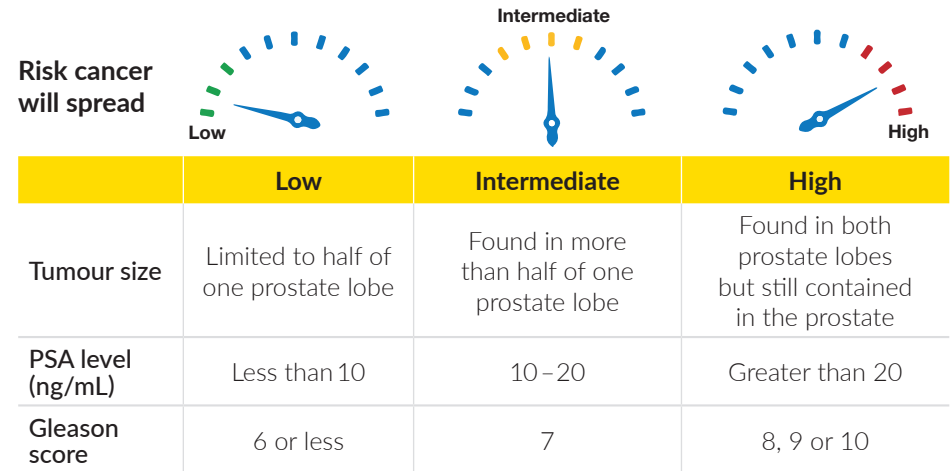
Close to **100%** of men diagnosed with early stage prostate cancer will be alive 5 years after diagnosis

because the cancer is slow growing

and can be treated or monitored successfully.

Will my cancer spread?

The cancer grade (Gleason score), tumour size and your prostate specific antigen (PSA) level will help your doctor rate the cancer based on how likely it is to spread. Your healthcare team may use these risk levels to help them develop a treatment plan.



Some prostate cancers grow very slowly, so active surveillance may be recommended. If symptoms develop or the cancer changes, other treatments are given.

Active surveillance for localized prostate cancer




Active surveillance

Used for these risk levels

- Is a treatment option that is offered if the prostate cancer is growing slowly and is not very large
- Can help delay or avoid other treatments that have side effects
- May include PSA tests, digital rectal exams (DREs) and biopsies
- If the tests show that your cancer is growing, your team may recommend other treatment options



Other treatments for localized prostate cancer




Surgery


Also called radical prostatectomy

- The goal is to remove the cancer from the body
- Involves removing the prostate, seminal vesicles and other surrounding tissue
- Different surgery techniques can be used:
 - Open surgery:** The prostate is removed through a single cut, most often made below the belly button
 - Laparoscopic surgery:** Several small cuts are made in the abdomen and the prostate is removed with special tools
 - Robotic radical prostatectomy:** Laparoscopic surgery can be done with the help of a robot, but not every hospital offers it. The surgeon guides the robot's arms to perform the surgery
- Nerve-sparing techniques may be used to reduce the risk of erectile dysfunction by trying to avoid nerves that control erections


Used for these risk levels



Low




Intermediate



High

Possible side effects


- Problems controlling urination
- Difficulty getting and keeping an erection




Radiation therapy

- Radiation damages and kills the cancer cells. It can be delivered in different ways:
 - External radiation therapy:** A machine targets the tumour with radiation
 - Brachytherapy:** Radioactive pellets (seeds) are placed in or near the prostate to kill the cancer and may be used alone or in combination with external radiation therapy

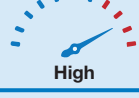
Used for these risk levels



Low




Intermediate



High

Possible side effects


- Problems controlling urination
- Difficulty getting and keeping an erection
- Bowel problems
- Fatigue




Hormone therapy

- Some men may receive short-term doses of hormone therapy, in addition to radiation therapy
- Hormone therapy slows the growth of the tumour by reducing levels of male hormones, like testosterone, which the cancer needs to grow

Used for these risk levels



Intermediate



High


Possible side effects

- Decrease in sex drive
- Difficulty getting and keeping an erection
- Hot flashes
- Muscle weakness

Review the benefits and side effects of each treatment option. Being informed will help you and your healthcare team choose the options that are right for you. You can also ask for a second opinion to make sure you are comfortable with the treatment decision.

Questions to ask your healthcare team

1. How quickly is my cancer growing? Is active surveillance a good treatment option for me?
2. If I am on active surveillance, how will my cancer be monitored? How will I know if I need other treatment?
3. What are the side effects of the different treatments? How mild or serious can they be? Will they be short term or long lasting?
4. What other risks or complications might I have from treatment?
5. Can I prevent or help reduce side effects? How will they be managed?
6. What happens after I finish treatment? Will I be monitored?
7. What happens if my prostate cancer comes back?



Taking care of yourself

Talking to a loved one about your feelings may help you overcome anxiety or stress. It may also help to talk to other men about their experience with prostate cancer. Physical activity, healthy eating and mental wellness can help you maintain and improve your health during and after treatment.