PROSTATE CANCER SCREENING

WHAT YOU NEED TO KNOW

The graphics and wording of this booklet are being finalized. If you have questions about prostate cancer, contact the Cancer Prevention and Treatment Fund’s cancer hotline at info@stopcancerfund.org

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Prostate Cancer: Screening and Diagnosis for Early-Stage Prostate Cancer

If you are considering getting screened for prostate cancer, or are concerned about prostate cancer, this booklet has information for you.

You can read this booklet from start to end, or you can go directly to the sections that matter to you.

Words that may be new to you are in **bold**. See “Words to Know” on pages 8-9 to find out more about what they mean.

You may want to share this booklet with family and close friends. It also has space on page 7 where you can write down questions to ask your doctor or take notes.

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**Step 1. Should I Get Checked?**

The prostate is between the **bladder** and the **rectum**. The prostate makes some of the fluid which carries sperm out of the body, called **semen**.

Prostate cancer is the most common type of cancer for men. Fortunately, most prostate cancer grows very, very slowly, and most men who develop prostate cancer won’t die from it. In fact, most men with prostate cancer don’t realize it.

No matter what the doctor finds or the PSA test tells you, it’s important to remember this: most men with prostate cancer don’t die from the disease. Most have slow-growing cancers that don’t really affect them and they die in old age from other causes. This is why some men with very early prostate cancer choose not to treat it. Some men prefer to wait and only get treated if it grows more. You should not be worried about taking time to get more tests. You should take the time you need to discuss concerns and options with your doctor.

**What causes prostate cancer?**

A normal prostate is about the size of a walnut. As you get older, the prostate can grow and sometimes this can become cancer. Doctors do not know exactly why this happens. But we do know that some things may increase your chances of getting prostate cancer, such as:

- being over age 50
- having someone in your family with prostate cancer
- being African American
- smoking may increase your chances of having a more serious kind of prostate cancer
- being obese may increase your chances of having a more serious kind of prostate cancer.
- Exposure to Agent Orange or dioxin
What are signs and symptoms of prostate cancer?

You or your doctor may notice changes in your body. These signs could be:
- trouble passing urine
- blood in urine or semen
- discomfort in pelvic area or lower back
- trouble having an erection.

If you have any of these signs, tell your doctor. These could be symptoms of prostate cancer or something else.

If I don’t have any symptoms, should I be checked or “screened” for prostate cancer?

Now, top experts say that most men who don’t have any symptoms should NOT get screened for prostate cancer. That’s because screening for prostate cancer can do more harm than good.

Until recently, doctors screened all men over 50 years old regularly for prostate cancer, even if the men had no symptoms. Some doctors still do this with their patients. Some patients at higher risk who don’t have any prostate cancer symptoms may get checked regularly beginning as young as age 45.

The reason doctors stopped screening all men was that some men ended up getting treatments they didn’t need. Since some of the treatments can cause problems, you only want to get them if you have a serious disease.

If you have prostate cancer symptoms or are at much higher risk for prostate cancer than most men (for instance, you are African-American and/or someone in your family has prostate cancer), you should talk with your doctor about getting screened for prostate cancer.

Your doctor will check you by using at least one of these tests or exams:

PSA test. This is a blood test which tells how many prostate-specific antigens (PSA) you have in your blood. High levels of PSA may mean you have prostate cancer, or PSA levels can be high for other reasons too, such as infection or enlargement of the prostate, which is very common in older men. Even when their prostate is normal size, older men tend to have higher PSAs than younger men.

Digital rectal exam (DRE). In this test the doctor will use a gloved finger to feel for changes in the prostate.

Step 2. What If Your Screening Test Shows You May Have Prostate Cancer?

If your PSA test or digital rectal exam indicates that you might have prostate cancer, your doctor will want to get a small sample of tissue from your prostate. This is called a prostate biopsy. It is quick and simple. It is not painful, and you don’t need to stay overnight in a hospital. The doctor may use either an ultrasound or MRI to help see your prostate while taking the sample. A pathologist will look at the sample under a microscope to find out whether you have cancer.

The pathologist will make a pathology report for your doctor. If cancer cells are found, the report will have a Gleason score number which tells you how normal or abnormal your biopsy samples are. The score is made by adding two numbers together, based on how your samples look under a microscope. Each of these numbers is between 1 and 5, with 1 looking most normal and 5 looking like an aggressive type of prostate cancer. However, since biopsies are rarely assigned a grade of 1 or 2, if you have prostate cancer, you will probably have at least 3+3 or 6 total.

For more information about prostate biopsy and pathology reports, see page 9.
Other tests your doctor may ask for:

**CT scan**- An X-ray machine takes photographs of your prostate and other parts of your body. This will help doctors know if you have a tumor, where it is, and what size it is.

**MRI scan**- A machine using a magnet and a computer takes pictures of your prostate and other parts of your body. This will help doctors know if you have a tumor, where it is, and what size it is.

**Bone scan**- A machine uses radiation to take pictures of your bones. This will help doctors know if the cancer has spread to your bones.

**PET scan**- A machine takes photographs of your prostate and other parts of your body. A small amount of radioactive dye is first injected. This dye can help show where the tumor is located and other parts of the body where the tumor might have spread.

**What is Early-Stage versus Advanced Prostate Cancer?**

The biopsy and additional tests help your doctor determine whether your prostate cancer is **early-stage** or more advanced. A cancer is given a number or stage, I to IV (1-4). The number tells how much it has grown or spread. This number is based on all the information that your doctors have about your cancer from the tests they’ve done so far.

- **Stage I/1**- the cancer is early-stage and has not spread. May be too small to feel by digital rectal exam (DRE).
- **Stage II/2**- the cancer is more advanced than in stage 1, but has not spread from the prostate. Usually can be felt by digital rectal exam (DRE).
- **Stage III/3**- the cancer has spread nearby the prostate within the pelvic area, such as to the **seminal vesicles**.
- **Stage IV/4**- the cancer is advanced and has spread further from the prostate to other body parts such as **lymph nodes** or bones outside the pelvic area.

This booklet is about screening for prostate cancer. If you have been diagnosed with prostate cancer, another booklet called “Treatment Options for Prostate Cancer” can give you more information about your diagnosis and treatment choices.
Questions You Want to Ask Your Doctor:

Words to Know

**Adenocarcinoma**-This is a cancer which forms in a part of the body which is a gland, such as the prostate. A gland is a part of the body which makes substances either for inside the body (such as hormones) or outside the body (like saliva or semen).

**Bladder**-the organ which holds urine until it is passed from the body.

**Bone scan**- A machine uses radiation to take pictures of your bones. This will help doctors know if there is cancer.

**CT scan**- An X-ray machine takes photographs around your prostate and other parts of your body. This will help doctors know where the tumor is and its size.

**Digital rectal exam (DRE)**- A doctor uses a gloved, lubricated finger to feel inside your rectum for changes in your prostate. This can be used to check for changes in a tumor. This test is not usually recommended for healthy men.

**Gleason score**- A number used by a pathologist. This number tells how normal or abnormal your biopsy samples are. The score is made by adding two numbers together. The numbers can be from 1 to 5. The lower the number is, the more normal the sample is. A score of 3+3, or 6 total, is the lowest score usually seen. This will be one piece of information your doctor uses to understand your cancer.

**Lymph nodes**-Small, round glands which hold white blood cells and are scattered throughout the body.

**MRI**- A machine using a magnet and a computer takes pictures around your prostate and other parts of your body. This will help doctors know where the tumor is and its size.
Pathology report– A description of how tissue looks under a microscope.

PSA test- A blood test to check for PSA (prostate specific antigen) made by the prostate. This test can be used to check your prostate for changes after treatment. This test is not usually recommended for healthy men.

Prostate biopsy- A small sample of your prostate tissue is removed. This is done after numbing the area with a special needle which collects the samples. A pathologist will look at the sample under a microscope to find out whether there is cancer.

Rectum– The last part of the intestine which carries waste out of the body.

Semen– The fluid which carries sperm out of the body.

Seminal vesicles- Tubes which connect to the prostate that make semen.

Stage- A cancer is given a number or stage, I to IV, which tells how much it has grown or spread. Your treatment will likely be based on this information, in addition to other factors such as your age and general health.

Symptoms– Physical signs of a medical condition.

Tumor- An excessive growth of cells which can be cancer.

Ultrasound- A machine uses sound waves to make a picture of your prostate. This can help doctors locate samples during a biopsy.

Urethra- The tube which carries urine out of the body.

Ways to Learn More

National Cancer Institute Prostate Cancer
This website is available in both Spanish and English and has LiveHelp Online Chat and a telephone helpline. It contains up-to-date information about treatment options and clinical trials for prostate cancer.
http://www.cancer.gov/cancertopics/types/prostate

Prostate Cancer Foundation
This website contains information about treatment options, side effects management, clinical trials and links to patient and caregiver support groups and blogs.
http://www.pcf.org/site/c.leJRIROrEpH/b.5856543/k.6599/Finding_a_Support_Group.htm

CDC Site on Prostate Cancer
This website has information in Spanish and English on symptoms, treatment options, and questions to ask your doctor.
http://www.cdc.gov/cancer/dcpc/resources/features/ProstateCancer/

National Comprehensive Cancer Network
A detailed booklet on prostate cancer and treatment options including staging, types of surgeries and radiation.
http://www.nccn.org/patients/guidelines/prostate/index.html#2

American Urological Association Foundation
This website contains information about prostate cancer diagnosis, staging with helpful illustrations, and the advantages and disadvantages of different treatments.
http://www.urologyhealth.org/urology/index.cfm?article=146&display=1