



The Prostate Cancer Challenge

About Prostate Cancer Canada



- Prostate Cancer Canada is the only national foundation dedicated to the elimination of prostate cancer
- We focus on several areas including research, education, support and awareness
- In areas of support and prevention, we will involve men, women and young people, making them more aware of the impact of the disease
- While we are proud of our success, much work is still needed - it is felt that a cure is within our lifetime - but without support it will not be possible

Fact: In 2009, an estimated 25,500 men will be diagnosed with prostate cancer

Our Work



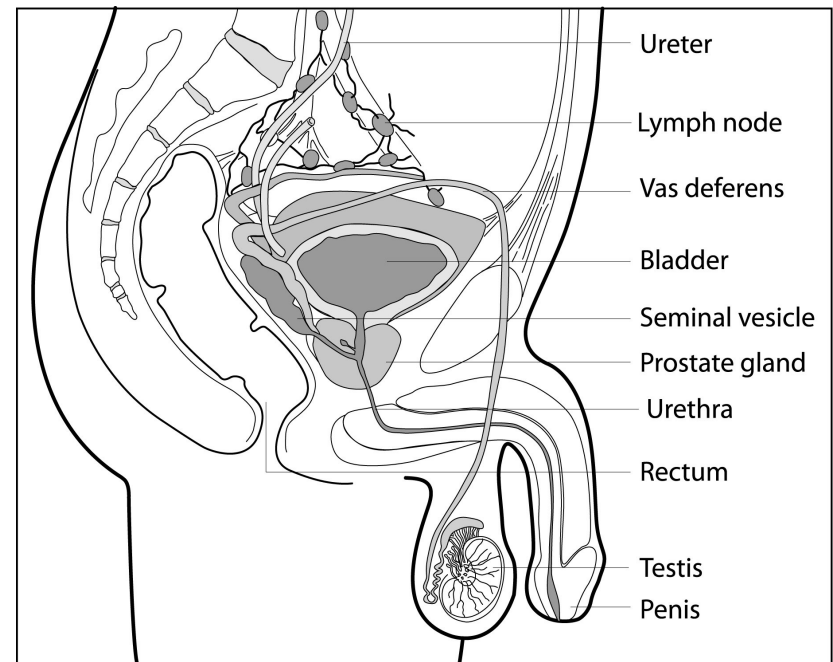
- Our vision is to be a global leader in the fight against prostate cancer, earning the enthusiasm and support of Canadians through integrity, compassion, and innovation
- We raise funds for the development of programs related to awareness, public education, advocacy, support of those affected, and research into the prevention, detection, treatment and cure of prostate cancer

Fact: In 2009, an estimated 4,400 men will die of prostate cancer

An Introduction to Prostate Cancer



- The prostate gland, found only in men, is about the size of a small walnut situated just below the bladder in front of the rectum, and surrounding the urethra.
- The prostate produces the seminal fluid in which sperm is transported. The gland's primary function is to produce fluid that nourishes and transports semen during ejaculation. The gland also gives you the ability to maintain urination.



Prostate Cancer Facts



- Prostate cancer is the most common cancer in Canadian men.
- Prostate cancer is as prevalent to men as breast cancer is to women
- During his lifetime, one in six Canadian men in their lifetime will be diagnosed with prostate cancer
- Over 90% of prostate cancer cases are curable if detected and treated early

Early Detection



- **Get an annual physical**
 - Talk to your doctor at age 40 regarding your risk.
 - Establish a baseline PSA score
 - Men at higher risk of prostate cancer (those with a family history and/ or those of African or Caribbean descent) should begin annual PSA testing at 40.
 - Unless your resulting baseline PSA score is of concern to your doctor, the PSA need only be repeated every 5 years until age 50
 - Annual prostate-specific antigen (PSA) test and digital rectal exam (DRE) starting at 50.
- **Transrectal Ultrasound (TRUS)**
 - Used when the PSA or DRE finds abnormalities
 - Ultrasound probe in the rectum that uses soundwaves to show zones in the prostate and detect nodules

Treatment Options



- **Active surveillance:**
 - Regular, careful monitoring of PSA scores and proceeding with treatment only if and when the disease becomes active
 - Applies to identified early-stage, indolent disease
- **Radical prostatectomy:**
 - Surgical removal of the prostate
 - The “gold standard” of treatment, with highest probability of success
 - Side effects can include short- or long-term impotence and incontinence
- **External beam radiation therapy:**
 - Destroys cancer cells; technological developments have improved accuracy to spare healthy tissue
 - Side effects can include diarrhea, rectal bleeding, urinary frequency and incontinence. Usually mild and disappear after treatment is stopped
 - External beam irradiation can also cause tiredness, that may not improve until one or two months after treatment is completed

Treatment Options



- **Brachytherapy:**
 - Radioactive seeds implanted in the prostate
 - Good targeting of cancerous cells
 - Side effects can include incontinence, burning with urination, blockage of urinary flow and soreness. Usually disappear in 4-6 weeks
- **High intensity focused ultrasound (HIFU):**
 - A non-invasive acoustic ablation technique that uses precision focused ultrasound waves to raise the temperature of the target tissue to more than 80 degrees Celsius in 2-3 seconds, destroying the targeted cancerous tissues.
 - Outpatient procedure, minimal side effective
 - Procedure is expensive and not currently covered by provincial health plan

Treatment Options

- **Hormone Therapy:**
 - Used to treat advanced stage prostate cancer or cancer that has returned after localized therapy
 - Lowers the levels of androgens, especially testosterone
 - Not curative but research shows that it can lower PSA, sometimes to undetectable levels
 - Effects are temporary as not all prostate cancer cells depend on hormones to survive. Can be effective for as little as six months and as much as 10 years.
- **Chemotherapy**
 - Less effective in prostate cancer than other cancers as prostate cancer cells are slow growing.
 - Most often given to patients with advanced stage prostate cancer who aren't improving with hormone therapy.
- **Natural Therapies**
 - Diet modifications, supplements
 - There are no conclusive studies that show effectiveness in preventing cancer or aiding treatment through Natural therapies and are often not government regulated. Do not take these without consultation with your doctor.



Where Do We Go From Here?

- Remind family, friends & co-workers that prostate cancer is 90% curable if detected in its earliest stages
- Get tested as per Prostate Cancer Canada's screening guidelines
- Try our interactive tools at prostatecancer.ca
 - Risk Assessment Quiz: a simple assessment for all men
 - Prostate Cancer Assessment Tools: prognostic tools for the diagnosed
- Support prostate cancer research today for better prevention, screening and treatment tomorrow through Prostate Cancer Canada

Thank You!

prostatecancer.ca

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