

CIMS PROSTRATE CANCER

Chemotherapy - Though it won't get rid of your prostate cancer, chemotherapy aims to shrink it and slow down its growth. This helps some men to live longer, and can help to control or delay symptoms such as pain. Unlike other kinds of cancer, prostate cancer is not usually treated with chemotherapy at an early stage, although some men might be offered it at an earlier stage as part of a clinical trial. You need to be fairly fit to have chemotherapy because the side effects are sometimes hard to deal with. If your doctor thinks you might benefit from chemotherapy, they will do some tests to make sure it's suitable for you. For example, they will do some blood tests to check how well your liver and kidneys are working. This is because the liver and kidneys are involved in how your body handles chemotherapy drugs.

Palliative Radiotherapy - is one of the treatments used to slow down the growth of cancer and control symptoms in men with advanced prostate cancer. Advanced prostate cancer is not curable but treatment can keep it under control for months or years. Having advanced prostate cancer means that the cancer has spread from the prostate to other parts of the body. Prostate cancer can spread to any part of the body, but most commonly to the bones or lymph nodes. This can cause pain and problems with moving around. In some cases, men with advanced prostate cancer may also experience painful lymph nodes or blood in their urine, caused by bleeding from the prostate. These symptoms can sometimes be relieved with palliative radiotherapy.

Outlook

Most patients who develop cancer of the prostate are elderly and as the cancer usually grows very slowly, it may not interfere with the length of life. Indeed, many patients outlive this cancer and die from other causes, e.g. heart attack or stroke. If localized and treated with successful surgery or radiotherapy, a normal life span is to be expected.

The cause of prostate cancer is unknown, but a hormone imbalance is suspected. There are currently no methods known for its prevention.

It must be emphasized that many of the symptoms described are usually associated with non-cancerous conditions. However if any male has any of the symptoms listed earlier, or other concerns he should see his doctor without delay.



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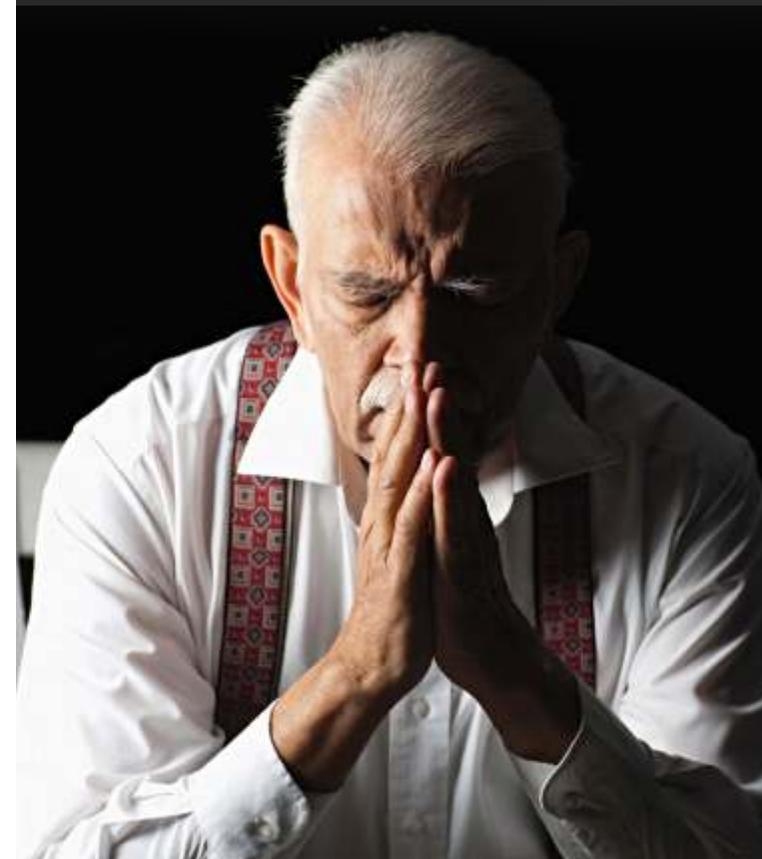
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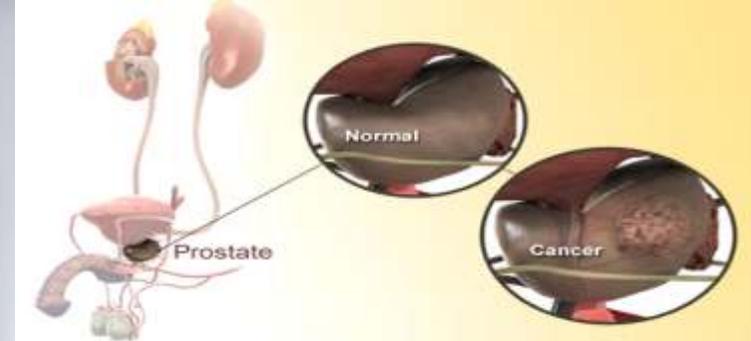
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What is Prostate?

The prostate is a gland found only in males. About the size of a walnut, it is situated where the bladder joins the urethra. The urethra is the tube through which urine is passed from the bladder to the end of the penis.

The prostate is one of the glands of reproduction. It produces some of the nutrients on which sperm live, once they leave the body. Secretions from the prostate make up a large part of semen.

Prostate problems

The most common problem associated with the prostate is the enlargement of the gland. This commonly occurs when men get older. If the prostate becomes so large that it presses on the urethra, passing urine can be a problem. This is most commonly caused by benign prostate hyperplasia (BPH). Benign means non-cancerous and hyperplasia means that it gets bigger.

However, sometimes the growth which obstructs the urethra is malignant or cancerous.

What are the signs of prostate cancer?

Prostate cancer in the early stages rarely has any symptoms. However if any of the following symptoms occur, they need to be taken seriously. These symptoms usually develop in elderly men and less often in middle aged men. Any man experiencing these symptoms should contact his doctor promptly:

- Difficulty in starting the flow of urine
- A slow, interrupted flow of urine
- Frequent passing of urine
- Blood in the urine
- Pain during urination

- Recent onset of back or pelvic pain associated with urinary problems

How is cancer of the prostate detected?

Digital Rectal Exam (DRE)

During a DRE, the physician inserts a gloved, lubricated finger into the rectum and examines the prostate for any irregularities in size, shape, and texture. Often, the DRE can be used by urologists to help distinguish between prostate cancer and non-cancerous conditions such as BPH.

PSA Test

The first test is a digital examination of the prostate when the doctor feels it through the rectum. A blood test may also be done to check if the prostate-specific antigen (PSA) level has risen.

When prostate cancer develops, the PSA level usually goes above 4. But it is important to remember that about 15% of men with a PSA below 4 will have prostate cancer on biopsy. If your level is in the borderline range between 4 and 10, you have about a 25% chance of having prostate cancer. If it is more than 10, your chance of having prostate cancer is over 50% and increases more as your PSA level increases.

If your PSA level is high, your doctor may recommend a prostate biopsy to find out if you have cancer.

The Gleason test

It is a grading scale that helps the physician determine how likely a patient's cancer may spread. Tissue removed from the prostate during biopsy is examined microscopically and graded. The higher your Gleason score, the more likely it is that your cancer will grow and spread.

Treatment Options

Surgery - Radical prostatectomy is the surgical removal of the prostate gland and it typically involves a hospital stay of several days. The two most common side effects of this surgery are loss of bladder control (incontinence) and the inability to maintain an erection (impotence).

External Radiation - This treatment involves the use of high-energy X-rays directed from outside the body at the prostate gland, and normally requires treatment 5 days per week for 6 to 8 weeks. Side effects may include problems with urination and impotence, as well as injury to the bowel.

Brachytherapy - Also known as "interstitial radiation", brachytherapy is the permanent implanting of radioactive "seeds" into the prostate gland. Brachytherapy delivers a prescribed dose of radiation directly to the cancer cells. There is only limited radiation to surrounding tissues such as the urethra and rectum. The seeds are usually permanently implanted and the radiation dissipates over time.

Hormone Therapy - Hormones are administered to lower the levels of testosterone (male hormone) which slows the growth of cancerous cells over a period of time. Under certain circumstances, hormones may be used in combination with brachytherapy to shrink the prostate and the tumor.

Watchful Waiting - Since many prostate cancers are slow-growing, a physician may recommend close observation for a period of time without any active treatment, during which the tumor's progress is carefully monitored.