



What is Prostate Cancer?

The prostate is a walnut sized gland in the male reproductive system that produces fluid that is in semen. The prostate gland is located beneath the bladder and surrounds the urethra. Prostate cancer is a slow growing cancer that originates in the prostate and usually affects men aged 65 years or older. Prostate cancer is the second most common cancer in men, except for skin cancers, and the second leading cause of cancer death in men in the United States (US) and Virginia; however, most men who are diagnosed with prostate cancer do not die from it.

Key Facts

- In 2014, there were approximately 4,264 new cases of prostate cancer in Virginia.
- In 2014, incidence of prostate cancer was lower in Virginia (92.3 per 100,000 men) compared to the overall US rate of 95.5 per 100,000 men; mortality was slightly higher in Virginia (Figure 1).
- From 2007-2014, incidence of prostate cancer has steadily declined, while mortality has slightly declined from 2005-2014 (Figure 2).
- Incidence is highest among African American males.

Symptoms

Some men experience symptoms of prostate cancer, while others do not have any symptoms. Possible symptoms may include:

- Difficulty starting urination
- Weak or interrupted flow of urine
- Frequent urination, especially at night
- Difficulty emptying the bladder completely
- Pain or burning during urination
- Blood in the urine or semen
- Pain in the back, hips, or pelvis that doesn't go away
- Painful ejaculation

Some of these symptoms can also be caused by other, noncancerous conditions. If you are experiencing any of these symptoms, please contact your medical provider for further evaluation.

Figure 1. Prostate Cancer Incidence and Mortality, Virginia and United States, 2014

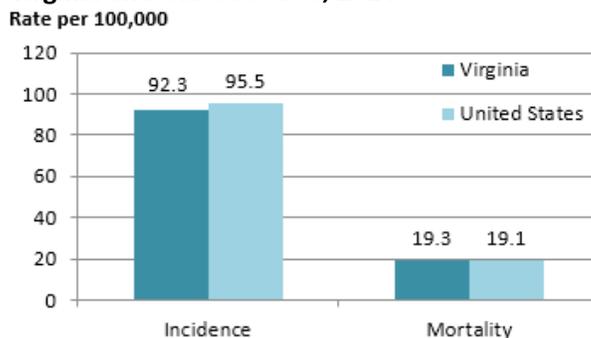
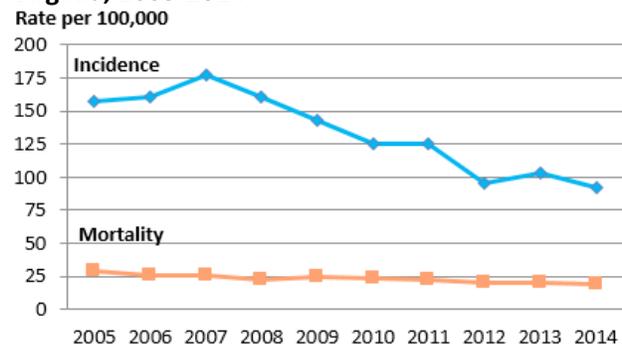


Figure 2. Prostate Cancer Incidence Mortality, Virginia, 2005-2014

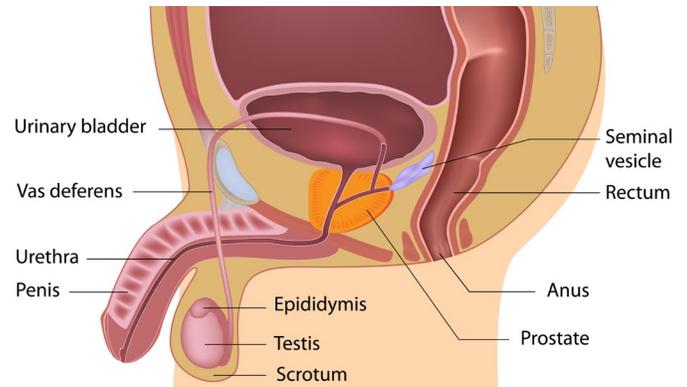


Notes: Rates are per 100,000 and age-adjusted to the 2000 US standard population. Data Sources: nccd.cdc.gov/USCSDataViz/rdPage.aspx. Virginia Cancer Registry, 2005-2014 and National Center for Health Statistics, 2004-2014.



Current Screening Recommendation

The prostate-specific antigen (PSA) test, which measures the level of PSA enzyme produced by the prostate gland, can be used to screen for prostate cancer. However, the PSA test is not routinely recommended for all men. Currently, the United States Preventative Task Force (USPSTF) recommends that clinicians discuss the potential benefits and harms of PSA test screening for prostate cancer with men ages 55 to 69 years so an individualized, informed decision on receiving the screening can be made.



Diagnosing and Treating Prostate Cancer

If the PSA test is abnormal, a biopsy may be performed to diagnose prostate cancer. Since prostate cancer is a slow-growing type of cancer with minimal to no adverse symptoms in early stages, active surveillance by an oncologist is often the first course of action. More intrusive therapies given before symptoms occur may not improve quality of life or life span of a patient. However, when the cancer begins to grow more quickly or the patient begins experiencing worsening symptoms, prostate cancer may be further treated by surgery or radiation. If the cancer spreads beyond the prostate gland, additional therapies might include hormone therapy, chemotherapy, or immunotherapy. Clinical trials are also available for prostate cancer treatment.

How to Minimize the Risk

While the risk factors of age, race, family history of prostate cancer and natural hormone levels cannot be avoided, some positive behaviors may help to minimize cancer risk. At present, these would be eating a wide variety of vegetables and fruits each day, staying physically active, and staying at a healthy weight. Avoiding an excess of calcium in the diet may also help, according to some studies. Men should talk with their health care provider about these and other ways to reduce prostate cancer risk.

References

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