

# PROSTATE CANCER

## **PATHOLOGY**

- SLOW GROWING CANCER
- MOST COMMON CANCER IN MEN
- HIGHLY CURABLE – IF LOCALIZED
- CAN METASTASIZE
  - LYMPH NODES
  - LUNGS
  - OTHER ORGANS/BONE
- CAN RESPOND WELL IF ADVANCED

## **Surgical Management**

- radical prostatectomy

## **TREATMENT**

- Radiation
- Brachytherapy
- Cryotherapy & Ablative hormone therapy
- Chemotherapy

## **Diagnostic Studies**

*Recommendation: age 55-69 should be screened every 2 years*

- PSA screening - level will be elevated
- DRE (digital rectal exam)
  - asymmetrical and rough feel

## **SIGNS/SYMPTOMS**

- BPH SYMPTOMS (benign prostatic hyperplasia)

### **IRRITATIVE**

- nocturia                      -frequency
- urgency                        - dysuria
- bladder pain                - incontinence

### **OBSTRUCTIVE**

- decreased urinary system caliber and force
- intermittency
- hesitancy
- dribbling

- PSA elevated
- DRE (digital rectal exam)
- Dysuria/hematuria
- Rectal

## **RISK FACTORS**

- Age
- Race/ethnicity
- Geography
- Family history
- Diet– high dairy
- Obesity
- Smoking
- Chemical exposure
- Inflammation of prostate
- STI - infections

**Scenario:** 67 year old male c/o rectal pain, dysuria and frequent nocturnal, PSA was elevated and DRE results were asymmetrical and irregular in shape and rough.