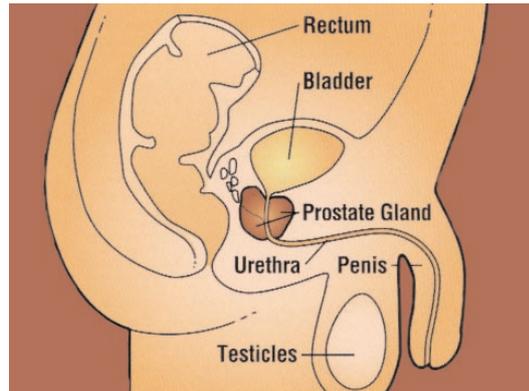


PROSTATE CANCER

Your Diagnosis

Prostate Cancer



The prostate biopsy your clinician recently obtained from your prostate has been diagnosed as prostate cancer. Cells from your biopsy were studied in the laboratory to help decide how fast your tumor is growing and how widespread the cancer is. This process is called Gleason Grading and Staging.

Gleason Grading helps determine the aggressiveness of your tumor. A low Gleason score (2, 3, or 4) means that your cancer is likely to be slow-growing. Cancers with a midrange Gleason score (5, 6, or 7) may be either fast- or slow-growing. A high Gleason score (8, 9, or 10) means that your tumor is likely to be fast-growing. Ask your doctor about your specific Gleason score.

Clinical staging is the assessment of the size of your tumor and whether it has spread in your body. The clinical stage of your cancer is important because it helps your clinician decide what treatment option may be best for you. Ask your clinician about the clinical stage of your tumor.

Background Information

Prostate cancer is a malignant tumor that begins in the prostate gland. Normally about the same size and shape of a walnut, the prostate is a glandular organ found in men. The prostate gland is located just below the bladder, in front of the rectum, and surrounds the urethra, the tube that carries the urine out of the body. Most of the time prostate cancer grows very slowly. However, especially in younger men, it can grow quickly and spread to other parts of the body.

- All men over age 50 should have a PSA test and a digital rectal exam each year.
- When found early, prostate cancer can often be treated successfully.
- Prostate cancer is the most common type of cancer found in American men, other than skin cancer, with about 185,000 new cases diagnosed in the United States each year.
- Although men of any age can get prostate cancer, it is found most often in men over 50.
- More than 80% of men with prostate cancer are over the age of 65.
- Significant risk factors for prostate cancer include:
 - Age: Older men are more likely to get prostate cancer.
 - Race: Prostate cancer is more common in African-American men.
 - Diet: A high-fat diet may play a part in causing prostate cancer.
 - Family History: A close family member (father or brother) with prostate cancer increases your risk.

Follow-up Options for Prostate Cancer

Watchful Waiting Watchful waiting is not active treatment, but it may be a good choice for some men. Your doctor may suggest a "watch and wait" approach if you are older, if the cancer is small and has not spread outside the prostate gland. Because prostate cancer often grows slowly, many older men who have the disease may never need any treatment.

Surgery The purpose of prostate surgery is to remove the cancer from your body. The main types of prostate surgery are radical prostatectomy (removal of the prostate gland) and cryosurgery (freezing of the prostate). Please consult your doctor about the type of surgery that may be best for you.

Brachytherapy In this form of therapy, a surgeon will implant radioactive pellets or "seeds" into the prostate. These pellets will radiate the prostate and surrounding tissue over time and kill cancer cells. Men whose tumors are small and confined to the prostate are candidates for brachytherapy.

Radiation Therapy In this treatment an external beam of high-energy x-rays kills or shrinks cancer cells. Radiation is used most often for cancer that has not spread outside the prostate gland or has spread only to nearby tissue. If the disease is more advanced, radiation may be used to shrink the tumor and provide pain relief.

Hormone Therapy Most prostate cancers need the male hormone, testosterone, in order to grow. Lowering the amount of testosterone can make the cancer shrink or grow more slowly. The main methods to do this include removal of the testicles (orchiectomy) or giving female hormones or other drugs. Hormone therapy does not cure cancer but can delay progression of the cancer and provide relief.

Chemotherapy This therapy uses anti-cancer drugs to kill cancer cells. This treatment is not used for early prostate cancer. Rather, it is used most often for patients with advanced cancer to slow the tumor's growth and reduce pain.

Important Questions to Ask Your Doctor

- What is the clinical stage of my cancer? What is the Gleason score of my cancer?
- What do these mean in my case?
- For my diagnosis what follow-up options do I have? What do you suggest and why?
- What are the benefits of this option?
- What are the potential risks or side effects of this option?
- What can I do to make my treatment most effective?
- Will I need more tests? For what purpose?

Sources for Additional Information

- American Cancer Society: www.cancer.org or 800-227-2345
- National Cancer Institute: www.nci.nih.gov or 800-4-CANCER
- Prostate Cancer InfoLink: www.comed.com/prostate
- The Urology Channel: www.urologychannel.com
- Associated Pathology Medical Group: www.apmglab.com or 800-848-2764



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