What to expect during each stage of treatment and beyond

Prostate Cancer

This information sheet tells you what you can ask for before, during and after your prostate cancer treatment. You can ask your team for more information and support.

Working with your team means you can make sure you are getting the treatment, information and support that are right for you.

1. Prostate specific antigen testing

Some prostate cancers are found by having your doctor do a test at your check-up called a prostate specific antigen (PSA) test. This is an easy test where your doctor checks your blood for prostate specific antigen. If another man in your family has had prostate cancer your doctor should work with you and talk about doing this test every year.

Even if no one in your family has had prostate cancer you can still ask your doctor to do a test at your check-up. Your doctor should explain the risks and benefits of prostate specific antigen testing with you. You can ask your doctor for more information.

2. Your doctor visit

Your doctor should do a check up to see if they can find what is making you feel unwell. Your doctor might send you for blood tests.

Your doctor should work with you to make sure you have the information and support you need. You can ask your doctor about:

- What is happening in your body and why it could be happening
- What will or might happen
- How you are feeling and how to stay emotionally healthy
- Who you can talk to about getting the support you need
- Where you can get more information and support

Your doctor might do tests to check for prostate cancer:

Prostate specific antigen testing (PSA testing)
The doctor will take a sample of your blood and check it to see how much prostate specific antigen is in it. Prostate specific antigen is a protein made in the prostate gland. It is normal to have some in your blood. Too much might mean something is wrong.

Measurement of PSA free to total ratio

This is a test your doctor will do to find out why your prostate is making too much prostate specific antigen.

Your doctor might send you to get more tests with a specialist. Your specialist is a doctor called a urologist. They are trained in working with men with prostate cancer. Your doctor should give the specialist information on your health in the past, if someone else in your family has cancer and your test results.

You can bring a family member or friend to your visits. You can ask your doctor for more information and support to make sure you have what you need.
3. Tests

The specialist should do tests to see if you have prostate cancer. This is called a diagnosis. If you do have prostate cancer, the tests will show how the cancer is growing or if it has spread. This is called staging.

You can ask the specialist:
- What tests you are going to have
- What will happen in the tests
- What the tests will tell you

You might have one test or a mix of tests:

- **Digital rectal examination (DRE)**
  The doctor will wear gloves and put one of their fingers in to your anus. They will check to see if they can feel any problems with the prostate.

- **Magnetic resonance imaging scan (MRI)**
  A scan where magnetic fields and radio waves are used to make a detailed picture of the body.

- **Computed tomography scan (CT scan)**
  Computers and x-rays are used to make a detailed picture of the body.

- **Biopsy**
  Small samples of your prostate are taken to check under a microscope.

Your specialist should talk with you about the risks and benefits of having a prostate biopsy. You can take time and ask for more information and support before you make a choice.

You can ask your doctor about finding a prostate cancer peer support group. It can help knowing that there are other people who understand what you are going through.

Your friends and family can talk to a support group for carers.

4. Treatment

Your specialist should work with a team. Your team is made up of people that understand prostate cancer.

Your team will review your test results. They should ask you what you want and need. You should work together to make the best plan for your treatment.

You can ask your team:
- What treatment you are having
- Why you are having that treatment
- What will happen in that treatment
- What the treatment will do
- How long the treatment will take
- Risks and benefits of the treatment
- How you might feel during the treatment, side effects and what you can do to feel as well as possible
- What you can expect after the treatment

Your team might suggest you take part in a clinical trial. A clinical trial is used to test a new treatment, or to see if a treatment works better than another.

You can ask for more time, or a second opinion before you decide on your treatment.

Complementary therapies include things like massage, acupuncture and meditation as well as other medicines you might take at the same time as your treatment.

Some therapies might not work well with your treatment. Therefore, it is very important to talk to your team about any complementary therapies you are using, or would like to use.

You can ask for time before you make a choice.

You can also ask to talk with a radiation oncologist or another urologist for more information. A radiation oncologist is also a specialist in cancer treatment. Talking to another urologist or radiation oncologist means that you have another opinion before making a choice about which treatment is right for you. You can ask for all of the time, information and support you need to make a choice about your treatment.

The treatment you have depends on if the cancer is just in the prostate, or if it has spread to other parts of your body.
4. Treatment cont’d

You might have one treatment or a mix of treatments:

**Active surveillance** is where no treatment is given or the treatment is not given straight away. Your team will check the cancer often to see if it changes or grows.

This is used if you have early prostate cancer, and the cancer hasn’t spread.

**Watchful waiting** is where no treatment is given or the treatment is not given straight away. Your team will check the cancer like they would in active surveillance, but it is not as often.

This is used if you are older, or if you have other health issues.

**Chemotherapy** or drug therapy is where drugs are used to stop the cancer growing.

It might be used at the same time as androgen deprivation therapy. It is used if your prostate cancer has spread to other parts of your body.

**Radiation therapy** or radiotherapy is where radiation is used to stop the cancer growing.

It is used with or without surgery. It is used if you have early prostate cancer, or the cancer hasn’t spread.

**Brachytherapy** is a type of radiation therapy where an implant is put inside your body near the tumour. The implant will give the radiation therapy.

**Androgen deprivation therapy (ADT)** is a type of hormone treatment. You will get hormones from a tablet or injection. These hormones will change the way the cancer grows and stop it from spreading more. Your team should talk with you about what will happen and what might happen during your androgen deprivation therapy.

Androgen deprivation therapy is used if your prostate cancer has spread to other parts of your body.

**Prostatectomy** is a surgery to cut the prostate out.

It is used if you have early prostate cancer, or the cancer hasn’t spread. This should be done by a surgeon who is very experienced at prostate surgery.

For more information about treatment and side effects you can ask your doctor or visit www.cancer.org.au/about-cancer/treatment

Your team should talk to you about your needs before, during and after your treatment. You can ask for information and support at any time to make sure you have everything you need.

Your team can connect you with other services and health professionals to make sure you stay physically and emotionally healthy.

5. After your treatment

You can talk to your team about any changes you have after your treatment. Some treatments can damage the nerves and muscles near the prostate and bowel. This might mean that you have side effects:

- Incontinence or not being able to hold your wee, poo or wind in
- Erectile dysfunction or not being able to get or keep an erection
- Infertility or not being able to have a child
- Not interested in sex

There are a lot of ways to make sure you feel healthy and manage your side effects after your treatment. You can work with your team to make sure you can get back to doing what you like as soon as you are ready.

After your treatment is finished, your team should give you a treatment summary. Your treatment summary has all of the information on the treatment you received:
5. After your treatment

- Tests you had to diagnose your prostate cancer, and the results of these tests
- Treatment you had, and when you had it
- Support services and other treatment plans you received

Your team should work with you to make a plan now that your treatment is finished. Your specialist will decide which type of specialist or doctor will be best for managing your care. You should have a follow-up plan that includes:

- The follow-up that is best for you
- Plans for managing any side effects of treatment
- How to get help quickly if you think your cancer has come back or got worse

Your doctor should work with you and talk about:

- Finding more information and support to keep physically and emotionally well, and get what you need
- Signs and symptoms to look for that might mean the cancer is coming back
- Prevention and healthy living

Sometimes prostate cancer can come back after treatment. It is usually found at a follow-up visit, or if you notice any symptoms come back. It is important to have regular check-ups. If you notice anything different go to your doctor. You can ask your doctor for a check-up and for information and support.

6. Living with cancer

Side effects

Some people get side effects during and after their treatment. Side effects are your body responding to the treatment you are having. They are normal, but can make you feel unwell. You might have side effects straight away, not at all, or months after your treatment.

You can talk to your doctor about your side effects or visit www.cancervic.org.au/about-cancer/survivors/long-term-side-effects

Advance care plan

Your team might work with you to make an advance care plan. An advance care plan is a way of setting out your wishes and making sure everyone knows what you want in future medical care.

You can talk to your doctor about making an advance care plan together or visit www.advancecareplanning.org.au

Palliative care

Palliative care is used at different stages of your treatment to help you feel well. Palliative care can help with pain relief, to reduce your symptoms and to improve your quality of life.

You can talk to your doctor about the type of palliative care that is best for you or visit www.palliativecare.org.au

Cost

There are costs at every stage of your cancer including treatment, accommodation and travel. You might have costs if you are having treatment in a private health service even if you have private health insurance.

You can talk to your team and your private health insurer if you have questions about the cost of each treatment you might have. You can also talk to the social worker at your hospital.

You can talk to your doctor about the cost of your treatment or visit www.canceraustralia.gov.au/affected-cancer/living-cancer/dealing-practical-aspects-cancer/costs-treatment

You can talk to your doctor about the cost of accommodation and travel or visit www.cancercouncil.com.au/get-support/practical-support-services

There are a lot of things to think about when you have prostate cancer. There is also a lot of information and support. It is important that you do what is right for you. You can work with your team to make sure you have the best care.
Information and support

Cancer Council

- You can talk to a cancer nurse: **13 11 20**
- 📞 If you need an interpreter: **13 14 50**

Prostate Cancer Foundation of Australia

- Information and support: **1800 22 00 99**
- [www.prostate.org.au](http://www.prostate.org.au)

Carers Australia

- Information and support for carers: **1800 242 636**

Continence Foundation of Australia

- [www.continence.org.au](http://www.continence.org.au)