

TAKE CHARGE!

- Become knowledgeable about your health and about prostate cancer
- Encourage all men to have a PSA and a DRE at the appropriate ages and intervals
- Keep a written record of your PSA levels to observe any changes
- Encourage and adopt healthy lifestyle changes to reduce risk and for better cancer outcomes
 - Add more fruits and vegetables to your diet and reduce animal protein
 - Vitamin D, green tea and tomato products may reduce prostate cancer risk
 - Eat more whole grains and legumes
 - Exercise
 - Reduce stress
- Know your family medical history
- Join a Support Group!
- Spread the word about Informed Decision-Making
- Advocate for the early diagnosis and treatment of potentially deadly prostate cancer
- Learn about clinical trials for cancer patients
- Participate in outreach programs and help spread the word about Early Detection
- Become an advocate for lessening the burden of prostate cancer

BECOMING INFORMED AND AWARE

More and more of us are learning more and more about cancer, but even with rapid changes in oncology, much remains unknown. Although prostate cancer is a common cancer, many people do not know about it. Some people are more at risk than others. Every man should have a discussion with his doctor about prostate cancer risk and testing. After that discussion, the decision to be tested is then up to the man based upon his own values and preferences. This is called **INFORMED OR SHARED DECISION-MAKING**. We have developed a 2-sided useful tool on Informed Decision-Making to take to your doctor's office to help you with the discussion. Here is the link: www.prostatecalif.org/patient-guide

CPCC recommends a baseline PSA and DRE beginning at 40 (at 35 if high risk, including African-American men or men with a certain or indeterminate family history of prostate cancer), and then periodically depending on those results. You should know and keep track of all your PSA measurements and ANY CHANGE IN PSA should be discussed with your doctor.



CALIFORNIA PROSTATE CANCER COALITION

We are the CALIFORNIA PROSTATE CANCER COALITION, a 501(c)(3) non-profit organization made up of prostate cancer patients, family members, and other individuals interested in prostate cancer.

- We advocate for the early detection of potentially deadly disease
- We are making prostate cancer a key health care priority in California
- We network all the prostate cancer support groups in the state
- We disseminate information relating to prostate cancer, including a durable, laminated awareness and education tool www.prostatecalif.org/patient-guide
- We advocate for prostate cancer legislation and funding and helped make IMPACT for underserved men a permanent California state program
- We advocate for the highest quality of life for prostate cancer patients and their families
- We perform outreach to, and involve all communities
- We publish a Newsletter
- We maintain a website: www.prostatecalif.org
- We conduct annual workshops for prostate cancer support group leaders



For more information, contact us at 415-459-4668 or send an e-mail to cpcc@prostatecalif.org.



CALIFORNIA
**Prostate
Cancer**
COALITION

**“Fighting
Prostate Cancer
in California
since 1997.”**

*A Proud Participant in the
National Alliance of State
Prostate Cancer Coalitions*

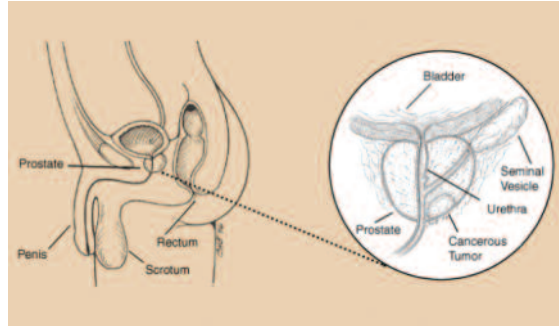


WHAT IS CANCER?

According to the National Cancer Institute, cancer occurs when some of the body's cells start dividing without stopping and they can then spread into surrounding tissues. These extra cells may form lesions or tumors.

WHAT IS THE PROSTATE?

Many men are not sure what their prostate is or its function. The prostate is a walnut-sized gland in the male reproductive system, located below the bladder; it surrounds the urethra through which urine flows from the bladder to outside of the body. The prostate gland secretes a fluid that protects sperm.



WHAT IS PROSTATE CANCER?

Prostate cancer occurs when cells that make up the prostate start to grow and divide uncontrollably, and then form growths, or tumors. In its early stages prostate cancer usually has no symptoms. Prostate cancer is the most common non-skin cancer diagnosed in men and the third leading cause of male cancer deaths. It is more common in men with a positive family history of prostate cancer, in African-American men, and in men who have been exposed to Agent Orange. Some genetic changes within families can also create additional risk. Most prostate cancer is clinically insignificant but it can be aggressive and deadly.

TESTING

The two basic methods for determining a man's risk for developing aggressive, life-threatening prostate cancer are the PSA (prostate-specific antigen) blood test and the DRE (digital rectal physical exam). It is important to have a baseline PSA and then to track any changes over time. Additional tests include repeat PSA's, genetic/genomic tests, imaging and nomograms (a graphic description of risk assessment). A high PSA does not necessarily mean you have prostate cancer; it can also reflect inflammation, infection or an enlarged prostate (BPH). Your doctor should rule out these other conditions as the cause of the high PSA.

DIAGNOSIS

A definitive diagnosis of prostate cancer requires a tissue analysis following a needle biopsy. A pathologist will look at the biopsy tissue under a microscope, and if prostate cancer cells are present, the pathologist will grade the aggressiveness of the cells and assign a Gleason Score. Your doctor will use the Pathology Report along with other information to determine the stage of your disease. You and your doctor should decide together the best ways to treat your cancer, including Active Surveillance (delayed or no treatment).



EARLY STAGE AND ADVANCED DISEASE

In early stage prostate cancer the disease is still inside of the prostate and has not spread beyond the gland. This is the most treatable stage. In advanced prostate cancer, the disease has spread outside of the prostate to adjacent areas, or has spread to non-adjacent areas through metastasis (where the disease has traveled by blood or lymph nodes away from the prostate and has formed new tumors elsewhere in the body). The goal is to diagnose prostate cancer in its early stages. **The earlier prostate cancer is detected, the more options a man has for treatment and almost always the better the outcome. If found early, the 5-year survival rate is nearly 100%.**



TREATMENT FOR PROSTATE CANCER

In early stage prostate cancer, Active Surveillance, Surgery, and Radiation Therapy are the standard choices for treatment. Active Surveillance is gaining in popularity for clinically insignificant prostate cancer since it helps avoid overtreatment. For advanced prostate cancer, treatment choices include Hormone Therapy, Chemotherapy, Immunotherapy and Radiation Therapy. Most treatments for prostate cancer involve a risk of side effects. Clinical trials may be an option.



CPCC can help you:

- Find your local support group
- Find others who share your diagnosis
- Find a place to turn for help when you have been diagnosed
- Find links to other resources
- Keep up to date on prostate cancer news and other information
- Become informed and aware

DONATE TO CPCC

Donate online at
www.prostatecalif.org
or send your check to:
CPCC, 6709 La Tijera Blvd., Suite 473,
Los Angeles, California 90045.

Contributions are Tax-Deductible.
We are a 501(c)(3)
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