

# **Q&A: Know the warning signs of prostate cancer, when to get screened and important new treatments**

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Prostate cancer is the second leading cause of cancer death among men in the United States. According to the latest research from scientists at

the American Cancer Society (ACS), more than 288,000 men will be diagnosed with the disease this year, with close to 35,000 deaths. Black men are two times more likely to die from the disease than white men, and have the highest death rate for prostate cancer of any racial and ethnic group. However, when prostate cancer is detected early, the odds of survival are high. In fact, more than 3.5 million men diagnosed with the disease in the U.S. are still alive today.

Prostate cancer researcher Dr. Lorelei Mucci is the director of strategic research partnerships at the American Cancer Society. Her role includes leading an ACS initiative called IMPACT, or "Improving Mortality Toward Prostate Cancer Together" to address the alarming negative trends in prostate cancer incidence and disparities. For Prostate Cancer Awareness Month, Dr. Mucci reviews the signs and symptoms of prostate cancer, including important information about [risk factors](#), PSA screening, and more:

## **Why is it important every September during Prostate Cancer Awareness Month to help people learn about the disease?**

Despite the alarming statistics concerning the disease, there are opportunities for prevention, early detection, and treatment to improve survival and survivorship and to reduce the burden this cancer has across the U.S. and the globe. Prostate Cancer Awareness Month is so important to have a focused time for men and their families to share knowledge, experiences, and state of science on this important cancer. It is also a time to reflect upon the people who have been impacted by prostate cancer and who have lost their lives to the disease. Also, Prostate Cancer Awareness Month can be an important stimulus to remind public health professionals and government leaders of the need to invest in prevention, early detection, treatment, and improving

survivorship.

## **What are the warning signs of prostate cancer?**

For some men, prostate cancer may lead to urinary problems, such as having difficulty starting urination or urinating frequently, or pain during ejaculation. This is because of the location of the prostate close to the bladder and urethra. These symptoms and signs also occur with non-cancer conditions, so it is important to follow up with a physician to find out what might be causing these symptoms. If a cancer has already grown beyond the prostate, there may be pain in the hips, back, or other areas that does not go away. For most people, however, there are no signs or symptoms indicating prostate cancer and the cancer is diagnosed with a biopsy following an abnormal blood test.

## **Who is at risk for prostate cancer?**

Anyone with a prostate is at risk of prostate cancer, and it is one of the most common cancers. There are some groups that are at higher risk of prostate cancer. For example, our latest research shows Black men and those of African ancestry are 70% more likely to be diagnosed with prostate cancer. Also, the risk of prostate cancer gets higher with age. In addition, people with a family history of prostate cancer (such as in their brother or father) as well as a family history of breast cancer in a sister or mother, are at higher risk of prostate cancer. Part of the family history is due to inherited genetic factors or gene mutations that we now know about. An important note is that while age, family history, and race/ancestry are not modifiable factors (things you can change), there are other factors such as maintaining a healthy body weight, not smoking, and being physically active that can help to offset this higher risk.

## **What is the treatment for prostate cancer? Have there been any advancements in treating the disease?**

There are effective treatments for prostate cancer. When the cancer is still confined to the prostate (localized), surgery (radical prostatectomy) and certain forms of radiation are useful to treat and cure prostate cancer. For men who have a low risk of their prostate cancer metastasizing, active surveillance—in which a patient is closely monitored for signs of cancer progression—can also be an important treatment to consider. When the cancer is more aggressive, there are additional therapies that are used, including therapies that target hormonal pathways, chemotherapy, immunotherapy, and radiopharmaceutical therapies. In fact, this is an exciting time in prostate cancer with substantial progress in the discovery and approval of new therapies over the past 5-10 years, as well as several other therapies being developed.

## **Is there a screening test for prostate cancer? Why is it important to catch it early?**

Currently, the main screening test for prostate cancer involves taking a blood sample and testing it for the level of a marker called prostate-specific antigen (PSA). Higher levels of PSA in the blood can indicate prostate cancer, but also may be higher in benign conditions such as an enlarged prostate, so it is important to follow up with a doctor to discuss the results and the next steps. There is good evidence showing that regular PSA screening can reduce prostate cancer mortality, including from randomized trials. However, there is some controversy with screening for prostate cancer since the test can pick up slower-growing cancers that will never lead to harm. An area of active research now is aiming to do more effective screening approaches, targeting the men who are at the highest risk of prostate cancer and then also safely letting

people know they can screen less regularly. The ACS launched the "I Love You, Get Screened" campaign to encourage everyone to talk to their loved ones about cancer screening.

## **At what age should men be screened for prostate cancer?**

The ACS recommends that men at average risk for prostate cancer discuss the benefits and limitations of screening with their health care provider at age 50. Men at high risk (which includes Black men in general, and any man with a first-degree relative who had prostate cancer before age 65) should have the conversation at age 45. Black men with a family history of breast, ovarian, or prostate cancer, and men with more than one first-degree relative who had prostate cancer at an early age should discuss screening at age 40. Detecting prostate cancer early can lead to more effective treatment and improved outcomes.

## **What is the ACS doing to combat prostate cancer?**

To address the burden of prostate cancer for all men and the large racial disparities that exist, we established the IMPACT initiative. This cross-institution initiative will address urgent unmet needs with the goals of significantly improving outcomes for all men including survivorship and survival; reducing disparities; improving diversity in [prostate cancer](#) clinical trials; accelerating engagement and awareness and accelerating the implementation of known prevention strategies into at-risk communities.

**More information:** For more information on prostate cancer, go to [www.cancer.org/cancer/types/prostate-cancer.html](http://www.cancer.org/cancer/types/prostate-cancer.html)

Provided by American Cancer Society (ACS)

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