

East Lancashire Prostate Cancer Support Group Newsletter



Volume 10

Issue7

Date July 2021



What's Inside

Zoom Meetings Cancelled	P1
22 Champions	P2 P3
Felicity Kendal at the Stokes Centre for Urol- ogy	P4 P5
PCR & Tackle Full Webinar Schedule	P6-P12
New Concept Drug Hunts Down Late Stage PC	P13 P14
New Drug Com- bination	P15- P18
Tackle Monthly Brief	P19- P21
Prostate Can- cer in Younger Men	P22- P27
Have a Laugh	P28

***DUE TO THE
COMPLETE LACK OF
INTEREST IN OUR
MONTHLY MEETINGS ON
ZOOM. THE MEETINGS
WILL ONLY RESUME ON
A FACE TO FACE BASIS
WHEN WE GET THE ALL
CLEAR TO RESUME
THEM AT BURNLEY
GENERAL HOSPITAL'S
MACKENZIE CENTRE.
WE WILL KEEP YOU
UPDATED***

Treatments

08 Jun 2021

Experts unite: 22 Clinical Champions appointed to improve prostate cancer care

We're bringing together expert urologists, oncologists, radiologists, radiographers and a nurse to transform care for men.



Tags: [Treatments](#), [Support](#), [Diagnosis](#), [Better treatments](#)

Men everywhere deserve the best possible care, no matter who they are or where they live. That's why we're working with clinical leaders from across the UK to improve testing, treatment and support for men.

Our Clinical Champions programme is the first of its kind dedicated to improving care for men living with or at risk of prostate cancer. The 18-month programme will bring together 22 clinicians from multiple specialties and disciplines, all passionate about driving meaningful change for men. The Clinical Champions will be provided with leadership training, individual coaching and peer support opportunities. Through the programme our Champions will gain the knowledge, skills and expertise to deliver projects that will transform prostate cancer care at a local or national level.

Amy Rylance, Head of Improving Care at Prostate Cancer UK, said: "Ongoing innovations and improvements to prostate cancer services are vital to ensure men can access the highest quality care wherever they are in the UK. We look forward to seeing how these improvement projects progress over the next 18 months and the positive impact these changes will have for men."

With such diverse skillsets in our group of Champions, the projects they are leading are both ambitious and wide-ranging.

They include:

- **Faster, more accurate testing:** Enhancing local diagnostic pathways to ensure men are diagnosed faster and more accurately so they can start their treatment sooner.
- **Training clinicians:** Developing capacity and clinical skills to accommodate new evidence-based treatments.
- **Better tools:** Improving access to PSMA PET scans which can spot recurrent prostate cancer at an earlier stage, meaning that some men will have a greater chance of accessing life-extending treatments.
- **Better care:** Improving support for men suffering from sexual dysfunction following prostate cancer treatments.

Our Champions are excited to get going too.



He said: "I am thrilled to be part of the Clinical Champions programme and to lead a project that really pushes the envelope of patient care. I am looking forward to learning from the other Champions, as well as sharing my own insights and ideas, to facilitate best practice within my own centre and elsewhere."

Mr Vishwanath Hanthandala, Consultant Urologist and Robotic Surgeon at Liverpool University Hospitals NHS Foundation Trust, will use his project to pioneer a streamlined appointment system allowing men to have an MRI scan, get their results, and have a biopsy all in the same day. This will speed up diagnosis, reduce waiting times, and ensure men who do have prostate cancer can start their treatment sooner.

Mr Hanthandala said: "The earlier we catch prostate cancer, the more likely we are to cure it. Streamlining the diagnostic pathway into a 'one-stop' service will help men avoid unnecessary delays to treatment and reduce anxiety from having to wait weeks for a diagnosis. I'm thrilled to be part of the Clinical Champions programme and look forward to working with colleagues from across the prostate cancer pathway to lead this project to success."

Clara Weymont, President of the British Association of Urological Nurses (BAUN) and the only nurse in our programme this year, is leading a project to support the development of a nurse-led prostate biopsy service. This service will use an innovative technique called local anaesthetic transperineal (LATP) biopsy. LATP biopsies are quicker and simpler to perform than those done under general anaesthetic and carry less risk of infection than transrectal techniques.

She shared: "Pushing the boundaries of advanced practice to improve prostate cancer care is my passion. That's why I'm thrilled to be part of the Clinical Champions programme and lead an initiative that will deliver faster diagnosis and improve outcomes for men."

At Prostate Cancer UK we are excited to be working with such passionate, knowledgeable and driven Champions who share our values and ambitions to improve care for all men affected by prostate cancer.

Every single one of the 400,000 men living with prostate cancer in the UK should have access to the best prostate cancer tests, treatment, and support – and our Clinical Champions will help us make that a reality.

[Meet our other 19 Clinical Champions and see how they hope to improve prostate cancer care.](#)

Help us improve care for men everywhere by [giving a regular gift](#).

print



Tags: [Treatments](#), [Support](#), [Diagnosis](#), [Better treatments](#)

SHOP

NEWS AND VIEWS

CONTACT US

VACANCIES

MEDIA

ACCESSIBILITY

TERMS

PRIVACY

SITEMAP

PROSTATE
CANCER UK

Prostate Cancer UK is a registered charity in England and Wales (1005541) and in Scotland (SC020832). Registered company number 02862587. Registered office: Fourth floor, The Counting House, 63 Tollymore Street, London SE1 2QZ, UK. Registration Number: 808 94 16 10.

The Prostate Project Helps Men Live A 'Good Life'

The Prostate Project, based at The Stokes Centre for Urology at the Royal Surrey County Hospital, welcomed a special guest to Guildford, none other than its newest patron, Felicity Kendal.



Felicity Kendal and Professor Stephen Langley at The Stokes Centre for Urology at the Royal Surrey County Hospital.

A face and voice familiar to millions thanks to her roles as Barbara in the TV comedy series *The Good Life* as well as numerous other star turns on stage and screen.

Felicity expressed her delight at becoming a patron, describing the Prostate Project as an organisation "close to my heart".

Taking a break from rehearsals for *Anything Goes*, soon to start a run at The Barbican in London, Felicity was given a tour of the £6 million unit, by consultant urologist, Professor Stephen Langley.

Felicity Kendal is launching the Prostate Project, campaign to raise awareness of the importance of early detection of the number one cancer killer in men, prostate cancer, and she is appealing to women to encourage their menfolk to visit their GP if they are 50-plus, have a family history of the disease, are black or have any symptoms, for a test.

Felicity said: "It's up to us to make sure our men lead a good, and a long life."



Felicity Kendal filming at The Stokes Centre for Urology.

The visit also allowed her the opportunity to film a short series of videos, including a very special thank you to the NHS on the occasion it is 70th birthday, paying special tribute to everyone at the Royal Surrey NHS Foundation Trust, for their extraordinary skill and commitment during the course of a year like no other.

The chairman of The Prostate Project charity, Al Turner, said: "We are delighted to have Felicity join us as our newest patron."

"Having the support of an icon, particularly someone so universally loved by an entire generation, is a boost for everyone involved with the Prostate Project.

"The facts about prostate cancer are stark, but it needn't be the killer it currently is. With early detection, survival rates are incredibly high and all it takes is a simple PSA blood test.

"Right now, prostate cancer is the UK's most common cancer, claiming 12,000 men per year."

He added that fundraising remains vital to produce ground-breaking research to deliver the best treatment for men with prostate cancer.

For more information about the Prostate Project, visit www.prostate-project.org.uk or email info@prostate-project.org.uk

Felicity Kendal filming at the Stokes Urology Centre and Felicity Kendal with Professor Stephen Langley, Consultant Urologist

Share this:



Share This Post





Prostate
Cancer
Research

pcr.org.uk

tackle
prostate cancer



Prostate Cancer Research brings you

LIVING WELL WITH PROSTATE CANCER - A ZOOM WEBINAR SERIES

in collaboration with Tackle Prostate Cancer

From Aug 4, 2021 - Jan 10, 2022 we are bringing you a number of video webinars, hosted on Zoom, covering a diverse range of topics. The theme of each month is as follows:

August A Whole Life Approach

September Nutrition and Prostate Cancer

October The NHS and Your Care

November The Future of Treatment

December Looking and Feeling Great

January Supporting Others

Each webinar will last between 1-2 hours, will include a presentation by an expert(s) on the topic and include an opportunity for Q&A at the end.

Attendance is completely **FREE**.

To find out more information and to sign up please click **HERE**.

Places are limited and allocated on a first-come first-served basis so please sign up soon to avoid disappointment!

REGISTER NOW

This series is supported by a grant from



THE
CHILDWICK
TRUST

Prostate Cancer Research is the working name of Prostate Cancer Research Centre, a registered charity in England and Wales (1156027).



Prostate
Cancer
Research

pcr.org.uk

tackle
prostate cancer



Join us for our webinars on A Whole Life Approach

- Aug 4th, 11:30am-12:45pm - Building Resilience
- Aug 11th, 11:30am-12:45pm - Prostate Cancer and the Benefits of Physical Activity
- Aug 18th, 11:30am-12:45pm - Coping with Advanced Disease
- Aug 25th, 11:30am-12:45pm - Wellbeing and Self-care

Attendance is free but places are limited so register now
to avoid disappointment

In association with

40
years

Penny Brohn UK
Living Well with Cancer



Prostate
Cancer
Research

pccr.org.uk

tackle
prostate cancer



Join us for our webinars on Nutrition and Prostate Cancer

- **Sep 13th, 2:30-4pm - The importance of gut health, nutritional approaches and useful supplements in prostate cancer**
- **Sep 20th, 2:30-4pm - Nutritional support during treatment and managing side effects after treatment**
- **Sep 27th, 2:30-4pm - Gut health optimisation, immune system support and living well after treatment**

Attendance is free but places are limited so register now to avoid disappointment



In association with

Functional Medicine Wimbledon



Prostate
Cancer
Research

pccr.org.uk

tackle
prostate cancer



Join us for our webinars on The NHS and Your Care

- Oct 20th, 4-5:30pm - Follow up care in a digital era - empowering you to be a partner in your care
- Oct 26th, 12-1:30pm - Re-engaging with the NHS and secondary care after months or years of primary care

Attendance is free but places are limited so register now to avoid disappointment





Prostate
Cancer
Research

pcr.org.uk

tackle
prostate cancer



Join us for our webinars on The Future of Treatment

- Nov 1st, 11:30am-1pm - Prostate Cancer Genetics Part 1
- Nov 8th, 11:30am-1pm - Prostate Cancer Genetics Part 2
- Nov 17th, 2:30-4pm - Demystifying Prostate Cancer Clinical Trials
- Nov 23rd, 10:30am-12pm - Artificial Intelligence (AI) and Machine Learning (ML) - a new frontier against Prostate Cancer

Attendance is free but places are limited so register now to avoid disappointment





Prostate
Cancer
Research

pcr.org.uk

tackle
prostate cancer



Join us for our webinars on Looking and Feeling Great

- Dec 1st, 1-2pm – Let's Talk Sex and Intimacy
- Dec 3rd, 4-5pm – Let's Talk Sex and Intimacy (for the LGBTQ community)
- Dec 10th, 2-4pm – 'Skin Fitness' workshop
- Dec 14th, 10am-12pm – Body Confidence workshop

Attendance is free but places are limited so register now
to avoid disappointment

In association with



look good **feel better**
FACING CANCER WITH CONFIDENCE



Sexual Advice
Association



Prostate
Cancer
Research

pccr.org.uk

tackle
prostate cancer



Join us for our webinar on Supporting Others

- **Jan 10th, 11am-12:30pm - Helping wives, husbands and partners understand and cope**

Attendance is free but places are limited so register now to avoid disappointment

In association with



MAGGIE'S

Everyone's home of cancer care

NEWS RELEASE 10-JUL-2021

New concept drug hunts down late-stage prostate cancer

EUROPEAN ASSOCIATION OF UROLOGY

Research News

A new class of drug successfully targets treatment-resistant prostate cancers and prolongs the life of patients. The treatment delivers beta radiation directly to tumour cells, is well tolerated by patients and keeps them alive for longer than standard care, found a phase 3 trial to be presented at the European Association of Urology congress, EAU21, today.

Despite progress in medicine in recent years, metastatic castration-resistant prostate cancer remains untreatable and fatal. The new treatment, known as Lu-PSMA-617, takes a new approach, targeting a molecule called PSMA, which is known to be increased on the surfaces of the tumour cells, destroying them and their surrounding microenvironment.

Professor Johann de Bono, Professor of Experimental Cancer Medicine at The Institute of Cancer Research, London, and Consultant Medical Oncologist at The Royal Marsden NHS Foundation Trust, and Professor Ken Herrmann, Director of the Clinic for Nuclear Medicine at University Hospital Essen, Germany, and an international team of researchers set out to see whether Lu-PSMA-617 was more effective than standard care and recruited 831 patients with metastatic castration-resistant prostate cancer between June 2018 and October 2019. Patients were randomly assigned to receive the treatment plus standard care or standard care alone.

They report that the treatment significantly improved survival of patients by an average of four months, compared with standard treatment. Median survival time was 15.3 for the treatment group and 11.3 months for those receiving standard care. Progression-free survival, or the time before a patient's tumour became worse, was also longer with the treatment: a median of 8.7 months compared with 3.4 months for those with standard care.

The trial also compared side effects, finding that health-related quality of life was not negatively affected, and the team concludes that it is an effective and safe medicine that can improve standard of care for patients with this advanced prostate cancer.

Professor Ken Herrmann says: "This is a completely new therapeutic concept; a precision medicine that delivers radiation directly to a high incidence tumour. The treatment was well tolerated by patients and they had an average of four months' longer survival with good quality of life. Lu-PSMA-617 can improve the lives of many men with advanced prostate cancer and their families."

Professor Johann de Bono says: "Our findings show that this potent radioactive medicine can deliver radiation precisely to cancer cells and destroy them, extending patients' lives. I hope men whose tumours have high levels of PSMA can soon benefit from this highly innovative treatment. Currently, the treatment is being appraised by the National Institute for Health and Care Excellence (NICE) for use in the NHS in England and Wales."

"Using the PSMA molecule to directly target prostate cancer cells is the beginning of a new era of precision medicine in urology diagnostics as well as therapy", says Professor Peter Albers, Head of the Department of Urology, Dusseldorf University, and Chair of the Scientific Office of the EAU. "LU-PSMA-G17 was tested in so-called end-stage disease and still showed superiority and this paves the way for studies to treat patients in earlier stages. We have seen similar success in the diagnostic setting, using this molecule to improve the way we stage tumours. This targeted approach will revolutionise the way we approach the treatment of men with prostate cancer in the future."

###

Disclaimer: AAAS and EurekAlert! are not responsible for the accuracy of news releases posted to EurekAlert! by contributing institutions or for the use of any information through the EurekAlert! system.

Media Contact

Abigail Chard
abigail@campuspr.co.uk
0044-756-044-8532

🐦 @Uroweb

<http://www.uroweb.org> 🌐



[NHS Foundation Trust \(/\)](#)

[Private Care \(/private-care\)](#)

Coronavirus (COVID-19): visiting The Royal Marsden suspended

Coronavirus (COVID-19) latest: We would like to remind you that wearing masks and maintaining social distancing is still required when at the hospital. Visiting is decided on a case by case basis as our patient group are at greater risk if they contact COVID-19. We appreciate your understanding as we work to **keep everyone safe** (<https://www.royalmarsden.nhs.uk/covid-19>).

New drug combination attacks prostate cancer on two fronts to keep men healthy for longer

Men with particularly aggressive prostate cancers can be treated more effectively by combining an existing targeted medicine, abiraterone, with a new experimental drug to block two of cancer's growth signals at once, a major new trial has shown.

08 July 2021



Study leader Professor Johann de Bono

Published in *The Lancet* today, results from the IPATential150 study showed that the new combination extended the time before prostate cancers progressed and spread further in men whose tumours lacked a gene known as PTEN – one of the most commonly deleted tumour suppressor genes in cancer.

A team led by The Royal Marsden and The Institute of Cancer Research, London, assessed the efficacy of the targeted hormone drug abiraterone – standard medicine for many men with advanced prostate cancer – together with a new drug called ipatasertib in men with advanced prostate cancer who had received no prior treatment.

Previous results looking at ipatasertib's safety and efficacy in combination with abiraterone had already shown promise, but these latest findings provide the first strong evidence of the benefit of combining the two drugs.

The international phase III trial took place across 200 sites in 26 countries and involved 1,101 men, of whom 521 had tumours that lacked a fully functioning PTEN gene.

Results found that giving ipatasertib plus abiraterone as a first-line treatment reduced the risk of death or cancer progression in patients whose tumours lacked PTEN by 23 per cent compared with abiraterone alone. 61 per cent of those who received the combination saw their tumour get smaller – compared with 39 per cent for those who took abiraterone on its own. Additionally, 19 per cent of those taking the combination had a complete remission – meaning no sign of the disease was found – compared with 6 per cent for those taking abiraterone only.

“PTEN is one of the most commonly deleted genes in prostate cancer, so this study offers hope to many patients.”

Around half of men with advanced prostate cancer have tumours with faulty PTEN genes and this group of patients tend to have a particularly poor prognosis. This new phase III trial could open up the combination treatment as a new targeted approach to keep these patients healthy for longer, potentially benefitting more than 10,000 men per year in the UK.

The ipatasertib and abiraterone combination was also associated with greater and longer-lasting PSA response rates – used to monitor prostate cancer progression – in patients both with and without PTEN.

The drug combination works by simultaneously switching off two powerful growth signals that fuel prostate cancer. Abiraterone blocks signalling of the male hormone androgen receptor, while ipatasertib blocks another set of tumour growth signals involving the protein AKT.

Study leader [Professor Johann de Bono](#) ([/our-consultants-units-and-wards/consultant-directory/professor-johann-sebastian-de-bono](#)), Consultant Medical Oncologist at The Royal Marsden and Professor of Experimental Cancer Medicine at The Institute of Cancer Research, London, said:

“We have shown that combining an existing and a new drug to attack cancer on two different fronts can keep men with prostate cancer healthier for longer. The findings offer a promising new treatment option for patients with a common and aggressive type of prostate cancer and could eventually change clinical practice for these men.

“PTEN is one of the most commonly deleted genes in prostate cancer, so this study offers hope to many patients.”

Peter Hartley, 68, from Market Harborough, has been receiving treatment at The Royal Marsden through the IPATentia.150 trial for three years, following his prostate cancer diagnosis. Being on this research trial has seen Peter’s prostate specific antigen (PSA) levels drop rapidly, reducing the size of his tumours and enabling him to keep living a healthy life. Peter said:





“When I was first diagnosed with advanced prostate cancer in June 2015, they told me there was nothing they could do and I would only have two to three years left, this was before I came to The Royal Marsden. Following a course of chemotherapy, I joined Professor De Bono’s research trial and for the past three years I’ve been given a new lease of life. Being on this trial has been nothing short of a miracle, I’ve had no side effects and my quality of life is fantastic.

“I feel so privileged and lucky to have this opportunity, to stay as healthy as possible for as long as possible. I’m monitored closely by my medical teams and have regular hospital checks which is reassuring. The nurses and doctors are amazing and can’t do enough for you. Thanks to the success of this treatment, I can continue doing the things I love like spending time with my wife, children and 3 grandchildren, visiting the Lake District and enjoying my golf, tennis and hiking!”



Peter Hartley

The IPATential[®] 50 trial was funded by Roche.

 [Print \(javascript:window.print\(\)\)](#)  [Email \(mailto:?subject=The Royal Marsden NHS Foundation Trust website&body=https%3A%2F%2Fwww.royalmarsden.nhs.uk\)](mailto:?subject=The Royal Marsden NHS Foundation Trust website&body=https%3A%2F%2Fwww.royalmarsden.nhs.uk)  [Share](#) 

Tackle Monthly Briefing

July 2021

Welcome to our July monthly briefing. We hope this briefing finds you and your family well and healthy. As I type this, the sun is pouring through my office window, lets hope it stays that way until at least the weekend! We have some useful resources to announce in this briefing, which will be of benefit to you and your members. Please share this content with your members through your own newsletters and communications, so they can take advantage of these resources and the work we are doing. We also need your help, so please respond to our request below.

Helpful info and resources for you and your members

Free Webinars

Following the successful partnership earlier this year on the Hard Things campaign with our friends from Prostate Cancer Research (PCR), we are once again collaborating with them; this time on a series of educational and informative webinars for all people living with and affected by Prostate Cancer.

From this August until January 2022, PCR, in collaboration with us at Tackle Prostate Cancer, are bringing you a number of video webinars, hosted on Zoom, covering a diverse range of topics. These sessions will be led by experts in their field discussing topics that our prostate cancer communities

Can you help us?

Tackle website and brand refresh

We are slowly working through our branding and website refresh. Working with Bradford based agency Out of Place, we are now at the stage where we are looking at wireframes and content. In terms of our branding refresh, following extensive discussions with and research by the agency we have collectively chosen a new concept from a range of options. We are very grateful to those of you who have contributed your views and thoughts at our recent focus group for the rebranding. We are very excited to showcase the fruits of all of the hard work, and hope to do this in early Autumn, at our AGM, which we are looking to organise for October.

If you would like to comment or discuss any aspect of this briefing or would like more information on our new website, then please contact Sarah at sarah.gray@tackleprostate.org.

have told us they want more support and information on.

The topics cover everything from Nutrition, Looking Good, the NHS and your Care, Future Treatments, including Genetics and Artificial Intelligence to sessions on Sex and Intimacy. Each month is a different theme and we kick off on [August 4th](#) with a session on Building Resilience. The sessions will be live but will all be recorded, so if you miss a session, you will be able to catch up later.

Attendance is free but places are limited. To find out more about the different topics each month – including dates, times and guest speakers – as well as information on how to register, [please click here](#)

If you would like a copy of a poster to publicise in your GP surgery or local hospital clinic then please let me know. The more people that find out about these webinars the more people we can support.

Updated contact details

We want to make sure that people are able to find your groups on our support group map, so as part of the work on our website it is essential that we have the correct and up-to-date details for your group. We shall shortly be emailing all main contacts asking for you to check your details are up-to-date and we would be grateful with your support with this important piece of work.

Poster/Leaflet Design

We have been talking to a few groups who are keen on designing leaflets and posters to attract new members. As we are currently working with a great design agency, we have the opportunity to collaborate on a template leaflet which can be personalised with your local information. If you are interested in working with us, [please let Sarah know](#)

Thank You

22 groups responded to our recent survey on PSA Testing Events.

Several groups reported that they would be interested in a Q&A

session on how to run an event, so we shall be looking to organise a Zoom meeting on this topic in the future. Watch this space!

Upcoming Events

If you would like to advertise your event, or have a speaker coming that you think others would find useful, then let me know. We can advertise it [here](#).

A Note From Sarah, our National Support and Development Manager

So, will you be ditching your mask next week. Its a tricky question isn't it...., more importantly will you be meeting face to face with your members, and restarting physical meetings? I know that the Isle of Wight group met for their first hybrid group meeting last week, it would be great to know if you have had a physical or hybrid meeting and how it went. Any tips you can pass onto other groups within our network?

We have been working hard over the past few months on our new website, as well as writing our strategy for the next three years, so much exciting work going on, and we cannot wait to share it all with you. As a small organisation we know we don't have the resources that other charities may have, but what we do have is a commitment to remain focused on supporting the groups in our federation to reach more people living with and affected by prostate cancer.

This month we have supported groups from our Small Grant pot with purchasing IT equipment, and supported towards the set up of a new Partners Group . Do remember that you can access up to £500 by making an application to our Small Grant fund once every 12 months, this can help you run your groups , and can be used to purchase equipment, advertising and marketing etc. If you would like more details, get in touch with me.

We are also keen to look at other ways we can support people living with and beyond prostate cancer, and are delighted to announce that the trustees recently agreed to contribute towards supporting a twelve week counsellor-facilitated peer-support group for men who have had a prostate cancer diagnosis. This will give us vital evidence of the importance of this sort of support, which we can then use as a springboard to get more funding for similar services and support the development of alternative models of support.

As always, as your federation, we are here to support you to run your groups. You can contact me on 07725 083533, [email me](#) or [email Ken](#), our Chairman.

Until next month, stay safe , keep healthy, and enjoy the sunshine whilst it lasts.

Prostate Cancer in Younger Men

By Kara Mayer Robinson

Medically Reviewed by [Michael W. Smith, MD](#) on May 18, 2021

[Prostate cancer](#) is more common in older men than younger men. But more often, younger men are being diagnosed with prostate cancer, which is also known as early onset prostate cancer.

Is Early Onset Prostate Cancer Common?

The average age for a first [prostate cancer diagnosis](#) is 68. In the U.S., about 10% of men newly diagnosed with [prostate cancer](#) are under 55. You may also develop [prostate cancer](#) when you're much younger, in your [teens](#) or as a young adult, though this is extremely rare.

Around the world, there's been an increase in early onset [prostate cancer](#) in men between 15 and 40 years old.

Experts aren't sure why there's an increase. It may be related to certain risk factors. It may also be because of changes in how it's diagnosed. Screenings are more frequent, and there's more awareness that prostate cancer can happen in younger men.

What Causes Early Onset Cancer?

It's not yet clear why younger men get prostate cancer.

There seems to be a link between your genes and early onset prostate cancer. Researchers need to do more studies to see if things like [obesity](#), [physical activity](#), [HPV](#) infection, and exposure to things in the environment like cancer-causing agents play a role.

How Early Onset Prostate Cancer Is Different

Doctors think the type of prostate cancer you get when you're younger may be different from prostate cancer with a later onset and are doing research to learn more.

If you get a [prostate cancer diagnosis](#) when you're younger, it's more likely to be in a more advanced stage. You're also more likely to have a lower rate of survival than middle-aged men and older men would.

In the U.S., the average 5-year survival rate for prostate cancer is between 95% and 100% for men ages 40-80.

For younger men, the 5-year survival rate is lower. For men ages 25-34, it's 80%. For men ages 20-29, it's 50%. For men ages 15-25, it's 30%.

Treating Prostate Cancer in Young Men

There are several treatment options for early onset prostate cancer. Your treatment will be based on your age, stage, symptoms, and overall health.

Watchful Surveillance

With older men, doctors may recommend waiting to treat prostate cancer to see if it gets worse to avoid side effects that affect quality of life. This is called active surveillance. A doctor monitors the cancer through [PSA](#) tests, exams, and [biopsies](#), and chooses to treat it if it grows.

But this is extremely rare. Your doctor will more likely recommend starting treatment right away because as a younger man, you have many years ahead of

you. Watchful surveillance isn't common for younger men, even those with stage I prostate cancer.

Radical Prostatectomy

If the cancer is localized, which means it hasn't spread beyond your prostate, you may have surgery called radical prostatectomy to remove it before it spreads.

During surgery, your doctor removes your prostate, including your prostate gland and surrounding tissues. Your doctor may also remove your pelvic lymph nodes. Your surgery may be open, laparoscopic, or robot-assisted.

Radiation Therapy

Radiation therapy uses X-rays to destroy cancer cells. Radiation can be used to target the cancer in your prostate, or other areas if it's spread to different parts of your prostate area.

There are two types: external beam radiation, which a technician applies outside of your body, and brachytherapy, which a clinician puts into your prostate.

Your doctor may recommend radiation after surgery if they see that the cancer has spread beyond your prostate during surgery. They may also recommend it if your PSA level is still detectable a few months after your surgery.

Hormone Therapy

Testosterone helps prostate cancer cells grow. Hormone therapy stops your body from making testosterone or stops it from getting to cancer cells.

Your hormone therapy may involve medications that stop your body from making testosterone, medications that block testosterone from reaching cancer cells, or other medications that help control testosterone.

Your doctor may recommend hormone therapy if your PSA level or Gleason scores show that you have a higher recurrence risk. Hormone therapy is often used alone for stage IV prostate cancer.

Your doctor may also recommend combining it with [chemotherapy](#), radiation therapy, or surgery, which is much less common.

Chemotherapy

Your doctor may recommend chemotherapy if your prostate cancer has spread to other parts of your body or if hormone therapy doesn't work. Chemotherapy slows the growth of cancer cells.

Chemotherapy involves anti-cancer drugs that travel through your [blood](#) to reach cancer cells. You may have the drugs injected into a vein, or you may take them by [mouth](#) . You may have chemo in cycles, with a period of treatment and then a period of rest. It's often 2-3 weeks per cycle.

Chemotherapy slows the growth of cancer, helps you live a longer life, and may help with symptoms.

Immunotherapy

If your prostate cancer spreads, or if you have advanced prostate cancer without many symptoms but it's not responding to hormone therapy, your doctor may recommend [immunotherapy](#).

[Immunotherapy](#) teaches your [immune system](#) to recognize and destroy cancer cells.

You may have a cancer [vaccine](#) called sipuleucel-T ([Provenge](#)), which boosts your immune system to specifically target and attack prostate cancer cells. It doesn't stop prostate cancer from growing but does seem to help you live longer.

Targeted Drug Therapy

With targeted therapy, your doctor uses drugs to attack weaknesses in cancer cells.

The drugs don't damage your normal cells, but they interrupt cancer cells from growing, dividing, repairing themselves, or interacting with other cells.

With targeted drug therapy, you may take pills twice a day by mouth.

Combination Treatments

Your doctor may recommend a combination of treatments, like radical prostatectomy and external beam radiation, or brachytherapy and external beam radiation.

Side Effects

Prostate cancer treatment often causes side effects that can be concerning for younger men, such as:

- Problems getting and keeping an erection
- Low sperm production
- Leaking urine
- Changes in your penis size

Infertility is common. It happens after surgery because a surgeon removes your prostate and seminal vesicles, which carry sperm from your urethra and out your penis during ejaculation. Radiation also changes your semen and makes it harder for your semen to transport sperm.

If you're concerned about side effects, talk to your doctor. They may recommend these options:

SUGGESTED

Sperm banking. If you want to have children after your treatment, you can try storing your sperm before your surgery. Your medical team will freeze your semen (which has sperm in it) in liquid nitrogen. Later, they'll thaw the semen so you can use it for artificial insemination. After this process, up to 50% of your sperm will grow back.

Your doctor may also be able to extract your sperm directly from your testicles. Your medical team may harvest it from your testicular tissue. Then they inject it into an egg, and if an embryo forms, they can put it into a woman's uterine wall.

Nerve-sparing prostatectomy. Your doctor may try this procedure during surgery, which preserves the nerves on either side of your prostate. You need these nerves to have an erection. A prostatectomy isn't always an option. Talk to your doctor to see if it may work for you.

WebMD Medical Reference

Sources 

SOURCES:

Cancer. "Prostate cancer in young men: An emerging young adult and older adolescent challenge."

Current Urology. "Prostate Cancer: How Young is Too Young?"

American Cancer Society: "Chemotherapy for Prostate Cancer," "Immunotherapy for Prostate Cancer," "Initial Treatment of Prostate Cancer, by Stage," "Targeted Therapy for Prostate Cancer."

Johns Hopkins Medicine: "Fertility After Prostate Cancer Treatment."

Mayo Clinic: "Stage 4 Prostate Cancer."

Prostate Cancer Foundation of Australia: "Treating Prostate Cancer in Younger Men."

© 2021 WebMD, LLC. All rights reserved.



Contact Information

Tel: 07548 033930
 E Mail elpcsginfo@virginmedia.com

From Left to Right Hazel Goulding (Treasurer) Leon D Wright (IT Admin) Stuart Marshall (Secretary) Steve Laird (Vice Chairman) Dave Riley (Chairman)

We are a group of local people who know about prostate cancer. We are a friendly organisation dedicated to offering support to men who have had or who are experiencing the effects of this potentially life threatening disease.

The East Lanc's Prostate Cancer Support Group offers a place for free exchange of information and help for local men and their supporters (family and friends) who may be affected by this increasingly common form of male cancer.

At each meeting we strive to be a happy, supportive and upbeat group of people; encouraging open discussion on what can be a very difficult and perhaps for some an embarrassing subject. We have lively, informative, interactive, sharing and above all supportive meetings.

