

PROSTATE CANCER



This factsheet has been designed in response to a motion originally carried at the 2014 CWU Black Workers Conference, moved by London Postal Engineering.

OVERVIEW

Prostate cancer is the most common cancer in men. More than 47,500 men are diagnosed with prostate cancer every year – that's 129 men every day. 1 in 8 men will be diagnosed with prostate cancer in their lifetime. This ratio and risk factor increases sharply depending on what ethnic group you are from.

Prostate cancer can develop when cells in the prostate start to grow in an uncontrolled way. Some prostate cancer grows too slowly to cause any problems or affect how long you live. Because of this, many men with prostate cancer will never need any treatment but some prostate cancer grows quickly and is more likely to spread. This is more likely to cause problems and needs treatment to stop it spreading.

SYMPTOMS

Prostate cancer does not usually cause any symptoms until the cancer has grown large enough to put pressure on the tube that carries urine from the bladder out of the penis (urethra). Symptoms of prostate cancer can include:

- needing to pee more frequently, often during the night
- needing to rush to the toilet
- difficulty in starting to pee (hesitancy)
- straining or taking a long time while peeing
- weak flow
- feeling that your bladder has not emptied fully
- blood in urine or blood in semen

These symptoms do not always mean you have prostate cancer. Many men's prostates get larger as they get older because of a non-cancerous condition called prostate enlargement.

Signs that the cancer may have spread include bone and back pain, a loss of appetite, pain in the testicles and unexplained weight loss.

RISK FACTORS

We don't know exactly what causes prostate cancer but there are some things that may mean you are more likely to get it – these are called risk factors.

There are three main risk factors for getting prostate cancer, which are things you can't change. These are:

- **getting older** – Prostate cancer mainly affects men over 50, and your risk increases as you get older. The most common age for men to be diagnosed with prostate cancer is between 65 and 69 years. If you're under 50, your risk of being diagnosed with prostate cancer is very low, but it is possible.
- **having a family history of prostate cancer** – You are two and a half times more likely to get prostate cancer if your father or brother has had it, compared to a man who has no relatives with prostate cancer.

Your chance of getting prostate cancer may be even greater if your father or brother was under 60 when he was diagnosed, or if you have more than one close relative (father or brother) with prostate cancer.

Your risk of getting prostate cancer may also be higher if your mother or sister has had breast cancer.

Although prostate cancer can run in families, having a family history doesn't mean you will get it. But it's important to speak to your GP if you have any relatives with prostate cancer or breast cancer, as your risk of hereditary prostate cancer may be higher.

- **being black** – Black men are more likely to get prostate cancer than other men. We don't know why but it might be linked to genes. In the UK, about 1 in 4 black men will get prostate cancer in their lifetime. (This statistic was worked out using information about men recorded as 'black African', 'black Caribbean' and 'black other').

If you have mixed black ethnicity, you are likely to be at higher risk of prostate cancer than a white man. But your exact risk is not known because there is not enough information on prostate cancer in men with mixed black ethnicity and it is not known whether it makes a difference if it's your mother or father who is black.

If you're a black man and you're over 45, speak to your GP about your risk of prostate cancer, even if you don't have any symptoms. Remember to tell them if you have a family history of prostate cancer or breast cancer. You can also contact Prostate Cancer UK Specialist Nurses.

If you have any of these risk factors or if you have any symptoms, speak to your GP. They can talk to you about your risk and about the tests that are used to diagnose prostate cancer. You can also get in touch with Prostate Cancer UK Specialist Nurses, who can help you understand your risk of prostate cancer.

TREATMENT

There are different treatments for prostate cancer. You may have a choice of treatments and this will depend on the stage of your cancer.

People with cancer should be cared for by a multidisciplinary team (MDT). This is a team of specialists who work together to provide the best care and treatment. The team often consists of specialist cancer surgeons, oncologists (radiotherapy and chemotherapy specialists), radiologists, pathologists, radiographers and specialist nurses. Other members may include physiotherapists, dietitians and occupational therapists. You may also have access to clinical psychology support.

When deciding what treatment is best for you, your doctors will consider:

- the type and size of the cancer
- what grade it is
- your general health
- whether the cancer has spread to other parts of your body

Your MDT will be able to recommend what they feel are the best treatment options but ultimately the decision is yours. You should be able to talk with a named specialist nurse about treatment options and possible side effects to help you make a decision. You should also be told about any clinical trials you may be eligible for.

If you have side effects from treatment, you should be referred to specialist services (such as continence services) to help stop or ease these side effects.

DIET AND EXERCISE

A healthy diet and regular exercise are important for health and might help lower your risk of being diagnosed with advanced or aggressive prostate cancer. No one knows how to prevent prostate cancer but a healthy lifestyle may be important.

The latest research suggests that being overweight may increase your risk of being diagnosed with aggressive or advanced prostate cancer. Eating a healthy, balanced diet and keeping physically active can help you stay a healthy weight, and so might help to lower your risk.

There is no strong evidence that any individual food can lower your risk of prostate cancer. You may have heard that certain foods might lower your risk, including pulses, such as beans, peas, lentils and soya foods, and foods containing:

- lycopene – such as tomatoes and tomato products
- selenium – such as Brazil nuts, fish, seafood, liver and kidney
- vitamin E – such as nuts, seeds, wholegrains, green leafy vegetables and avocados.

But there isn't any strong evidence that these help. Instead it's a good idea to choose a balanced diet, including lots of fruit and vegetables and a wide range of other healthy foods, to prevent other health problems and help stay a healthy weight.

*Sources: Prostate Cancer UK (prostatecanceruk.org)
NHS Website (www.nhs.uk)*

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