



Advanced Prostate Cancer

What You Should Know

Urology Care
FOUNDATION™
 The Official Foundation of the
 American Urological Association

What Is Advanced Prostate Cancer?

When prostate cancer spreads beyond the prostate or returns after treatment, it is often called advanced prostate cancer. Prostate cancer is often grouped into four stages, with stages III and IV being more advanced prostate cancer.

Stages of Prostate Cancer

- **Early Stage | Stages I & II:** The tumor has not spread beyond the prostate.
- **Locally Advanced | Stage III:** Cancer has spread outside the prostate but only to nearby tissues.
- **Advanced | Stage IV:** Cancer has spread outside the prostate to other parts such as the lymph nodes, bones, liver or lungs.

When an early stage prostate cancer is found, it may be treated or placed on surveillance (watching closely). Advanced prostate cancer is not “curable,” but there are many ways to treat it. Treatment can help slow advanced prostate cancer progression.

There are several types of advanced prostate cancer:

Biochemical Recurrence

With biochemical recurrence, the prostate-specific antigen (PSA) level has risen after treatment(s) using surgery or radiation, with no other sign of cancer.

Castration-Resistant Prostate Cancer (CRPC)

Castration-resistant prostate cancer (CRPC) is a form of advanced prostate cancer. CRPC means the prostate cancer is growing or spreading even though testosterone levels are low from hormone therapy. Hormone therapy is also called testosterone depleting therapy or androgen deprivation treatment (ADT) and can help lower your natural testosterone level. It is given through medicine or surgery to most men with prostate cancer to reduce the testosterone “fuel” that makes this cancer grow. That fuel includes male

hormones or androgens (like testosterone). Typically, prostate cancer growth slows down with hormone therapy, at least for some time. If the cancer cells begin to “outsmart” hormone treatment, they can grow even without testosterone. If this happens, the prostate cancer is considered CRPC.

Non-Metastatic Castration-Resistant Prostate Cancer (nmCRPC)

Prostate cancer that no longer responds to hormone treatment and is only found in the prostate. This is found by a rise in the PSA level, while the testosterone level stays low. Imaging tests do not show signs the cancer has spread.

Metastatic Prostate Cancer

Cancer cells have spread beyond the prostate. Cancer spread may be seen on imaging studies and may show the cancer has spread. Prostate cancer is metastatic if it has spread to these areas:

- Lymph nodes outside the pelvis
- Bones
- Other organs, such as the liver or lungs

You may be diagnosed with metastatic prostate cancer when you are first diagnosed, after having completed your first treatment or even many years later. It is uncommon to be diagnosed with metastatic prostate cancer on first diagnosis, but it does happen.

Metastatic Hormone-Sensitive Prostate Cancer (mHSPC)

Metastatic hormone-sensitive prostate cancer (mHSPC) is when cancer has spread past the prostate into the body and is responsive to hormone therapy or the patient has not yet had hormone therapy. This means that levels of male sex hormones, including androgens like testosterone, can be reduced to slow cancer growth. Unchecked,

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these male sex hormones “feed” the prostate cancer cells to let them grow. Hormone therapy, like ADT, may be used to reduce the levels of these hormones.

Metastatic Castration-Resistant Prostate Cancer (mCRPC)

Metastatic castration-resistant prostate cancer is when cancer has spread past the prostate into the body and it is able to grow and spread even after treatments were used to lower testosterone levels. The PSA levels keep rising and metastatic spots are present/growing. This is disease progression despite medical or surgical castration.

Signs and Risk Factors of Advanced Prostate Cancer

Signs

Men with advanced prostate cancer may or may not have any signs of sickness. Symptoms depend on the size of the new growth and where the cancer has spread in the body. With advanced disease, mainly if you have not had treatment to the prostate itself, you may have problems passing urine or see blood in your urine. Some men may feel tired, weak or lose weight. When prostate cancer spreads to bones, you may have bone pain. Tell your doctor and nurse about any pain or other symptoms you feel. There are treatments that may help.

Risks

Your risks for prostate cancer rise if you are age 65 or older, have a family history of prostate cancer, are African American or have inherited mutations of the *BRCA1* or *BRCA2* genes.

- **Age:** For all men, prostate cancer risk increases with age. About 6 in 10 cases of prostate cancer are found in men older than 65. Prostate cancer is rare in men under the age of 40.
- **Race/ethnicity:** African American men and Caribbean men of African ancestry face a higher risk for being diagnosed with prostate cancer. They are also more likely to be diagnosed with prostate cancer at younger ages. It is not clear why prostate cancer affects African American men more than other racial/ethnic groups.
- **Genetic Factors:** The risk of prostate cancer more than doubles in men with a family history of prostate cancer in their grandfathers, fathers or brothers. Having family members with breast and ovarian cancer also raises a man's risk for prostate cancer. That is because breast, ovarian and prostate cancers share some of the same genes, including *BRCA1* and *BRCA2*. If a person has any of

these mutations, they should be screened earlier or more often for prostate cancer. As a health care tool, genetic test results can help determine whether a certain treatment would be helpful. For example, men with an inherited poly-(ADP)-ribose polymerase (PARP) mutation in the DNA of cancer cells could be helped with a PARP inhibitor. This targeted therapy inhibits the PARP mutation and helps stop it from repairing cancer cells. Your doctor may suggest genetic testing because of family history or because you have an aggressive prostate cancer. Genetic testing looks for certain inherited changes (mutations) in a person's genes and can help find out if a cancer is hereditary. To find out if you have a genetic mutation linked to prostate cancer, you may take a simple blood or saliva test.

About the Urology Care Foundation

The Urology Care Foundation is the world's leading urologic foundation – and the official foundation of the American Urological Association. We provide information for those actively managing their urologic health and those ready to make health changes in their lives. Our information is based on the American Urological Association resources and is reviewed by medical experts.

To learn more, visit the Urology Care Foundation's website, UrologyHealth.org/UrologicConditions or go to UrologyHealth.org/FindAUrologist to find a doctor near you.

Disclaimer

This information is not a tool for self-diagnosis or a substitute for professional medical advice. It is not to be used or relied on for that purpose. Please talk to your urologist or health care provider about your health concerns. Always consult a health care provider before you start or stop any treatments, including medications.

For copies of printed materials about Prostate Cancer and other urologic conditions, visit UrologyHealth.org/Download or call 800-828-7866.

Developed in collaboration with

