



ROSWELL PARK COMPREHENSIVE CANCER CENTER

PROSTATE CANCER IN AFRICAN AMERICANS

Info Sheet



1 in 6
AFRICAN AMERICAN MEN

will be diagnosed with prostate cancer during his lifetime.



African American men are

76% **MORE LIKELY TO BE**
DIAGNOSED

with prostate cancer

& 2x **MORE LIKELY TO DIE**

from prostate cancer compared to non-Hispanic White men.

WHAT YOU SHOULD KNOW

The **prostate** is a walnut-sized gland in men that makes some of the fluid found in semen. Cancer cells that begin in the prostate can multiply to form a tumor, which may spread to nearby tissues.

AFRICAN AMERICAN MEN FACE GREATER RISK

African American men are more likely to develop prostate cancer, and die from the disease, than non-Hispanic white men. In addition, these factors further increase your risk for prostate cancer:

- ✓ Family history (father, brother, son, grandfather, uncle or half brother diagnosed with prostate cancer)
- ✓ A known genetic mutation such as BRCA1, BRCA2, ATM, HOXB13, MLH1, MSH2 or MSH6

SYMPTOMS TO TELL YOUR DOCTOR

These symptoms are most commonly due to benign conditions — such as an **enlarged prostate** or an **infection**. If you have any of these symptoms, see your doctor to determine the cause.

- ✓ Increased frequency of urination, day or night
- ✓ Difficulty urinating
- ✓ Sense of incomplete emptying
- ✓ Weak urine flow

PROSTATE CANCER EARLY DETECTION

Men should have a discussion with their primary physician about early detection testing, which involves these two steps:

- ✓ **Digital rectal exam** to allow the doctor to feel the prostate and detect unusually firm or irregular areas.
- ✓ **PSA test** to measure the level of prostate-specific antigen (PSA) in your blood.

WHEN TO GET SCREENED

As an African American man, you are considered at high risk for prostate cancer, and you should begin screening earlier than men at average risk.

✓
Begin PSA testing at age 40.

✓
Continue regular testing at 1- to 4-year intervals,
depending on your baseline or previous PSA level, your age and any additional risk factors.

✓
Men over age 70
may discontinue PSA testing unless they are very healthy with a life expectancy of 10 years or more.

HOW IS PROSTATE CANCER TREATED?

The best treatment plan for you will depend on several factors including your age, overall health, and whether your cancer is deemed low- or high-risk. Your treatment may include one or more of the following:

- ✓ **Active surveillance** to monitor your cancer.
- ✓ **Surgery** to remove the prostate in an operation called radical prostatectomy.
- ✓ **Androgen deprivation therapy** which uses medication to reduce testosterone in the body which fuels the cancer.
- ✓ **Medical therapy** which uses anti-cancer drugs such as chemotherapy, targeted therapy, immunotherapy and/or radiopharmaceuticals to fight the cancer.
- ✓ **Radiation therapy** to kill cancer cells with high energy radiation in the form of tiny implanted seeds (called *brachytherapy*) or from a machine (*external beam radiation therapy*).

WHAT IS *Active* SURVEILLANCE



Most men with *low-risk* prostate cancer do not need cancer treatment. With **active surveillance**, we carefully monitor your cancer with timely exams, PSA testing, prostate MRI and biopsy (if needed) and proceed to treatment only if necessary. This allows many men to avoid the potential side effects of curative treatment.

Affected by Prostate Cancer?

Us TOO
SUPPORT - EDUCATION - ADVOCACY
Western New York Chapter



WHY ROSWELL PARK FOR PROSTATE CANCER?

- ✓ **Nationally recognized** as one of a select group of comprehensive cancer centers designated by the National Cancer Institute, and a member of the National Comprehensive Care Network (NCCN).
- ✓ **Multidisciplinary care approach** by a team of prostate cancer experts including oncology-focused urologists, and medical and radiation oncologists, in addition to psychologists, social workers, dietitians and others who work together — under one roof.
- ✓ **Surgeons with high-volume experience** in robot-assisted surgery for prostate cancer. All prostatectomies are performed robotically.
- ✓ **Success above national average.** We consistently perform above the average for preserving erectile function and urinary continence after surgery, reducing side effects that greatly impact quality of life.
- ✓ **Radiologists with special expertise** in multi-parameter MRI to diagnose cancers.
- ✓ **Access to the latest treatments**, including the newest drugs, immunotherapy and other options that may not be available from other providers.

QUESTIONS?



For information, contact:
1-800-ROSWELL
(1-800-767-9355) or scan
the QR code.

GET A **2nd** OPINION

If you have a cancer diagnosis, you need a second opinion. We can arrange for our prostate cancer experts to review your scans and pathology and schedule a consultation.

WHY IT MATTERS IN ABOUT 20% OF PROSTATE CASES

we review, the risk group assessment or diagnosis is changed, impacting your treatment options, decisions and the way forward.