

**Q. My doctor has recommended hormonal treatment. Are there side effects?**



**A.** Yes, there can be side effects, but we have many effective treatment options to manage symptoms of hormonal treatment.

Elizabeth Wulff-Burchfield, MD, medical oncologist

**Q. Are there recent advances in prostate cancer treatment?**



**A.** Yes. Prostate cancer cells are unique from patient to patient. We're studying the DNA or molecular changes in the cells to develop targeted treatments for each patient.

Rahul Parikh, MD, medical oncologist

All men age 55-69 should receive a PSA screening annually. Men at higher risk should talk to their doctor about the best screening options for them.

**For more information**

Patients: **913-588-1227** | 844-323-1227  
Physicians: **913-588-5862** | 877-588-5862  
[kucancercenter.org/prostate](http://kucancercenter.org/prostate)

Cover photo: William P. Parker, MD, urologic surgical oncologist



THE UNIVERSITY OF KANSAS  
CANCER CENTER

# Prostate Cancer Q&A

An estimated 1 in 9 men will be diagnosed with prostate cancer, which is the No. 3 cause of cancer deaths in men. Physicians at The University of Kansas Cancer Center are experts in PSA (prostate-specific antigen) screening, early detection and treatment.



### Q. When should I have my first screening?



**A.** The U.S. Preventive Task Force recommends screening for men ages 55-59, which corresponds with recommendations from the American Urological Association.

J. Brantley Thrasher, MD, urologic surgical oncologist,  
president of American Urological Association

### Q. What if I am not between the ages of 55 and 69?



**A.** Screening at other ages may be appropriate based on a person's risk factors.

Jeffrey M. Holzbeierlein, MD, urologic surgical oncologist

### Q. Who is at high risk for prostate cancer?



**A.** African American men, men with a first-degree relative (father, brother or uncle) who died of prostate cancer, and men with a family history (mother, sister or grandmother) of BRCA-positive breast, ovarian or uterine cancer are at high risk for prostate cancer.

William P. Parker, MD, urologic surgical oncologist

### Q. What are the symptoms of prostate cancer?



**A.** Most men have no symptoms of prostate cancer, making it essential to have screening.

David Duchene, MD, robotic surgeon

### Q. Other than PSA and DRE, how is prostate cancer detected?



**A.** In addition to PSA and digital rectal exam, there are new imaging technologies – like MRI fused with ultrasound – and genetic tests to help diagnose prostate cancer and understand its risk.

Hadley Wyre, MD, urologic surgical oncologist

### Q. How is prostate cancer treated?



**A.** There are many options, including active surveillance, robotic prostatectomy and radiation therapy.

Jeremy Flanagan, MD, medical oncologist

### Q. What is active surveillance?



**A.** Not all prostate cancers require immediate treatment. If treatment is not advised, we recommend active surveillance and offer a comprehensive active surveillance clinic to guide you through this process.

Moben Mirza, MD, urologic surgical oncologist

### Q. What are the nonsurgical treatment options?



**A.** Radiation therapy. We are the only cancer center in the region offering shortened radiation treatments, allowing you to complete treatment in just over a week compared to nine weeks at other centers.

Xinglei Shen, MD, radiation oncologist

### Q. Can I participate in a clinical trial?



**A.** Yes, we offer many clinical trials and will assess your eligibility if you are interested.

Stuart Hinton, MD, medical oncologist

### Q. Are second opinions important?



**A.** Absolutely. It is important to get a second opinion from an institution that offers all options.

Ravi Chuda, MD, medical oncologist

### Q. What can I do to prevent prostate cancer?



**A.** Research shows that having a “heart-healthy diet” that is high in antioxidants and low in animal fat is good for the prostate, along with exercise.

Brian Osgood, MD, medical oncologist

### Q. After I have prostate cancer treatment, are there any resources available to monitor my disease?



**A.** We offer a survivorship program after treatment to monitor for recurrence, manage treatment side effects and help promote general health.

Eugene Lee, MD, urologic surgical oncologist