DIAGNOSTIC EXAMINATIONS

Family history check, regular clinical examination and the following diagnostic examinations can help detect prostate cancer at an early stage.

RECTAL EXAMINATION
It is a clinical examination which checks the size, shape and texture of the prostate gland and detects hard areas or lumps characteristic to this type of cancer.

PROSTATE-SPECIFIC ANTIGEN (PSA)
PSA is a protein which is found in the blood and associated with the prostate glands.

ULTRASOUND
Ultrasound assesses the volume of the prostate and shows areas that may hide chronic inflammation, suspicious foci of malignancy, prostatic calcifications and abscesses.

MULTIPARAMETRIC MAGNETIC RESONANCE IMAGING
This is an important examination for the diagnosis and selection of patients for biopsy, staging and therapeutic management of the prostate cancer.

BIOPSY
Biopsy is recommended based on the findings of the PSA, ultrasonography, MRI or if during the clinical examination hardness is detected by the physician. The procedure consists of collecting tissue samples from the prostate which are then examined under a microscope for cell abnormalities.

THERAPY

The prognosis for the disease depends on the stage of the cancer and the grade of malignancy (Gleason score) as well as genetic abnormalities. Therapy for each patient is individualised, taking into account the patient's medical history, age, general condition and the stage of the disease.

Treatment includes, individually or in combination, the following:
- Monitoring
- Surgical treatment
- Radiotherapy
- Hormonotherapy
- Immunotherapy (targeted treatment)
- Chemotherapy

PREVENTION

The general recommendations given are the adoption of the European Code Against Cancer, which includes maintaining a healthy body weight, doing daily physical activity and following a healthy diet by frequent consuming fresh vegetables and fruits, whole-grain products and avoiding processed meat, alcohol and sugar.

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What do we know about Prostate Cancer?

Prostate cancer occurs when abnormal cells begin to grow in the prostate. If these cells begin to multiply out of control, there is a chance that they spread outside the area of prostate.

Prostate cancer is considered a slow-growing disease. Many men diagnosed with prostate cancer live for many years without any symptoms or without the cancer spreading and becoming life-threatening.

However, some types of cancer can be very aggressive and metastasise rapidly. If detected early, it has very good prospects for effective treatment.

WHAT IS THE PROSTATE?

The prostate is a small gland in men located just below the bladder. It is the size of a walnut and weighs around 15-20 grams. The prostate's main function is the production of a fluid that helps transport sperm during ejaculation.

In Cyprus, prostate cancer is the most common type of cancer, affecting 1 in 6 men.

RISK FACTORS

AGE
- After the age of 50, the chance to develop prostate cancer increases significantly.
- More than 75% of prostate cancer cases occur in men over the age of 65.

FAMILY HISTORY
- Family history increases the chances to develop prostate cancer. If your father or brother has prostate cancer, then the risk is greater than that of an average man. According to newer genetic research, this hereditary predisposition may be responsible for 5% to 10% of prostate cancer cases.

NUTRITION
- A nutrition high in animal fat and dairy products increase the risk of developing prostate cancer.

HIGH LEVELS OF TESTOSTERONE
- High levels of testosterone in the blood may increase the risk of developing prostate cancer as well as some other hormones associated with prostate growth.

MAIN SYMPTOMS

Prostate cancer grows slowly and causes symptoms when the disease is at an advanced stage. Some early symptoms that may appear are:

- Problems urinating: slow or weak urinary stream, frequent urination or nocturia
- Blood in the urine or semen
- Pain in the lower back, thighs, hips and chest
- Weakness or numbness: in the legs or feet, loss of bladder or bowel control