

KEY RESOURCES

Georgia Prostate Cancer Coalition: georgiapcc.org

CancerCare Caregiver Support Services: cancercares.org

CancerCare Co-Payment Assistance Foundation: cancerco-pay.org

National Cancer Institute: cancer.gov/cancertopics/types/prostate

Cure: curetoday.com

Patient Advocate Foundation: patientadvocate.org

Prostate Cancer Foundation: pcf.org

Women Against Prostate Cancer: womenagainstoprostatecancer.org

Us Too Prostate Cancer Education & Support: ustoo.org

Zero - The End of Prostate Cancer: zerocancer.org

In memory of
KEN STEVENS
1933-2016
GPCC Co-founder

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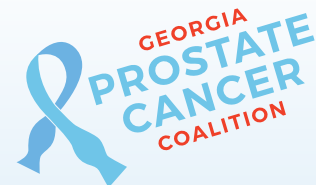


at Southeastern Regional Medical Center

“Winning the fight against cancer, every day.”

PROSTATE CANCER

FAMILY-SAVING TIPS FOR *women*



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Women can make all the difference in the fight against **PROSTATE CANCER.**



Women don't have a prostate, but the men in their lives do. Women make over 80% of healthcare decisions for their families on average. Scheduling their men for prostate cancer tests can be the difference between a family intact and a family in crisis.

The purpose of this pamphlet is to arm women with basic health knowledge about prostate cancer to help them steer men in their lives to take appropriate action.

Women can make all the difference in the fight against prostate cancer.

By supporting and encouraging the men in their lives, women can be a part of the cure. Know his score! It can save his life. Help him make a doctor's appointment today.

Need assistance? Contact the Georgia Prostate Cancer Coalition at 404-448-3127 | info@georgiapcc.org



WHAT IS THE PROSTATE AND WHAT DOES IT DO?

The prostate is an internal gland that is walnut-sized and located just below the bladder and in front of the rectum. It contributes fluid that carries sperm. Urine and semen must pass through the prostate to leave the body.

HOW PREVALENT IS PROSTATE CANCER?

About 1 in 7 men will be diagnosed with prostate cancer. Rates are 1 in 5 for African-American men and 1 in 3 for men with a family history of the disease. It is the second most deadly cancer in men.

HOW SERIOUS IS IT?

About 240,000 men will yearly receive a prostate cancer diagnosis; nearly 27,000 men will die from prostate cancer. The good news is that men who receive an early stage prostate cancer diagnosis and early treatment (where appropriate) have high cure rates. Late stage cancers are not curable.

WHO IS AT RISK?

As men age, their odds increase of receiving a prostate cancer diagnosis. The most at risk groups are African-American men and men who have a direct male relative (grandfather, father, or brother) who developed prostate cancer. In general, men should get a baseline starting at age 40 with annual / regular follow-ups.

WHAT ARE THE SYMPTOMS?

Only rarely does early-stage prostate cancer show any symptoms at all. However, men may experience some of these prostate problems as

Know his score.



they mature: a need to urinate frequently (especially at night); difficulty starting urination or holding back urine; difficulty in having an erection; painful ejaculation; blood in urine or semen. These symptoms alone do not signify cancer, just a need to see a doctor soon.

WHAT CAN MEN DO TO STAY AHEAD OF PROSTATE CANCER?

First, men must learn their family medical history to find out their unique health risk factors. Because early prostate cancer usually has no symptoms, men should consult with their doctor to request a baseline PSA test at age 40 (35 if they are African-American or have a direct male relative who developed prostate cancer). It is also important for men to get a DRE (Digital Rectal Exam) by a doctor to provide information that the PSA score alone may not reveal. Men should also discuss with their doctor how often to get further PSA tests.

WHAT TREATMENT OPTIONS DO MEN HAVE TO TREAT PROSTATE CANCER?

Over the years, many newer treatments for prostate cancer have proven effective. A short list of treatments includes surgery, radiation, hormone deprivation therapy, chemotherapy, proton therapy, high intensity focused ultrasound (HIFU), or focal laser ablation (FLA). In addition, there are dietary changes and the use of various herbal supplements. There is no universal "right" treatment for men. The best treatment for a man depends on his health, age, and stage of cancer. You and your man should learn about all treatment options and pick one right for him. Then select a doctor experienced in that procedure.

HOW DO I GET HELP?

The answer will depend on where you live. If you and your partner live in a major metro area, you will have many choices. Check with friends who have been through the process for names of doctors. If you live in a rural area, your options may be limited. Contact your county health department and GPCC's website for recommendations.

WHAT DO WE DO IF WE HAVE LIMITED OR NO HEALTH INSURANCE AND CAN'T AFFORD TO SEE A DOCTOR?

Check with your religious leader for alternate resources. Ask if there are health fairs in your area where certain physical tests are offered free. Also, contact your county health department about free health events. Learn if there are fraternal or civic groups or area hospitals that sponsor screening events from time to time. Also, check GPCC's website calendar for dates/ locations of free screenings.

AS A WOMAN, I PLAN TO GET A PAP SMEAR AND A MAMMOGRAM EACH YEAR. I AM FRUSTRATED THAT I CAN'T GET MY HUSBAND/ BOYFRIEND TO GO TO THE DOCTOR. WHAT CAN I DO ABOUT IT?

First, men and women may view healthcare differently. Women see it as central to personal and family well-being. Men may see themselves as invincible and that a medical issue is a blot on their masculinity. Assure them that seeing a doctor is a way to show their devotion to you and the family. Even better, their checkup often takes less time, is less invasive, and less uncomfortable than pap smears or mammograms.