

## PROSTATE CANCER

### Queensland<sup>1,2</sup>

- ✳ 3987 Queenslanders were diagnosed with prostate cancer in 2015, making it the most commonly occurring cancer in males (excluding non-melanoma\* skin cancer). Prostate cancer made up 26 per cent of all male cancers.
- ✳ 645 males died from prostate cancer in 2015 making it the second most common cause of male cancer deaths after lung cancer.
- ✳ Prostate cancer was responsible for 13 per cent of all male cancer deaths.
- ✳ The approximate lifetime risk of a Queensland male to be diagnosed with prostate cancer before the age of 85 is one in five.
- ✳ The approximate lifetime risk for a Queensland male to die of prostate cancer before the age of 85 is one in 26.
- ✳ In 2015, 71 per cent of all prostate cancer deaths occurred after 74 years of age.
- ✳ On average, males diagnosed with prostate cancer were 95 per cent as likely to live for another five years compared to the general population.

### Trends in Queensland<sup>Error! Bookmark not defined.</sup>

- ✳ Between 2008 and 2015, prostate cancer incidence rates have significantly decreased by 3.5 per cent per year. This followed an increase in rates by 4.9 per cent for year from 1998-2007, a short period of 8.5 per cent of decrease in rates per year from 1994-1997 and a 10.5 per cent increase in rates per year from 1988-1993. Prior to this the incidence rates were stable from 1982-1987.
- ✳ Mortality rates due to prostate cancer have decreased by 1.9 per cent per year between 1993 and 2015. Prior to this, mortality rates were increasing by 3.5 per cent per year between 1982 and 1992.

### Australia<sup>3</sup>

- ✳ Prostate cancer is the most common form of cancer in Australian (excluding non-melanoma skin cancer).
- ✳ After lung cancer, prostate cancer causes more deaths among Australian men than any other kind of cancer.
- ✳ Prostate cancer is rare before the age of 45.

\* Includes Basal and Squamous Cell Carcinoma. Excludes other skin cancers such as Merkel Cell Carcinomas

<sup>1</sup> Queensland Cancer Register, 2018. Unpublished data (1982-2015).

<sup>2</sup> Queensland Cancer Statistics On-Line, 2018. Viertel Cancer Research Centre, Cancer Council Queensland ([qcsol.cancerqld.org.au](https://qcsol.cancerqld.org.au)). Based on data released by the Queensland Cancer Register (1982-2015; released November 2018).

<sup>3</sup> Australian Institute of Health and Welfare (AIHW) 2018 Cancer Data in Australia; Australian Cancer Incidence and Mortality (ACIM) books: prostate cancer Canberra: AIHW. <https://www.aihw.gov.au/reports/cancer/cancer-data-in-australia/>.

- ✦ At least 82 per cent of prostate cancers occur in men aged 60 years and over, and 97 per cent of deaths from prostate cancer occur in men aged 60 years or over.
- ✦ On average, Australian men diagnosed with prostate cancer were 95 per cent as likely to live for another five years compared to the general population.

## General Information<sup>4</sup>

- ✦ The prostate is a small gland that sits below the bladder. The gland, which is about the size of a walnut, is part of the reproductive system. Only men have a prostate gland. The prostate gland produces fluid that helps to feed and protect sperm. This fluid is the main component of semen.
- ✦ Prostate cancer develops when abnormal cells in the prostate gland start to grow more rapidly than normal cells, and in an uncontrolled way. Most prostate cancers grow more slowly than other types of cancer, although this is not always the case.

## Detection and symptoms<sup>5</sup>

- ✦ Early prostate cancer rarely causes symptoms. Even when prostate cancer is advanced at the time of diagnosis there may be no symptoms. Where symptoms do occur, they are often due to non-cancerous conditions, such as benign prostate hyperplasia (BPH).

Symptoms of advanced prostate cancer may include:

- Unexplained weight loss
  - Frequent or sudden need to urinate
  - Blood in the urine
  - Pain in the lower back, hips or pelvis
- ✦ There is no single, simple test to detect prostate cancer. The most common tests for prostate cancer are the PSA (prostate specific antigen) blood test, rectal examination and biopsy. Prostate screening approaches are still being investigated.
  - ✦ The PSA test does not indicate with complete certainty that a person does or does not have prostate cancer – only one in three men with a higher than expected result are found to have prostate cancer. However, it does guide the decision about whether further tests could be beneficial.
  - ✦ A biopsy is the only definitive way of telling whether you have prostate cancer.
  - ✦ Unfortunately, there is not yet a test available that is very good at differentiating between aggressive cancers and those which could be safely left alone. That's why it's important for men who are thinking about being tested to be fully aware of the pros and cons of testing, and to make a decision they are comfortable with on that basis.

<sup>4</sup> Cancer Council Australia. (March 2018). [Understanding Prostate Cancer](#) [brochure].

<sup>5</sup> Baade PD, Steingard SK, Aitken JF. Current Status of prostate cancer in Queensland: 1982 to 2002. Brisbane, Viertel Centre for Research in Cancer Control, Queensland Cancer Fund. 2005.

<sup>6</sup> Prostate cancer in men. (<https://cancerqld.org.au/cancer-information/types-of-cancer/prostate-cancer/#symptoms>)

## Risk factors<sup>6</sup>

While the causes of prostate cancer are unknown, your risk of developing prostate cancer increases:

- ✦ As you get older – prostate cancer is most commonly diagnosed in men aged 60-79.
- ✦ If your father or brother has had prostate cancer – your risk will be twice that of other men.
- ✦ If you have a strong family history of breast or ovarian cancer, particularly BRCA1 and BRCA2 gene mutations.
- ✦ If you have an inherited gene that increases your risk – multiple relatives on the same side of the family with prostate, breast and/or ovarian cancers; a brother or father diagnosed with cancer prostate cancer before the age of 60.

## Prevention

The causes of prostate cancer are not fully understood and there is currently no clear prevention strategy. Cancer Council Queensland recommends that to reduce your overall cancer risk you; quit smoking, maintain a healthy body weight, eat a healthy diet, be physically active, stay SunSmart, limit alcohol, participate in cancer screening programs (if eligible) and report unusual changes to your doctor immediately.

## Information and Support

### **Cancer Council 13 11 20**

Being diagnosed with cancer or supporting a loved one can leave you with many questions. We want to help you find the answers. Call Cancer Council 13 11 20 Information and Support line to talk with one of the team.

Our team can provide you with cancer information, emotional and practical support. We can also refer you to Cancer Council Queensland's support programs and services.

This confidential service is available Monday to Friday 9am-5pm (excluding public holidays).

### **Cancer Connect**

Cancer Connect is a confidential telephone-based peer support service that connects you, your carer or loved ones with a peer support volunteer who has had a similar cancer experience. You can be matched with a Cancer Connect volunteer based on cancer diagnosis, treatment, family or work issues.

### **Cancer Counselling Service**

Living with a cancer diagnosis, or supporting someone along the way, is rarely easy. Talking things through with a counsellor or psychologist can help you manage your cancer related concerns.

Our Cancer Counselling Service is available for anyone distressed by cancer at any stage. We are a telephone-based counselling service, with face to face appointments available in some regional offices. Our team included nurse counsellors and psychologists trained and experienced in helping people affected by cancer.

***For further information and support, please call Cancer Council 13 11 20***

**Disclaimer:** The information in this publication should not be used as a substitute for advice from a properly qualified medical professional who can advise you about your own individual medical needs. It is not intended to constitute medical advice and is provided for general information purposes only. Information on cancer, including the diagnosis, treatment and prevention of cancer, is constantly being updated and revised by medical professionals and the research community.

Cancer Council Queensland does not warrant that the information in this publication is correct, up to date or complete nor that it is suitable for any particular purpose. Your use of the information in this publication is at your own risk. To the fullest extent permitted by law, Cancer Council Queensland does not accept any liability for any reliance placed on information that is not correct, complete or up to date, or that is not suited to the purpose for which it was relied upon. If any warranty or guarantee cannot by law be excluded, then, to the extent permitted by law, Cancer Council Queensland's liability for such warranty or guarantee is limited, at Cancer Council Queensland's option, to supplying the information or materials again or paying the cost of having the information or materials supplied again.