

“Wiki” is the Hawaiian language word for “fast.” The intent of these ‘Wiki’ Alerts is to provide brief informational resources about chronic disease issues that impact Asian Americans, Native Hawaiians, and Pacific Islanders (AAs and NHPs).



September is Prostate Cancer Awareness Month



Prostate Cancer ‘Wiki’ Alert

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Basic Facts

Prostate cancer forms in the tissues of the prostate, which is a gland in the male reproductive system found below the bladder and in front of the rectum. All men are at risk for prostate cancer. **In fact, about 1 in 6 will be diagnosed with prostate cancer during his lifetime** (American Cancer Society, 2009).

Research has shown that men with certain **risk factors** are more likely than others to develop prostate cancer (American Cancer Society, 2010):

- The chance of being diagnosed with prostate cancer increases with age.
 - **1 in 41 for ages 40-59**
 - **1 in 16 for ages 60-69**
 - **1 in 8 for ages 70 and older**
- A man with a father or brother who developed prostate cancer is twice as likely to develop the disease.
- Men who eat a lot of red meat or high fat dairy products appear to have a slightly higher chance of getting prostate cancer.
- Studies have also shown that men who eat fewer amounts of fruits and vegetables have a higher chance of getting prostate cancer.

Not everyone experiences symptoms of prostate cancer, but if you do experience these **signs and symptoms** you should consult with your doctor:

- Pelvic pain
- Frequent need for urination
- Difficult or painful urination
- Blood in the urine or semen
- Painful ejaculation
- Loss of appetite and weight
- Bone pain

Statistics

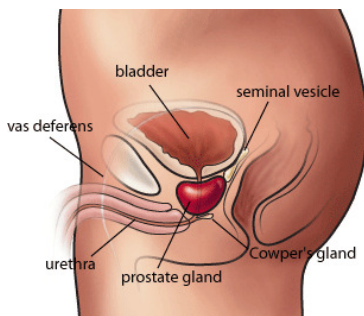
- Prostate cancer was the leading cancer among Asian Indian/Pakistani, Chinese, Filipino, Guamanian/Chamorro, Native Hawaiian, Japanese, and Samoan men (Miller et al., 2008).
- Prostate cancer was among the top three causes of cancer deaths in Asian Indian/Pakistani, Filipino, Native Hawaiian, and Samoan men (Miller et al., 2008).
- In California, Asian American men have higher rates of noncompliance with prostate cancer screening guidelines. Vietnamese and Koreans posting the lowest screening rates of all ethnic groups and Chinese, Filipinos and Other Asians screening at rates lower than the California state average (California Asian Pacific Islander Joint Legislative Caucus, 2009).
- Asians were less likely to get screened for prostate cancer within the last two years than non-Asian Americans (S.E. Shive et al., 2006).

Prostate Cancer Screening

There is no formal routine screening test for prostate cancer. However, there are currently prostate cancer screening tests being used including the **prostate specific antigen (PSA) blood test** and **digital rectal examination (DRE)**. A PSA test and DRE can detect a problem in the prostate before there are any symptoms. They do not show whether or not it is prostate cancer - only whether or not further testing is needed. If you have an abnormal test result, the doctor will suggest a biopsy to make a diagnosis.

PSA test: The prostate makes the prostate specific antigen (PSA). A lab checks the level of PSA in the blood sample. A high PSA level may be caused by prostate cancer.

DRE: A doctor inserts a lubricated, gloved finger into the rectum and feels the prostate through the rectal wall. The prostate is checked for hard or lumpy areas.



Men should be informed by their doctor about potential risks and benefits of prostate cancer screenings before being checked. If there is a family history of prostate cancer, men should talk to their doctor earlier.

- Ideally, the discussion about prostate cancer screening should take place at **age 50 for men**.
- By **age 45** if you are an **African American man, or have a father, brother, or son with prostate cancer**.
- By **age 40** if you have **several family members who had/have prostate cancer**.

Us TOO, a grassroots non-profit prostate cancer education and support network, recommends that you:

- **"Know your PSA."** Keep a record of the exact numbers. Most healthy men have levels under 4 nanograms per milliliter (ng/mL). When prostate cancer develops, the PSA level usually goes above 4. Although, a level below 4 does not mean that cancer is not present.
 - **Men have a 1 in 4 chance of having prostate cancer when the PSA level is between 4 and 10.**
 - **Also over 50% chance when PSA level is more than 10.**
- **Track your PSA** each year so you will know if it has increased too much since the previous year. A rise in PSA levels of 0.75 ng/mL or more within one year may require further investigation by your doctor.
- **Have an annual test.** It is so important that men should make it a calendar event.

Following these recommendations can help detect prostate cancer earlier, improve the quality of life of diagnosed patients, and decrease the number of deaths caused by prostate cancer. The earlier the disease is detected, the more easily and effectively it can be treated.



Additional Resources

American Cancer Society

Toll-free number: 1-800-ACS-2345 (1-800-227-2345)

Website: www.cancer.org

American Urological Association Foundation

Toll-free number: 1-866-RING-AUA (1-866-746-4282)

Website: www.urologyhealth.org

National Cancer Institute

Toll-free number: 1-800-4-CANCER (1-800-422-6237)

TTY: 1-800-332-8615

Website: www.cancer.gov

ZERO - The Project to End Prostate Cancer (formerly National Prostate Cancer Coalition)

Toll-free number: 1-888-245-9455

Website: www.zerocancer.org

Prostate Cancer Foundation (formerly "CaPCURE")

Toll-free number: 1-800-757-CURE (1-800-757-287) or 1-310-570-4700

Website: www.pcf.org

Us TOO International, Inc.

Toll-free number: 1-800-80US TOO (1-800-808-7866)

Website: www.ustoo.org