

Advances in Radiation Therapy for prostate cancer

Radiation therapy has advanced very quickly over the last 10 years and is now very sophisticated. This means that radiation therapy is getting better all the time in curing and controlling prostate cancer, and the chance of serious side-effects is very low.

A recent landmark study shows that radiation therapy is at least as likely to cure or control the cancer as surgery¹. More precise shaping of radiation beams and accurate delivery using CT scans, xrays and target markers in the prostate minimise side-effects². In fact, in a big 10-year study, the urinary and sexual side effects in the long-term were lower in men having radiation therapy than for surgery³.

In addition, the treatment delivery for each daily treatment is getting faster. There are different types of radiation (external beam or brachytherapy) and delivery protocols that suit different men e.g. 20 treatments compared to the usual 39-40 treatments. Ask for a referral to the expert in radiation therapy, the radiation oncologist, to explain all these technical issues and what they might mean for you.

You should get all the information you need to make an informed decision about your prostate cancer treatment options. You have time to do this. It can be really disappointing to regret a rushed decision. Seeing a radiation oncologist will help you work out what is best for you. Ask your GP to refer you to a radiation oncologist to help you discuss your options.

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Useful Resources

Targeting Cancer

www.targetingcancer.com.au

Prostate Cancer Foundation of Australia

www.prostate.org.au

Cancer Institute NSW – Prostate Cancer Treatment Options

www.eviq.org.au

REFERENCES

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- 2: Wilcox S et al. Is modern external beam radiotherapy with androgen deprivation therapy still a viable alternative for prostate cancer in an era of robotic surgery and brachytherapy: A comparison of Australian series. *JMIRO* (2015) doi:10.1111/1754-9485.12275
- 3: Donovan JL et al. Patient-Reported Outcomes after Monitoring, Surgery, or Radiotherapy for Prostate Cancer. *N Engl J Med* (2016); doi:10.1056/NEJMoa1606221



RADIATION THERAPY FOR PROSTATE CANCER

Helping you to understand
ALL your treatment options

FIRST THINGS FIRST

It is scary to be given a diagnosis of prostate cancer. However, prostate cancer is usually slow-growing and it is important to take the time you need to find out about all the options available to you.

Surgical removal of the prostate (prostatectomy) is not the only option. There are several equally effective treatments, including radiation therapy, depending on the cancer and your personal choice.



To fully understand all the options for treatment you need to talk to both medical specialists who treat prostate cancer. These are the radiation oncologist and surgeon (urologist). Your GP can refer you to both these experts before you decide on the treatment that's best for you.

Treatment options for prostate cancer

Often there is more than one treatment that might be suitable for you. Prostate cancer treatments include:

ACTIVE SURVEILLANCE - This aims to monitor your prostate cancer closely in case further treatment is required down the track. It is suitable for earlier stages. Monitoring tests include blood tests (PSA) and biopsies.

RADIATION THERAPY (RT) - Radiation therapy (also called radiotherapy) uses highly targeted radiation (usually xrays) to kill cancer cells inside and just around the prostate. It can be given as 'definitive' treatment to cure the cancer instead of surgery, and it can also be used if the cancer comes back or is left behind after surgery. External beam radiation therapy (EBRT) is the most common type of radiation therapy. Internal RT (brachytherapy) is also an option for some men.

SURGERY - This aims to remove the entire prostate and some of the surrounding tissues. It can be done using surgical techniques including open prostatectomy, laparoscopic (keyhole) prostatectomy and robot-assisted laparoscopic prostatectomy.

HORMONE THERAPY - This treatment temporarily stops your body from making testosterone and aims to reduce the tumour size or slow down the tumour growth. It may be given short-term in conjunction with radiation therapy. It is also commonly used if the cancer has spread away from the area of the prostate.

Advantages of Radiation Therapy

All treatment options for prostate cancer have advantages and disadvantages. That is why it is important to talk to a radiation oncologist as well as the surgeon to understand what the different treatments mean for you, including potential side effects and any costs.

Some advantages of radiation therapy* include that it:

- is a non-invasive treatment i.e. does not need an operation or general anaesthetic
- does not require men to stay in hospital
 - takes only a few minutes to give on working days (usually over a few weeks)
 - can be given while men continue to work and do their usual activities
- mops up tiny cells that may be outside the prostate. It can also mop up cells left behind with surgery
 - rarely causes incontinence or other long term urine problems
 - is painless, just like having a normal x-ray

For more details about the benefits of radiation therapy, ask to be referred to a radiation oncologist by your GP or the surgeon.

* these mainly refer to external beam radiation therapy