



Experts concerned men with prostate cancer not informed of all treatment options

Sydney, Australia - Tuesday 13th June 2017: Cancer experts and patient advocacy groups are using Men's Health Week 2017 to highlight the issue that many Australian men diagnosed with prostate cancer are not being fully informed of all available treatment options – especially the alternatives to prostate surgery.

This problem exists in spite of dramatic advances in radiation therapy and a growing body of evidence demonstrating radiation therapy and surgery have equal cure rates and overall similar quality of life.^{1,2} Recent publications show radiation therapy has overall lower rates of long term urinary incontinence and sexual side effects, yet it continues to be under-used as an alternative to surgery for prostate cancer treatment^{3,4}. Many men who would be ideal candidates for non-invasive radiation therapy don't receive all the information needed for decision-making before the prostate is removed.

The Royal Australian and New Zealand College of Radiologists (RANZCR) says men deserve to make a fully informed decision about their preferred treatment option and can only do so after having consultations with both a urologist (who diagnoses the cancer first) and a radiation oncologist, the cancer specialists in radiation therapy.

Associate Professor Dion Forstner, Radiation Oncologist and Dean of the Faculty of Radiation Oncology for RANZCR, says the shock of receiving a cancer diagnosis means men often rush into the first treatment they hear about – which is surgery. "We want men and their families who are dealing with a recent diagnosis of prostate cancer to know that unlike some other cancers, prostate cancer tends to be slow growing cancer. Some men don't even require treatment. For men that do need active treatment it is important that they know they have the time to speak to all the experts. Only then can they have the confidence to know they are choosing the treatment option that is right for them.

"In the same way that urologists are specialists in surgery, only radiation oncologists have the extensive training and expertise to discuss the radiation options to the level that men deserve. Men can ask for a referral to a radiation oncologist from their surgeon if this is not suggested to them, or they can ask their GP," said Associate Professor Forstner.

Professor David Currow, Chief Executive Officer of the Cancer Institute NSW, supports the call saying, "In consultation with their General Practitioner, men with prostate cancer deciding on active treatment should have a consultation with a radiation oncologist as well as a surgeon in order to be fully informed about their treatment options."

Executive Committee Member for patient advocacy group Cancer Voices, Lee Hunt says cancer patients need the opportunity to be presented with information from all experts. "Each person diagnosed with cancer needs to be given information from every clinician to be able to make their decision with full knowledge of the treatment path and the known side effects from each option," says Mrs Hunt.

Men seeking additional information about radiation therapy for prostate cancer can go to targetingcancer.com.au. A new series of videos raising awareness of radiation therapy as a prostate cancer treatment option and the importance of having a consultation with a radiation oncologist is available [here](#).

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About radiation therapy:

Radiation therapy, which targets cancer cells using high energy focused x-ray beams, is an alternative to surgery for prostate cancer patients. Treatment is safe, effective, non-invasive and done as an outpatient. With modern techniques the risk of side effects is low.

References:

1. Hamdy, F.C. *10-Year Outcomes after Monitoring, Surgery or Radiotherapy for Localized Prostate Cancer*. New England Journal of Medicine (September 2016). DOI: 10.1056/NEJMoa1606220
2. Donovan J.L. *Patient-Reported Outcomes after Monitoring, Surgery, or Radiotherapy for Prostate Cancer* (September 2016).
3. Morgan, G. *Why has Radiotherapy Utilisation not improved since 1999?* *Journal of Medical Imaging and Radiation Oncology* 55 (2011) 347–350.
4. *Review of Optimal Radiotherapy Utilisation Rates*. The Ingham Institute Report March 2013.