

Making a Choice:

For Men with High-Risk Features After Prostate Cancer Surgery

1 After prostate surgery, some men are at greater risk for having their cancer come back or spread in the future. Research shows that men whose cancers have certain features are at highest risk. The features of your cancer are checked.

- Spread of the tumor beyond the edge of the prostate
- Spread of the tumor into the seminal vesicles
- Spread of the tumor into other pelvic organs
- Tumor at the edge of the prostate (after it's removed)
- Gleason score of 8 – 10. This score predicts how your cancer might behave. A score of 8-10 means your cancer could grow and spread more quickly.

You have a choice about follow-up treatment. This is a tricky decision because there is not one right choice for all men. Your choice depends on what's most important to you.

Use this tool to understand your choices. Your doctor will talk with you to help you decide. And, whatever choice you make, we will continue to follow you closely and provide care. We're here for you.

3

2 Radiation treatment after surgery may lower the risk that the cancer will come back or spread in the future.

You have 2 choices:

1. Frequent PSA checks and radiation treatment **only if** your PSA level rises
2. Radiation treatment **right away** – before a PSA rise

We do not know for sure which treatment path is best. The chart below shows you the possible benefits and possible drawbacks of each choice.

You might wonder:

- Since I've had prostate surgery, how could my PSA level rise? *Answer:* There may be tiny traces of prostate cancer where the prostate used to be. These traces may be too small to detect with PSA testing or scans.
- Are some men more likely to benefit from having radiation right away? *Answer:* Men with 2 or more high-risk features may be most likely to benefit.

Questions to Consider	Radiation Right Away – Before PSA Rise	Radiation Only If PSA Rises
What are the possible benefits?	<ul style="list-style-type: none"> • Lower risk of future treatments • Lower risk of cancer spread • Lower risk of needing added hormone therapy 	<ul style="list-style-type: none"> • About ½ of men (with high risk features) never have a rising PSA and may avoid unneeded treatment and side effects related to radiation
What are the possible drawbacks?	<ul style="list-style-type: none"> • Treatment-related time • Cost • About ½ of men may undergo treatment they don't need 	<ul style="list-style-type: none"> • Regret if cancer spreads in the future • Depending on your PSA level, you <i>may</i> need added hormone therapy
When would radiation start?	<ul style="list-style-type: none"> • 3 months after surgery OR • After surgery, when you are not leaking urine 	<ul style="list-style-type: none"> • Radiation would start <i>only</i> if your PSA rises
What does radiation involve?	<ul style="list-style-type: none"> • Daily 15 minute radiation treatments for 8 weeks 	<ul style="list-style-type: none"> • Daily 15 minute radiation treatments for 8 weeks
What are the possible side effects of treatment?	<p>Radiation side effects:</p> <p>Short term: fatigue, having to pee often, feeling like you have to pee often, loose stools</p> <p>Long term: worsened bladder function, worsened bowel function, rectal bleeding, and ED (erectile dysfunction)</p>	<ul style="list-style-type: none"> • If hormonal therapy also needed: Radiation side effects + hot flashes, loss of sex drive, loss of muscle mass, joint aches, weight gain, depression, breast tissue growth, heart disease • If radiation is avoided, there are no side effects