

## Prostate problems — Enlargement and cancer? <sup>[1]</sup>

Dear Alice,

What can you tell me about prostate problems? I ask for no specific reason, only that I (a young male) notice that a lot of older males suffer from either prostate cancer or enlargement. I suppose what I really want to know is this: Are there things I can be doing now (diet, etc.) to help prevent this down the road? I once heard somebody mentioning avoiding coffee for this reason. Is there truth to that?

— Thinking ahead

### **Answer**

Dear Thinking ahead,

The prostate is a donut-shaped gland the size of a walnut. It secretes some of the seminal fluid in semen, and is located in front of the rectum and underneath the bladder.

You're right on the mark that many men tend to have prostate problems as they age. Thinking ahead to the future and changing life patterns now can positively affect your quality of life in later years. Hopefully, the information below will be of use.

#### *Prostate enlargement*

Prostate enlargement is a non-cancerous increase in the number of cells in the central portion of the prostate that surround the urethra, the tube through which urine passes. It is considered a common, even normal, part of aging. The cause of prostate enlargement is not well understood, but many experts believe that it is dependent on the production of both testosterone and dihydrotestosterone or DHT, a derivative of testosterone in the prostate, which may help control the growth of the prostate.

Prostate enlargement, or benign prostatic hyperplasia or hypertrophy (BPH), is quite common; it affects about half of all men in their sixties, and up to 90 percent of men in their seventies and eighties. It's not a serious health risk unless urination becomes particularly difficult, or backed-up urine causes other health problems. There is no known way to prevent prostate enlargement, but

an enlarged prostate is not associated with developing prostate cancer.

The greatest risk factor for prostate enlargement is impossible to prevent: age. In fact, some people believe that all men would have an enlarged prostate if they lived long enough! Other risk factors may include a family history of the disease, being of American or European origin (men of Asian origin are at relatively lower risk), and, for reasons yet unknown, marital status. It seems that married men are more likely to have enlarged prostates than single men. Interestingly, however, there is no relationship between sexual activity and prostate enlargement.

As the prostate grows in size, it gradually clamps down on the urethra, disrupting the flow of urine. Some indications of prostate enlargement may include more nighttime urination, the sudden and urgent need to urinate more frequently, difficulty starting a stream of urine, an interrupted or weak urinary stream once urination begins, dribbling of urine, and/or a feeling of not being able to completely empty the bladder.

Men who have mild symptoms of BPH may not receive immediate treatment. Instead, health care providers may recommend regular checkups to watch for any complications of prostate enlargement. If the symptoms become worse or the condition begins to pose a health risk, various medications and surgical procedures are available.

### *Prostate cancer*

After skin cancer, prostate cancer is the second most common form of cancer in American men. The American Cancer Society states that more than 200,000 new cases of prostate cancer are diagnosed in the U.S. annually, and approximately one out of every six men will develop this form of cancer during his lifetime. It's also the second leading cause of cancer-related deaths in men, behind lung cancer. On the other hand, of men diagnosed with prostate cancer, nearly 100 percent survive at least 5 years, and 99 percent survive at least 10 years.

Nearly all prostate cancers develop when glandular cells (the producers of the seminal fluid) in the prostate grow out of control; this type of cancer is called prostate adenocarcinoma. Researchers do not yet know the exact cause of prostate cancer. However, there is evidence that its development is linked to higher levels of androgens, or male hormones, including testosterone.

It's rare for men to be diagnosed with prostate cancer before age 50, but the risk increases significantly for men over 50 years; about two-thirds of prostate cancers are diagnosed in men over 65. African American men have the highest risk of developing prostate cancer, Asian Americans tend to have a lower risk. Having a father, brother, or son with prostate cancer also greatly increases a man's likelihood of developing it. In addition, some studies have shown that a taking vitamin E and folic acid supplements and diets high in dairy and calcium (more than the average diet) may increase the risk of prostate cancer.

Men with prostate cancer in its early stages usually do not have symptoms. As the disease progresses, it may cause a slow or weak urinary stream or the need to urinate more frequently. Other signs of advanced prostate cancer may include weight loss, lack of energy, blood in the urine, problems with erection, bone pain, weakness, numbness in the legs or feet, and/or loss of bladder or bowel control.

### *Prevention*

There is currently no known way to completely prevent prostate cancer. As far as dietary factors are concerned, a ten year study resulted in a decreased risk of prostate cancer in men who ate a diet rich in folate, a B vitamin. However, as previously mentioned, men who took folic acid supplements saw an increased risk. Exposure to toxic combustible substances, such as ones firefighters come in contact with, may increase risk. Many studies have shown that coffee drinking does not affect prostate cancer risk. There currently is no consensus on the following factors and their potential for raising the risk of prostate cancer: obesity, inflammation of the prostate gland (prostatitis), smoking, sexually transmitted infections, and vasectomy.

Based on risk factors, you and your health care provider may decide whether or not prostate cancer screening is appropriate for you. Several large studies are now underway to determine more clear guidelines and recommendations regarding prostate cancer screening. The American Cancer Society [2] recommends discussing the pros and cons of screening with your health care provider at age 50 if you have average risk or at age 45 or earlier if you have a higher risk (i.e., those with a family history of prostate cancer and African American men).

Screening for prostate cancer can involve testing the amount of prostate-specific antigen (PSA) in a man's blood and/or a digital rectal exam (DRE). PSA is a product of the prostate gland; higher levels of PSA may indicate prostate cancer, among other things. During a DRE, a medical provider inserts a gloved, lubricated finger into the rectum to feel for anything hard or lumpy that might be cancer. A health care provider can use the results of these tests to decide whether to do other, more accurate tests for prostate cancer. Some men may be reluctant to be screened for prostate cancer because they may be uncomfortable with the exams. These exams may seem strange, taboo, or "unmanly" to men not comfortable with being penetrated anally, even with a finger. But it's best not to let discomfort interfere with getting good healthcare.

Hope this helps!

Alice!

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