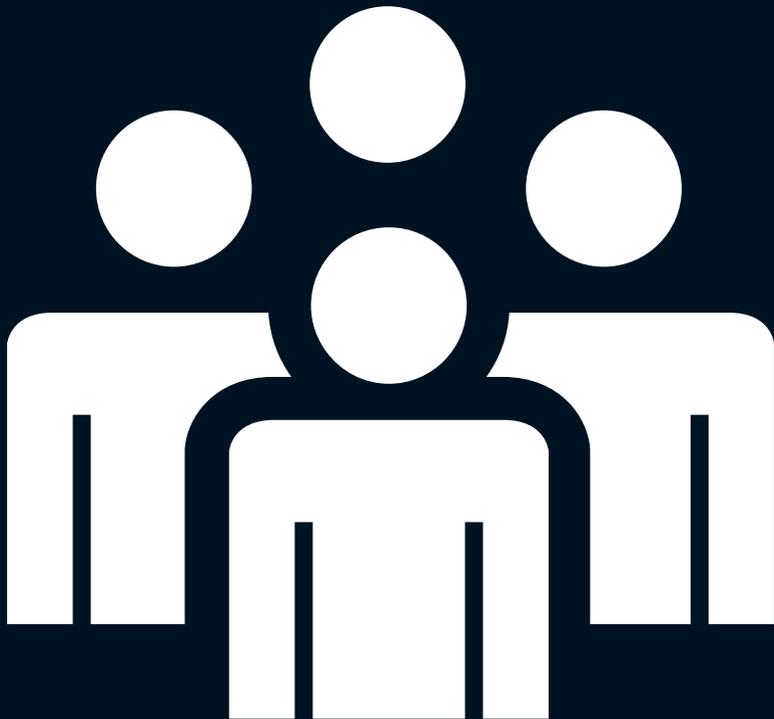


Know your prostate

A guide to common prostate problems



**PROSTATE
CANCER UK**

About this booklet

This booklet is a guide to a man's prostate – what it is, what it does and what can go wrong with it. Your partner or family might also find it helpful.

We explain about the prostate and the three most common prostate problems – an enlarged prostate, prostatitis and prostate cancer. We also explain what changes to look out for, what to do if you think you have a prostate problem and what might happen at the GP surgery.

If you think you might have a problem with your prostate, talk to your GP. You can also speak to our Specialist Nurses, in confidence, on 0800 074 8383.

The following symbols appear throughout the booklet to guide you to sources of further information:



Prostate Cancer UK Specialist Nurses



Prostate Cancer UK publications



Sections for you to fill in

The photos in this booklet are of people personally affected by prostate cancer. The quotes with the photos are not the words of the people who appear.

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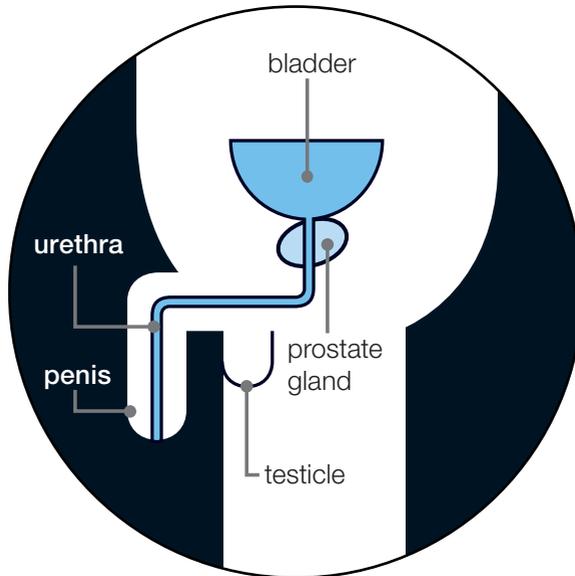
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What is the prostate?

Only men have a prostate gland. The prostate is usually the size and shape of a walnut and grows bigger as you get older. It sits underneath the bladder and surrounds the urethra, which is the tube men urinate and ejaculate through.

Its main job is to help make semen – the fluid that carries sperm.

Where is the prostate gland?



What can go wrong?

The most common prostate problems are:

- an enlarged prostate – this is the most common prostate problem
- prostatitis – an inflammation or infection in the prostate
- prostate cancer.

We explain more about these conditions in the following pages.



What changes should I look out for?

If you notice any changes when you urinate or have trouble controlling your bladder (urinary problems) – this could be a sign of a problem in your prostate.

Urinary problems are common in older men and are not always a sign of a prostate problem. They can be caused by a urine infection or another health problem, such as diabetes, or by some medicines.

Your lifestyle can also trigger changes in the way you urinate – for example, drinking too much will make you urinate more often, while alcohol, caffeine and fizzy drinks can irritate the bladder.

Urinating: what is normal?

As with many things in life, everyone is different. Most people urinate four to seven times each day, depending on how much they drink. And your bladder should be able to hold up to three-quarters of a pint (about 430ml).

You should know when your bladder is full and have enough time to find a toilet and empty it completely every time you urinate. If your bladder is working normally, you shouldn't leak urine.

Most people can sleep six to eight hours without having to urinate. This will be affected by how recently you had a drink before going to sleep. As you get older, you will probably need to urinate more often. You may wake up to urinate once in the early morning – this is common in older men.

Changes to look out for include:

- needing to urinate more often than usual, including at night – for example if you often need to go again after two hours
- difficulty starting to urinate
- straining or taking a long time to finish urinating
- a weak flow when you urinate
- a feeling that you're not emptying your bladder fully
- needing to rush to urinate – sometimes leaking before you get there
- dribbling urine after you finish.

Less common symptoms include:

- pain when urinating
- pain when ejaculating
- blood in your urine or semen*
- problems getting or keeping an erection – this isn't a common symptom of a prostate problem and is more often linked to other health conditions such as diabetes or heart problems.

*Blood in your urine or semen can be caused by other health problems. Talk to your doctor if you see any blood in your urine or semen.

If you notice any of the changes we talk about here, it's a good idea to visit your GP. Or you can talk to our Specialist Nurses.



You might find it helpful to tick any problems you have and take this booklet with you when you visit your GP.

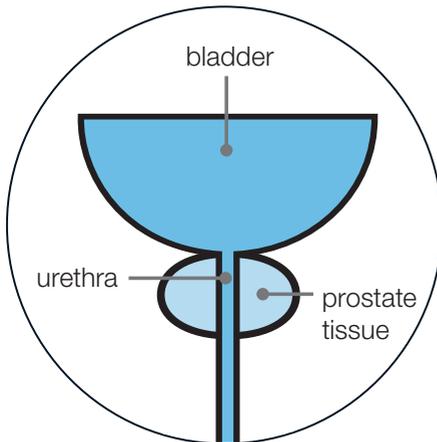
What is an enlarged prostate?

The prostate gets bigger as you get older. This is called an enlarged prostate. It is common in men over 50. It is sometimes called benign prostatic hyperplasia (BPH) or benign prostatic enlargement (BPE). It is not cancer and there are ways to treat it.

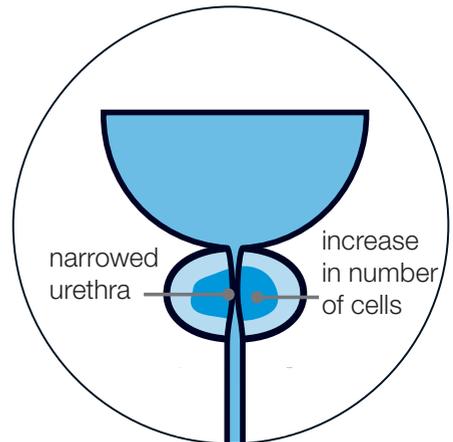
An enlarged prostate is the most common cause of urinary problems in men as they get older. As the prostate grows, it can press on the tube you urinate through (urethra) and slow down or stop the flow of urine.

About 4 in every 10 men (40 per cent) over the age of 50 have urinary symptoms that are caused by an enlarged prostate.

A normal prostate gland



An enlarged prostate gland



Having an enlarged prostate is **not** the same as having cancer.

Having an enlarged prostate doesn't increase your risk of getting prostate cancer. But men can have an enlarged prostate and prostate cancer at the same time.

What can help?

Having an enlarged prostate affects men in different ways. Some men are able to cope with their symptoms well. Simple changes to your lifestyle can often help with mild problems – these include drinking less alcohol and caffeine. If these changes don't help, your doctor may prescribe medicines or suggest surgery.



Find out more in our booklet, **Enlarged prostate: A guide to diagnosis and treatment.**

What is prostatitis?

Prostatitis is the name given to a set of symptoms which are thought to be caused by an infection or inflammation of the prostate. It is not cancer.

It can cause a wide range of symptoms, which vary from man to man. Symptoms can include the urinary problems we talk about on page 7, aching in the area between your testicles and back passage or pain in the lower part of your stomach area, groin or lower back. In severe cases it can cause fever and sweating, and needs treating in hospital.

Prostatitis is a common condition which can affect men of any age, but it's most common in men aged between 30 and 50.

There are different types of prostatitis and we don't know very much about some types. This can make it difficult for doctors to know what causes it and how best to treat it. It can take some time to get a diagnosis, and you might need a number of tests.

What can help?

There are things you can do to help yourself and different treatments to try. These include antibiotics, pain-relieving drugs and medicines called alpha-blockers.

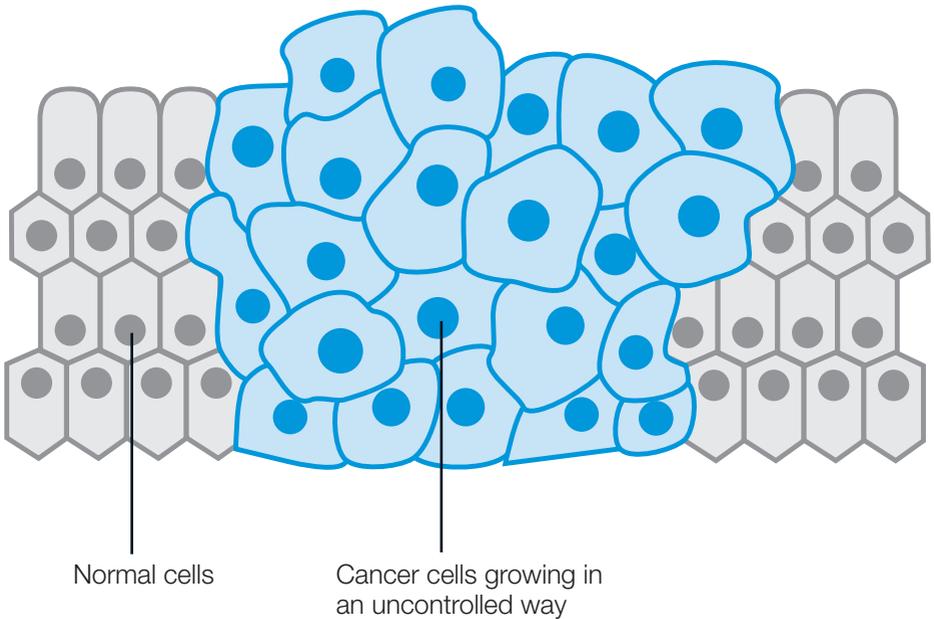


Find out more in our booklet, **Prostatitis: A guide to infection and inflammation of the prostate.**

What is prostate cancer?

Normally the growth of all cells is carefully controlled in the body. As cells die, they are replaced in an orderly fashion. Cancer can develop when cells start to grow in an uncontrolled way. If this happens in the prostate, you get prostate cancer.

How cancer develops



What is my risk of prostate cancer?

Prostate cancer is the most common cancer in men in the UK. About 1 in 8 men will get it at some point in their lives.

There are several things that may mean you're more likely to get prostate cancer.

Age

- Prostate cancer mainly affects men over 50, and your risk increases with age.
- The average age for men to be diagnosed with prostate cancer is between 70 and 74 years.
- If you are under 50, your risk of getting prostate cancer is very low. Men under 50 can get it, but it isn't common.

Family history and genes

Inside every cell of our body is a set of instructions called genes. These are inherited from our parents. Genes control how the body grows, works and what it looks like. If something goes wrong with one or more genes (known as a fault or mutation) it can sometimes cause cancer.

- You are two and a half times more likely to get prostate cancer if your father or brother has had it, compared to a man who has no relatives with prostate cancer.
- Your chance of getting prostate cancer may be even greater if your father or brother was under 60 when he was diagnosed, or if you have more than one close relative with prostate cancer.
- You may have a higher risk of prostate cancer if your mother or sister has had breast cancer, particularly if they were diagnosed under the age of 60 and had faults in genes called BRCA1 or BRCA2.

If you have relatives with prostate cancer or breast cancer and are worried about your risk, speak to your GP. Although your risk of prostate cancer may be higher, it doesn't mean you will get it.

Ethnicity

Black men are more likely to get prostate cancer than other men. We don't know why, but it might be linked to genes. In the UK, about 1 in 4 Black men will get prostate cancer at some point in their lives.

Body weight

No one knows how to prevent prostate cancer, but staying a healthy weight may be important.

Research shows that being overweight or obese increases your risk of getting cancer that's more likely to spread (called aggressive) or advanced prostate cancer (cancer that has spread outside the prostate).



Read more in our leaflet, **Diet, activity and your risk of prostate cancer**.

What are the symptoms of prostate cancer?

Prostate cancer that's contained inside the prostate (called localised prostate cancer) doesn't usually cause any symptoms. But some men may have some of the urinary problems we talk about on page 7. These may be mild and happen over many years.

For some men the first symptoms of prostate cancer might be new pain in the back, hips or pelvis. This can be caused by cancer that's spread to the bones. These symptoms are often caused by other problems such as general aches or arthritis. But it's still a good idea to get them checked out by your GP.

Most men with early prostate cancer don't have any symptoms.

What treatments are there for prostate cancer?

There are several treatments available for prostate cancer. Some treatments aim to get rid of the cancer completely, others to control the cancer. The stage of cancer (how far it has spread), how quickly it might grow and your personal preference will all affect which treatment you have.

Many men have a slow-growing cancer that is not likely to cause any problems in their lifetime. They might never need any treatment. They might be able to have their cancer monitored with regular check-ups instead. If there are signs the cancer may be growing, they will be offered treatment that aims to cure it. But some men will have prostate cancer that is more likely to spread and this needs treating.

For more information about prostate cancer and its treatment, read our free publications (see page 24 for details).

What should I do next?

If you notice any of the changes we talk about in this booklet or you're worried about your risk of prostate cancer, visit your GP.



You can also call our Specialist Nurses, in confidence, on 0800 074 8383.

Urinary problems will often be caused by something else rather than cancer and there are treatments that can help.

What if I am not registered with a GP?

If you're not registered with a GP you can find one near you on your regional NHS website (see page 25 for details). You can also ask family or friends who live near you which GP surgery they go to.

What if I don't have time to see a GP?

Some GP surgeries are now open in the evenings or weekends, so you should be able to see the GP at a time that is right for you. There might also be an NHS walk-in centre nearby. Use your regional NHS website to find one in your area.



I visited my GP after watching a television programme about prostate cancer and thought I could be at risk.

A personal experience

What will happen at the GP surgery?

If you have symptoms, your GP will ask you about them, how long you have had them, whether they are getting worse over time, and how they are affecting your life. They might ask you to fill out a questionnaire about your symptoms and medical history.

If you are not sure how to explain your symptoms or concerns to your GP, take this booklet with you.

Your GP will check whether your symptoms could be caused by other health problems, such as diabetes, or by any medicines you're taking. They will also check whether your symptoms could be caused by your lifestyle.

Diary

Your GP may ask you to keep a diary for a few days to measure how much fluid you are drinking, what type of drinks you are having, how much urine you pass, and how often. The diary may highlight what could be causing your symptoms and may help your doctor find the best treatment for you.

Urine test

Your GP may ask you for a urine sample to check for blood or infection that could be causing your symptoms. You may need to give more than one sample. If you have an infection your GP will give you a course of antibiotics.

PSA test

You may be offered a blood test called a prostate specific antigen (PSA) test. PSA is a protein produced by cells in the prostate. Your PSA level rises as you get older. A raised PSA may show that you have a problem with your prostate. A PSA test alone cannot tell you exactly what the problem is. Your GP will need to look at your PSA level together with other test results, like a digital rectal examination.

You have the right to a PSA test if you're over 50 and you've talked through the pros and cons with your GP. If you're under 50 but have a higher risk of prostate cancer – because you have a family history of it or you're Black – you might want to talk to your GP about having a PSA test.

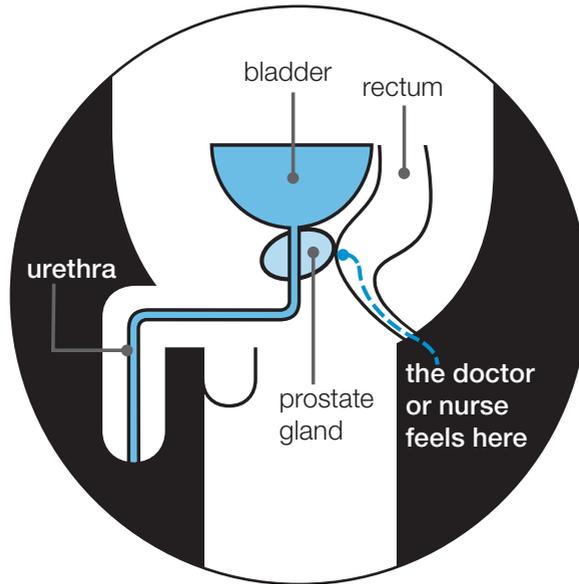


Read more in our leaflet, **The PSA test and prostate cancer: A quick guide**.

Digital rectal examination

Your GP may examine your abdomen and penis and may also feel your prostate through the wall of the back passage (rectum). This is called a digital rectal examination (DRE). If you have a DRE, the doctor will ask you to lie on your side, on an examination table, with your knees brought up towards your chest. Your doctor will slide a finger gently into your back passage. They will wear gloves and put some gel onto their finger to make it more comfortable. Some men may find this embarrassing or uncomfortable, but it shouldn't be painful.

Digital rectal examination



If the prostate feels larger than expected for your age, this could be a sign of an enlarged prostate. A prostate with hard bumpy areas might suggest prostate cancer.

If your DRE shows anything unusual, you might be referred to a hospital specialist.

If you have a DRE, your doctor or nurse might suggest waiting a week before having a PSA test, or they might ask you to have a PSA test before they do a DRE. This is because having a DRE just before a PSA test could very slightly raise your PSA level.

Worried about going to the GP?

It is natural to feel worried or embarrassed about having tests and check-ups. But don't let that stop you going to your GP. Remember, the tests give your GP the best idea about whether you have a problem that needs treating. If you want to see a male GP, ask for one when you make the appointment.



You can also talk things through with our Specialist Nurses, in confidence, on 0800 074 8383.



Having someone examine you from the rear isn't great but it's only a few seconds of discomfort.

A personal experience

What will the test results tell me?

It can take one or two weeks to get your test results. If your test results suggest you have a prostate problem, your doctor will discuss treatment options with you or refer you to a specialist at the hospital for more tests.

What tests might I have at the hospital?

At the hospital your doctor or nurse may repeat some of the tests you had at the GP surgery. You may also have other tests including the following.

Symptom questionnaire

You may be asked to fill in a questionnaire about your symptoms. This is called the International Prostate Symptom Score (IPSS) and is used to see how bad your symptoms are. The questionnaire takes about five minutes to fill in.

Urine flow test

This involves urinating into a machine that measures the speed of your urine flow. If you are urinating slowly, it may mean that your prostate is pressing on the urethra. You'll need a full bladder for the test. Your doctor or nurse will tell you how much you need to drink beforehand. They may also ask you not to go to the toilet for two to three hours before the test.

Ultrasound scan

An ultrasound scan can show if your bladder is emptying properly. You may have the scan after the urine flow test. The scan will show how much urine is left in the bladder. You may also have an ultrasound scan to look at your kidneys.

Cystoscopy

A thin tube with a light and camera on the tip is put inside your urethra so your doctor can look inside your urethra and bladder. You may have this test if you have severe urinary symptoms or if you keep getting urine infections, or have blood in your urine or get pain when urinating.

Prostate biopsy

This involves using thin needles to take small samples of prostate tissue to be looked at under a microscope to check for cancer. Read more in our Tool kit fact sheet, **How prostate cancer is diagnosed**.



Magnetic resonance imaging (MRI) scan

A scan that uses magnets to create a detailed picture of your prostate and the surrounding tissues. You may be offered an MRI scan to look closely at the prostate before or after a prostate biopsy.

Questions to ask your doctor or nurse



What is causing my urinary symptoms – is it a prostate problem?

Am I at risk of prostate cancer?

What tests are you going to do and why?

How soon will I get the results?

Will I need any other tests?

More information from us

Leaflets and booklets

We have a range of other leaflets and booklets about prostate cancer and other prostate problems.

To order publications:

All our publications are free and available to order or download online. To order them:

- Call us on **0800 074 8383**
- Visit our website at **prostatecanceruk.org/publications**

Call our Specialist Nurses

If you want to talk about prostate cancer or other prostate problems, call our Specialist Nurses or text NURSE to 70004. You can also email or chat online with our nurses on our website. Visit **prostatecanceruk.org/get-support**



**Speak to our
Specialist Nurses**

0800 074 8383*

prostatecanceruk.org

* Calls are recorded for training purposes only. Confidentiality is maintained between callers and Prostate Cancer UK.

Other useful organisations

NHS 24

111

www.nhs24.com

Health information and self care advice for people in Scotland. Lists local NHS services including GPs and dentists.

NHS Choices

www.nhs.uk

Information about conditions, treatments and lifestyle, and a directory of health services in England. Provides information about making a complaint about your GP.

NHS Direct Wales

www.nhsdirect.wales.nhs.uk

Telephone: 0845 46 47

Provides health advice 24 hours a day, and lists local health services in Wales, including GPs and dentists.

nidirect

www.nidirect.gov.uk

Information about government services in Northern Ireland, including GP services.

Patient UK

www.patient.co.uk

Information that is often used by GPs to help explain health conditions to patients. Also has a directory of UK health websites.

About Prostate Cancer UK

Prostate Cancer UK fights to help more men survive prostate cancer and enjoy a better life. We do this through Men United, our movement for everyone who believes men are worth fighting for. You can join Men United at prostatecanceruk.org/menunited

At Prostate Cancer UK, we take great care to provide up-to-date, unbiased and accurate facts about prostate diseases. We hope these will add to the medical advice you have had and help you to make decisions. Our services are not intended to replace advice from your doctor.

References to sources of information used in the production of this booklet are available at prostatecanceruk.org

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- Prostate Cancer UK Volunteers
- Prostate Cancer UK Specialist Nurses

Donate today – help others like you

Did you find this information useful? Would you like to help others in your situation access the facts they need? Every year, 40,000 men face a prostate cancer diagnosis. Thanks to our generous supporters, we offer information free to all who need it. If you would like to help us continue this service, please consider making a donation. Your gift could fund the following services:

- £10 could buy a Tool Kit – a set of fact sheets, tailored to the needs of each man with vital information on diagnosis, treatment and lifestyle.
- £25 could give a man diagnosed with prostate cancer unlimited time to talk over treatment options with one of our specialist nurses.

To make a donation of any amount, please call us on **0800 082 1616**, visit **prostatecanceruk.org/donate** or text **PROSTATE to 70004***. There are many other ways to support us. For more details please visit **prostatecanceruk.org/get-involved**

*You can donate up to £10 via SMS and we will receive 100% of your donation. Texts are charged at your standard rate. For full terms and conditions and more information, please visit prostatecanceruk.org/terms





**Speak to our
Specialist Nurses**

0800 074 8383*

prostatecanceruk.org



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B Follow us on Twitter: **@ProstateUK**

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To be reviewed January 2017

Call our Specialist Nurses from Mon to Fri 9am - 6pm, Wed 10am - 8pm

* Calls are recorded for training purposes only.

Confidentiality is maintained between callers and Prostate Cancer UK.

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