



**ASSOCIATED
UROLOGICAL
SPECIALISTS**

Advanced Prostate Cancer Center



New Patient Booklet

Hope



Welcome to the Advanced Prostate Cancer Center at Associated Urological Specialists where our focus is to extend and enhance your quality of life by putting your cancer into remission or at least slowing its growth.

Prostate Cancer is one of the most common cancers in men. On average 240,000 men are diagnosed with prostate cancer in the United States each year. Majority of cases are caught early and cured with treatment. However, some cancers are found late and a cure is not possible. Other cases have been found and treated but then the cancer recurs.

You have been referred to the Advanced Prostate Cancer Center at AUS to discuss your options. Over the past several years there have been multiple new treatments developed that can allow patients to keep the cancer under control longer, help patients live longer, and maintain quality of life.

We want you to know you are not alone in your fight.

Our team of doctors, our nurse navigators as well as our patient navigator, radiology technicians, billing and support staff are here to help you through the entire process.

The Different Stages of Advanced Prostate Cancer

Metastatic hormone sensitive prostate cancer (mHSPC) means that patients have not yet started any hormone therapy or are still responding to hormone therapy but imaging shows areas of metastasis (cancer outside the prostate).

Non-metastatic castrate resistant prostate cancer (nmCRPC) means that PSA level is rising despite being on hormone therapy but imaging does not show any signs of metastasis.

Metastatic castrate resistant prostate cancer (mCRPC) means the PSA is rising despite hormone therapy and imaging does show areas of metastasis.

Your APCC Team



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Treatment Options at AUS

Androgen Deprivation Therapy

Testosterone, the male hormone, is the primary driver of prostate cancer. Steroids that are in relation to testosterone are referred to as “androgens”. Androgen Deprivation Therapy (ADT) are treatments that remove androgens from your body reducing your testosterone levels.

The most common forms of ADT are given as injections or “hormone shots” such as Camcevi, Eligard, Lupron, or Firmagon. These work to stop the communication from the pituitary gland to the testicles which produce testosterone so the testicles make less testosterone. Typically the goal of ADT is to get the testosterone level to less than 50. There is also a new oral form of ADT called Orgovyx which may be appropriate for some patients.

The main side effects of ADT can be hot flushes, fatigue, and decreased libido. ADT can also decrease bone strength over time so typically Calcium and Vitamin D supplements are recommended to strengthen bones. It is further suggested to stay active and exercise regularly. www.urologyhealth.org

Androgen Receptor Inhibitors

If prostate cancer progresses despite hormone therapy (ADT) there are multiple oral medications that can help get the PSA down and suppress the cancer.

One class of these medications are called androgen receptor blockers. Even though ADT decreases testosterone levels, it is not zero and any testosterone remaining can still stimulate cancer cells to grow.

The following medications all work by blocking the interaction between testosterone and the testosterone receptor.

Erleada (Apalutamide) **Xtandi** (Enzalutamide) **Nubeqa** (Darolutamide)

Androgen Synthesis Inhibitor

Abiraterone decreases the production of testosterone so levels go from low on ADT alone, to very low, often in the single digits, with ADT and abiraterone. Abiraterone is typically taken with a low dose steroid called prednisone. This is basically to offset the effect of abiraterone on other hormones that are required by the body so patients are not really getting extra steroids.

PARP Inhibitors

PARP Inhibitors are a class of medications that work primarily for patients that have genetic mutations in a class of genes called DNA repair genes. These medications are usually utilized once other options stop working but new research indicates they may work earlier and even for patients without a genetic mutation.

Provenge (sipuleucel-T)

Provenge utilizes a patient's immune system to fight cancer cells so can be thought of as a prostate cancer vaccine. This approach is referred to as immunotherapy which has none of the side effects experienced by chemotherapy. Provenge treatment consists of three personalized doses which are infused into patients over the course of a month. www.provenge.com

The Treatment Process



Bone Health Treatments

Prostate cancer can spread into the bones which may not cause any symptoms initially. However, as it progresses it can become painful and put the bone at risk for fracture. Here at APCC we work diligently to counteract those obstacles. We previously mentioned the benefit of taking calcium and Vitamin D supplements along with staying active and exercising regularly. All these things help in strengthening your bones. In addition to those, there are available treatments that focus directly on cancer in the bone. A bone density test (DEXA scan) will typically be performed every 2 years.

Xgeva and Prolia (denosumab) Injections

Xgeva and Prolia are different forms of the same medication and both help to strengthen bones. Xgeva is an injection typically given monthly for patients who have bone metastasis and Prolia is an injection given every 6 months to prevent bone loss for patients on ADT and/or who already have weak bones (osteopenia or osteoporosis). Xgeva and Prolia can lower your calcium levels but taking a calcium supplement can counteract this. There is also a low risk of damage to the jaw bone called osteonecrosis (ONJ) which typically resolves if Xgeva is stopped. www.xgeva.com

Xofigo (radium -223)

Xofigo is used with patients who have prostate cancer that has spread to bones (bone metastasis). It is used once a patient is symptomatic, which would include fatigue, change of quality of life, weight loss, inability to perform daily living activities, change in mobility, bone pain and/or other symptoms. Xofigo is a radiation treatment given through an IV monthly for 6 doses and this is administered by our radiation oncologist. www.xofigo.com

Radiation Treatment

Many patients with advanced or metastatic prostate cancer may be eligible to get radiation treatment either to try and cure the cancer or to help with pain or discomfort. Some patients with a small number of metastatic sites (oligometastatic disease) can benefit from radiation to the prostate and the metastatic sites. In some cases, in combination with medications, this could cure the cancer. Other patients who may have pain from prostate cancer can benefit from radiation to improve pain and quality of life. We work closely with the AUS Radiation Center to coordinate these treatments.

Genetic Testing

Genetic testing is now recommended for many patients with prostate cancer and we are very proactive in making sure this is part of the treatment plan. Genetic testing not only can help create a custom treatment plan for the patient, but also can also help determine risk of various cancers to a patient's family members. Germline testing, typically done with a blood or saliva test, looks for genetic mutations that a patient received from his parents and therefore can be passed on to subsequent generations. Somatic testing evaluates the actual cancer cells for genetic mutations. If genetic testing does indicate a mutation, this may make the patient eligible for specific therapies that target these mutations and may also allow for eligibility in clinical studies.

Chemotherapy

Some patients with widespread metastatic disease at the time of diagnosis may benefit from chemotherapy along with hormone therapy. Other patients who have progressed despite oral medication may also need chemotherapy. If chemotherapy is necessary, we work closely with our medical oncology colleagues to arrange for this so there is no delay in treatment.



The treatment of prostate cancer has changed dramatically the last several years and new treatments come out every year.

Patients seen in the APCC will receive a personalized cancer treatment plan that focuses not only on treating the cancer, but also on maintaining bone health and overall quality of life.

Our care team is constantly staying up to date on the latest advances and research in prostate cancer treatment to ensure that all our patients are receiving state of the art prostate cancer care.



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