



PROSTATE CANCER HOT SHEET

Us Too! INTERNATIONAL **SEPTEMBER 2001**

MOST QUALITY-OF-LIFE RECOVERY AFTER PROSTATECTOMY OCCURS EARLY

“Although most of the recovery after radical prostatectomy occurs early, recovery of several domains, including urinary and sexual, continues to improve even beyond 2 years postoperatively,” concluded researchers after assessing the longitudinal recovery of quality-of-life (QOL) after radical prostatectomy in men with localized prostate cancer.

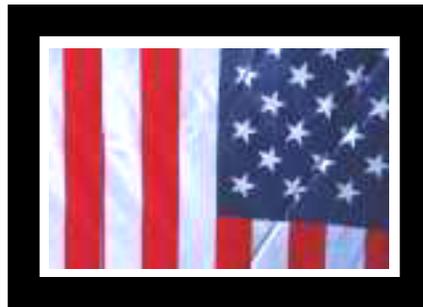
At baseline before radical prostatectomy and postoperatively every 3 months for 1 year and then every 6 months for up to 48 months (median, 30 months), the investigators evaluated self-reported health-related QOL (HRQOL) in 247 men with prostate cancer. General HRQOL was measured using the RAND 36-Item Health Survey 1.0 (SF-36) and prostate-specific HRQOL was measured using the University of California Los Angeles Prostate Cancer Index (UCLA-PCI).

Regression analyses determined whether some men were more likely than others to have a successful return to baseline functioning after treatment.

By 3 months following surgery, 60% of patients reached baseline in all domains according to results from the SF-36. By 12 months, the proportion had reached 90%. Overall, the mean recovery time was 4.5 months for the SF-36 domains which included physical function, social function, bodily pain, emotional well-being, energy and fatigue, general health perceptions, and role limitations due to physical and emotional problems.

At 3, 12, and 30 months, urinary recovery was achieved by 21%, 56%, and 63% of the patients, respectively. A return to baseline “urinary bother” was seen by 80% and occurred at an average of 7 to 8 months following surgery.

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SEPTEMBER 11TH, 2001



OPTIONS FOR PROSTATE CANCER IMPROVING

ABCNews.com

The bad news is that prostate cancer rates are on the rise, making it the biggest health concern for men over 50. The good news? Experts are getting a better handle on the causes and treatments for the disease.

Prostate cancer is a malignancy that develops in the prostate gland, which maintains the proper function of the male reproductive tract.

There will be about 198,100 new cases the United States this year and about 31,500 men will die of the disease, according to the American Cancer Society.

Prostate cancer is the second leading cause of cancer death in men, exceeded only by lung cancer.

Turned 40? Get Tested

Men should get tested for prostate cancer starting at age 40, prostate cancer expert Dr. Patrick C. Walsh told Good Morning America .

“I’ve operated on 750 men under 55, so I believe testing should begin earlier, at 40,” said Walsh, a urology professor at the Johns Hopkins Medical Institutions who is thought by many to be the world’s foremost authority on prostate cancer.

A man should particularly make sure to get the test at 40 if prostate cancer runs in his family — his chances of developing prostate cancer are two times greater if the patient has a father or brother with the disease.

Age is also a big factor: Three quarters of all reported cases occur in men age 65 and older.

As recommended by the Journal of the American Medical Association , men should get their first test at age 40, their second at 45 and the third at 50, Walsh said.

(continued on back page)

PROSTATE CANCER NEWS YOU CAN USE

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PROSTATE CANCER: DIAGNOSTIC BOOST
The Press Association 08/22
Us Too! NEWS 08/23

A molecular fingerprint for prostate cancer could lead to new tests and treatments for the disease. Researchers at the University of Michigan in Ann Arbor, used

sophisticated microarray technology to analyse the workings of genes in healthy and cancerous prostate tissue. Microarrays contain genetic material which matches up with the chemical elements of particular DNA sequences.

MEN AND WOMEN SHOULD 'SCREEN TOGETHER, LIVE TOGETHER,' SAYS CREATOR OF BREAST CANCER STAMP
BusinessWire / HealthWire 09/10
Us Too! NEWS 09/11

The doctor who led the campaign to create the breast-cancer research postage stamp has launched a new organization — this time focusing on prostate cancer and breast cancer screening. Dr. Ernie Bodai's new national campaign — Screen Together, Live Together — encourages couples to get regular breast cancer and prostate cancer screening tests. Dr. Bodai had his own personal encounter with cancer last year, when he was diagnosed with prostate cancer. Out of that experience, Dr. Bodai and his wife, Carol, created Screen Together, Live Together.

SUNSHINE "HELPS FIGHT PCA"
The Press Association 08/23
Us Too! NEWS 08/24

Higher levels of exposure to the sun may give some protection against both the development and severity of prostate cancer, research says. The finding was made at the North Staffordshire Hospital, Stoke-on-Trent, and Keele University where researchers investigated the effect of exposure to the sun on the likelihood of developing prostate cancer. A hospital spokesman said the study, published in medical journal, The Lancet, had opened up a new avenue for research into the disease.

PCA RISK
The Hope Heart Institute 08/23
Us Too! NEWS 08/24

Q: What Is My Risk of Getting Prostate Cancer If Someone Else in Family Has Had It?

A: If your brother or father has had prostate cancer, your risk of also ending up with it is two to three times higher than a man who does not have any family members with the disease. Another way to state it: If you have close blood relatives with prostate cancer, you may have a lifetime prostate cancer risk of 16% to 30%.

Q: What are the risk factors for prostate cancer?

A: Apart from a diet that's high in fat, little is known about the risk factors for prostate cancer.

Source: Alice Whittemore, PhD, Associate Director of Epidemiology, Stanford

University School of Medicine

EXISULIND IMPROVES PSA PARAMETERS OF MEN WITH RECURRENT PCA
Reuters Health 08/16
Us Too! NEWS 08/27

The investigational drug exisulind inhibits the rise in PSA and prolongs PSA doubling time of men with a prostate cancer recurrence after radical prostatectomy, according to a report published in the September issue of the Journal of Urology (J Urol 2001;166:882-886). Exisulind (Aptosyn) is the first member of a new class of compounds known as selective apoptotic antineoplastic drugs. Findings from previous studies indicate that exisulind selectively destroys cancerous and precancerous cells, leaving normal cells unscathed. Exisulind-treated patients had a significantly greater drop in PSA levels during the study period than patients in the placebo group. In addition, the median PSA doubling time was lengthened in patients treated with exisulind.

LIQUOR MAY INCREASE PCA RISK
Ivanhoe Broadcast News 08/27
Us Too! NEWS 08/28

Men who regularly drink hard liquor may be putting themselves at increased risk for prostate cancer, say Harvard investigators publishing in the International Journal of Epidemiology (2001;30:749-755). An increased risk was not seen, however, for men who only drank beer and wine. Investigators followed more than 7,600 Harvard alumni between 1988 and 1993 and found the men who reported drinking moderate amounts of liquor (about three drinks a week) had about a 60 percent increased risk of developing prostate cancer. Men who maintained or increased their alcohol consumption between 1977 and 1988 had twice the prostate cancer risk compared to those who reported little or no alcohol consumption during those years. No correlation was seen between drinking in college and prostate cancer risk.

TOMATO PILLS MIGHT FIGHT PCA
Netdoctor.co.uk / Daily Mail 08/28
Us Too! NEWS 08/28

Tomato pills could be effective in the fight against prostate cancer. A pill sold over the counter as Lyc-O-Mato, containing 15mg of tomato lycopene, the substance which makes tomatoes red, were tested on 30 men with prostate cancer. Half of the group took the pill twice daily for three weeks before they were due to have surgery. After their operations, it was discovered that the group of men who had taken the pill had smaller

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tumours than the others, and that the tumours were less likely to have spread. An expert at the Karmanos Cancer Institute in Detroit, Professor Omer Kucuk said: 'Our findings suggest that lycopene as tomato extract may not only help prevent prostate cancer, but also may be useful in treating prostate cancer.'

A POTENTIAL CANCER KILLER?

HealthScout 08/30

Us Too! NEWS 09/01

A technique that uses viruses to halt cell division shows promise for the treatment of a wide range of cancers, new research says. Swiss scientists say they've shown that a modified, inactivated adeno-associated virus (AAV) can selectively kill cancerous cells that have a faulty gene. If the gene worked properly, it would keep the cells from dividing unchecked. Mutations in the gene, called p53, are present in nearly every form of tumor, so a successful method of selectively destroying cells with the malignant errors would be a valuable addition to the anti-cancer armory, experts say. A review of the work appears as a research letter in the journal Nature. Research letters don't carry the same weight as a full, peer-reviewed study, but they are useful ways for scientists to have preliminary findings published. A so-called tumor suppressor gene, p53 makes a protein called a "transcription factor" that regulates cell division. But in cancerous tissue, p53 often is handcuffed by a glitch that shuts off the gene. Tumors with a faulty p53 gene have turned up in the brain, breast, bone, prostate and other organs in the body. Cancer researchers are pursuing a number of treatment strategies targeting p53. Some hope to eradicate tumors by replacing their flawed version of the p53 gene with a normal copy. Others have suggested creating molecules that latch on to and correct the mutant p53 gene. The latest work offers an entirely new approach.

VEGF LEVELS SIGNIFY DISEASE IN PATIENTS WITH HORMONE REFRACTORY MALIGNANCY

NewsRx.com 08/30

Us Too! NEWS 09/01

Plasma levels of vascular endothelial growth factor (VEGF) may signal progression and survival in patients with hormone-refractory prostate cancer (HRPC), a group of cancer specialists report. High levels of the angiogenic growth factor VEGF has been identified in the blood of patients with different types of cancer. Boston, Massachusetts, Dana-Farber Cancer Institute researchers, in collaboration with investigators at several major U.S. research centers, propose plasma levels of VEGF are a significant indicator for survival in HRPC patients based on their evaluation of several Cancer and Leukemia Group B 9480 participants. "Although these data are

exploratory and need to be confirmed in an independent data set, they suggest VEGF may have clinical significance in patients with HRPC," concluded George and collaborators. Several studies have indicated a correlation between blood component levels of VEGF and survival in cancer patients * High pre-treatment levels of plasma VEGF correlated with lowered survival in this study of hormone-refractory prostate cancer patients * VEGF appears to be a prognostic indicator for survival in patients with hormone-refractory prostate cancer patients

PCA PATIENTS NOW HAVE NEW OPTION/ TECHNIQUE TEMPORARILY PLACES RADIOACTIVE SEED ON WIRE INSIDE BODY

The Gazette 09/06

Us Too! NEWS 09/07

Men sifting through the options for treatment of prostate cancer now have another choice to consider: high-dose rate brachytherapy. HDR brachytherapy temporarily places a radioactive source inside the body as close as possible to the cancer cells, killing those cells while limiting exposure to normal tissue and reducing side effects. In the treatment of prostate cancer, a highly radioactive seed is attached to a thin wire that is directed by a robotically controlled arm into tiny catheters that have been placed into the prostate gland. Dr. Anuj Peddada, a radiation oncologist who performs the procedure at Penrose Cancer Center, stresses that it differs from a permanent seed implant. In a permanent implant, low-dose radioactive seeds are placed in a generalized location in the prostate gland. In HDR therapy, the radioactive source is in the body for only a few minutes; as indicated by the name, seeds in a permanent implant remain, leaving the patient mildly radioactive after the procedure.

DIET & LIFESTYLE THE REASON FOR SO MANY OKINAWANS LIVING BEYOND 100

Canadian Press 08/27

Us Too! NEWS 8/28

A low-calorie diet abundant in soy, vegetables and fish is being credited for the fact there are more centenarians in the world living in Okinawa, southwest of Japan. A study of 600 residents who are 100 years old or older found that they share the same lifestyle factors - regular exercise, moderate alcohol intake, strong belief systems and social networks. In a report in the John Hopkins Medical Letter, the study found that Okinawans have 80 per cent fewer heart attacks and 75 per cent fewer cancers of the breast, ovaries and prostate than North Americans. The Okinawan islands have the highest proportion of centenarians in the world - 33.6 per 100,000 people.

CANCER DIAGNOSIS MAY DEPEND ON SECOND OPINION

HealthCentral.com / Reuters 08/27

Us Too! NEWS 08/29

Some patients diagnosed with prostate or bladder cancer may needlessly undergo radical surgery, according to a report. Florida researchers looked at 150 patients diagnosed with prostate or bladder cancer. Their records were referred to one of the study's authors, an expert in urological pathology, for a second opinion. According to the study results, nearly 20% of the second opinions differed in treatment recommendations and diagnosis. In most instances the pathologist opted for more conservative therapy than surgery. In a few cases, he disagreed with the initial diagnosis of cancer. The findings underscore the importance of seeking second opinions in medical matters, note Dr. William M. Murphy of the University of Florida College of Medicine in Gainesville, and colleagues.

MICROCHIPS "ABLE TO SPOT CANCER"

Press Association 08/31

Us Too! NEWS 09/01

Automated microchips that can detect cancers and many other diseases may be available within five years. The system uses ultra-thin silicon cantilevers, half the width of a human hair and a fraction of a millimetre long, which flex when protein molecules attach to them.

COMPUTER HITS CANCER IN THE GENES

The Atlanta Journal-Constitution 09/09

Us Too! NEWS 09/10

When completed, the supercomputer being assembled on the sixth floor of Atlanta's Midtown area IBM Tower will be one of the most powerful in the world. Its components — arranged in racks about 7 feet high — will stretch almost 400 linear feet, longer than a football field. "It's like an incredibly fast sports car," says Tony Shuker, president of the Life Sciences division of NuTec Sciences, the Atlanta-based company building the computer. "It will go whatever speed you want to drive it, depending on what kind of track you might be on. But in the absence of a skilled driver, it's just a machine." Dr. Jonathan Simons, director of the Winship Cancer Institute at Emory University, can't wait to get behind the wheel. Under an agreement announced in May, Simons and other Winship researchers will use the NuTec computer — built by IBM and capable of 7.5 trillion calculations a second — to attack cancer at the genetic level, and perhaps revolutionize the war on the nation's second-biggest cause of death. It would be, says Shuker, "a paradigm shift in the way that cancer is diagnosed and treated."

(continued on page 7)

**SCIENTIFIC JOURNAL
REVIEW - August 2001**

The following prostate cancer related articles have appeared in well-known scientific journals. Citations and abstracts can be found at the National Institutes of Health / National Library of Medicine sponsored web site called MEDLINE/PubMed:

www.ncbi.nlm.nih.gov/entrez/query.fcgi

Please note, *Us Too!* cannot provide copies of the complete article.

TO OBTAIN A COPY OF THE ARTICLE: take the citation to your local public or hospital library. The librarian can assist you in obtaining a copy of the article from their collection or from interlibrary loan.

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PCA NEWS YOU CAN USE

(continued from P. 3)

AUSTRALIA'S NOVOGEN TO STEP UP ANTI-CANCER DRUG DEVELOPMENT

*Asia Pulse 08/30
Us Too! NEWS 9/01*

Sydney-based Novogen Ltd is set to fast track the clinical development of its anti-cancer drug phenoxodiol, with further trials targeting men with advanced prostate cancer due to start soon. The results to date from human clinical trials of phenoxodiol were such that the board was supporting the fast tracking of its clinical development. The anti-cancer compound has progressed to human clinical trials in Australia and the United States.

WHAT SOURCE OF OMEGA-3 IS BEST?

*The Saturday Evening Post 09/01
Us Too! NEWS 09/04*

According to Dr. Andrew Stoll, director of the Psychopharmacology Research Laboratory at Harvard Medical School-McLean Hospital the best source of omega-3 is fish oil over flax oil. Flaxseed contains high concentrations of the shorter chain omega-3 fatty acid alpha-linolenic acid (ALA). There is evidence now that flaxseed oil may be dangerous at high doses. Four epidemiological studies have shown that an excessive amount of ALA in your system is associated with prostate cancer, whereas fish oil is not. If you try to consume enough omega-3s from more than two or three tablespoons a day of flaxseeds, there is a thyroid toxic compound in the seed husks that can cause a goiter and low thyroid function.

STUDY ADDS EVIDENCE OF PROTECTIVE ACTIVITY OF LYCOPENE, ESPECIALLY IN BLACK MEN

*NewsRx.com 09/06
Us Too! NEWS 09/07*

A new study involving African-American men, who as a group have the highest incidence of prostate cancer in the world, provides further evidence that lycopene, a chemical found in abundance in tomato sauce, may help prevent or slow the development of the disease. The clinical study, which was reported at the 222nd national meeting of the American Chemical Society, focuses primarily on black men, who are often underrepresented as clinical subjects. It is also the first to link the effect of tomato sauce consumption to a reduction of human DNA damage, considered a marker for increased cancer risk, according to the researchers. Researchers at the University of Illinois in Chicago fed 32 volunteers with newly diagnosed prostate cancer three-fourths cup of tomato

sauce daily for three weeks. The majority of the 24 subjects were black. In addition to causing significant reductions in DNA damage to prostate cancer cells and leukocytes (white blood cells), the treatment resulted in reduced blood levels of prostate-specific antigen (PSA), a protein whose increased levels are strongly linked to a higher PCa risk, according to the researchers. "This study does not say that tomato sauce reduces cancer," cautions Phyllis E. Bowen, PhD, a nutritionist at the university and lead investigator in the study. "It says that it reduces DNA damage that we think is associated with cancer."

MEN'S HEALTH PUBLICATIONS RECOMMEND SOY, VITAMIN E TO HELP PREVENT PCA

*PR Newswire 08/28
Us Too! NEWS 08/29*

Vitamin E and soy products are being recommended by men's health publications as key elements in anti-cancer diets to help prevent prostate cancer. "... Key nutrients may slash your risk of ever getting prostate cancer," the magazine Men's Health says in its August issue. Natural-source Vitamin E is recommended — "recent studies suggest that Vitamin E in its natural form is most effective at combating cancer," the magazine said. It also cited use of Vitamin E as an antioxidant to be "especially important" for men who smoke. "In a study of male smokers," the magazine reported, "those who supplemented with 50 international units (IU) of Vitamin E daily had a prostate cancer rate 34 percent lower than that of men who didn't supplement." The article by writer Melissa Gotthardt advised men to take a daily supplement of 200 IU of Vitamin E and also to "substitute E-rich oils for other fats in your diet." On soyfoods, the article noted that Japanese men have 10 to 15 times lower prostate cancer rates than American men. "Many scientists credit soy, a staple of Asian diets," the magazine said. "Researchers say that as little as a serving a day — a half cup of soy milk on cereal — can make a difference." A companion publication, the "Men's Health Total Body Guide," also recommends soy isoflavones as helping to prevent prostate cancer. "Countless studies suggest that soy can both help prevent prostate cancer and lower your cholesterol levels," the guide said. Isoflavones are naturally-occurring substances found in soybeans that have been credited with helping prevent prostate cancer in particular, the publication said, citing findings by Dr. Gregory L. Burke, professor at the Wake Forest University School of Medicine in Wake Forest, North Carolina.

DNA DAMAGE AS MEN AGE IS LINKED TO INCREASED RISK

*NewsRx.com 09/06
Us Too! NEWS 09/07*

New evidence links progressive increases in DNA damage of the prostate with increasing age, resulting in increased risk for prostate cancer. This DNA damage results from free radicals that are by-products of hormone metabolism. Curiously, low levels of mutagenic damage, which are detectable shortly after adolescence, tend to be neutralized by other nonmutagenic changes in DNA that arise simultaneously, according to the lead investigator Dr. Donald C. Malins of the Pacific Northwest Research Institute in Seattle, Washington. Malins' research shows that the mutagenic damage increases progressively with age while the corresponding nonmutagenic damage decreases, such that, at about age 60, the balance tips in favor of prostate cancer. This coincides with the known sharp increase in prostate cancer incidence at this age. Malins and his colleagues also found that the DNA profiles of some older men mirrored the damage profiles they observed in prostate cancer. The results of the study were published in the August 15, 2001, issue of Cancer Research. One key to controlling radical damage to DNA may well lie in our lifestyle - notably, in what we eat. Free radicals, Malins notes, can be destroyed by antioxidants found abundantly in fruits and vegetables.

WORSENING ERECTILE DYSFUNCTION MAY SIGNAL UNDERLYING CARDIOVASCULAR PROBLEM

*Reuters Health 08/30
Us Too! NEWS 09/04*

If a man experiences worsening erectile dysfunction while he is using sildenafil (Viagra), he may have an underlying cardiovascular condition that requires attention, according to Dr. Kevin L. Billups, of the University of Minnesota in Minneapolis. In a recent study, Dr. Rizk El-Galley and associates found that some patients who initially respond to sildenafil may experience reduced efficacy over the next 2 years. After reading this article, "my first thought was, 'I hope this doesn't cloud the message that, if a patient's erectile status worsens, there's probably something else going on,'" Billups recommends that physicians check for underlying conditions such as hypertension, high cholesterol, and diabetes. There may also be behavioral issues, such as smoking or alcohol overuse.

VIAGRA MAY NOT WORK LONG-TERM FOR SOME PATIENTS

*HealthCentral 08/30
Us Too! NEWS 09/04*

Viagra, the popular anti-impotence drug, may stop working for many patients after 2 years, the results of a study suggest. "In general, 81% of patients who were

still receiving treatment were satisfied, and 92% were able to achieve and maintain erections sufficient for sexual intercourse in more than 50% of attempts," El-Galley and colleagues write in The Journal of Urology. Of the 39 patients who had stopped taking Viagra, 28 had initially reported a good response. Fourteen of those patients who stopped said the drug no longer worked, and six said they had regained the ability to have spontaneous erections.

**RISE IN PSA AND POSITIVE BIOPSIES
AFTER BRACHYTHERAPY MAY NOT
SIGNAL CANCER PERSISTENCE**

NewsRx.com 09/06

Us Too! NEWS 09/07

After undergoing radiation therapy to treat prostate cancer, it's possible for a patient to have a rise in his serum prostate-specific antigen (PSA) level and a positive postimplant biopsy, but not have a recurrence of the cancer, according to a new study published in the August 2001 issue of the Int'l Journal of Radiation Oncology Biology and Physics. Kent Wallner, MD, of the Radiation Oncology Department at the University of Washington Medical Center in Seattle advises other physicians to proceed cautiously before advising patients to undergo a salvage prostatectomy after brachytherapy. "The key is to alert doctors to this possibility to save their patients a horrendous procedure they may not need."

**PHASE 3 STUDY SHOWS STATISTICALLY
SIGNIFICANT IMPROVEMENT IN ERECTILE
FUNCTION IN PTS TREATED WITH TOPIGLAN**

PR Newswire 09/05

Us Too! NEWS 09/07

MacroChem Corp announced that its investigational topical drug for erectile dysfunction, Topiglan(R), achieved statistical significance in both total erectile-function score and improvement in erectile function versus control among patients conforming to protocol in a recently completed Phase 3 clinical trial. In addition to a statistically significant improvement in erectile function, early results from the Phase 3 study show that, at the end of the treatment period, more patients using Topiglan than control were able to reach a grade 3 or 4 erection, and were therefore able to obtain adequate rigidity for vaginal penetration. A grade 4 erection is defined as maximum rigidity on a 0 to 4 point scale. However, the study showed positive direction but not statistical significance in the ability to maintain erection to completion of intercourse, a benchmark typically required for approval of an ED drug.

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(continued from P. 5)

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QUALITY OF LIFE

(continued from P. 1)

At 1 and 2 years postoperatively, baseline values for sexual function were achieved by 33% and 42% of patients, respectively. Baseline values for "sexual bother" were achieved by 51% and 60%.

As compared with married men, unmarried men were more likely to regain baseline sexual function (P=.03) and urinary function (P=.07). Additionally, patients aged 65 years were more likely to return to baseline "sexual bother" values as compared with younger men (P=.03).

"It is important not only to tell patients what the chances are for meaningful HRQOL recovery, but also to share with them the interval for anticipated recovery," the authors suggested. (Litwin M, et al. J Urol 2001;166:587-92.)

PCA OPTIONS IMPROVING

(continued from P. 1)

The safest type of screening involves both a Prostate Specific Antigen and a rectal exam, since 25 percent of men who have cancer will have a low PSA. If the PSA test and/or rectal exam have caused the doctor concern, biopsies are needed, Walsh said.

"We don't know how to prevent it, but we know how to test for it, and treat it," he says. "It's not something to play around with."

Not every irregularity is cancer. It could be a benign prostatic hyperplasia, which is an en-

larged prostate, or prostatitis, an inflammation. Both are highly treatable infections.

Race and Diet Factors

Race can also be factor in a man's likelihood of developing prostate cancer. African-American men have the highest incidence of prostate cancer in the world, while Asian men have the lowest risk.

Although doctors do not know for certain why some races have higher rates, diet may play a role, since Asians who move to the United States and adopt a Western diet have higher rates than their counterparts in Asia.

For African-American men, the higher rates could be attributed their dark skin color, which does not soak up as much Vitamin D from the sun, leading to a deficiency, Walsh says.

Other experts believe that it may be due to health-care differences. Swedish men, for instance, have a high rate of death due to prostate cancer because there is virtually no screening in their country.

In any case, Walsh recommends an Asian diet: "The low rates of prostate cancer in Asia is reason enough to make some dietary changes," Walsh says. "I recommend a diet low in red meat and dairy, and rich with fruits, vegetables, soy and antioxidants."

Treatment Depends on Lifestyle

As a general rule of thumb about age and treatment, many doctors say that a man in his 50s should have surgery, in his 60s should have radiation, and in his 70s should manage the cancer rather than treat it.

But Walsh says each man is different, and lifestyle is more important.

"I tell my patients to think of the worst-case scenario of the treatment, rather than the best," he says. "If the worst happened, could they live with the side effects of the treatment?"

Radical surgery is the best chance of eradicating cancer, but there is a risk of impotency and incontinence. For some men in their 50s, that's an acceptable risk, but for sexually active men, radiation might be preferable. Men over 70 might not want to deal with the cancer, as the treatment might be more intrusive than the disease.

Impotency, the worst-case scenario for many men, is relatively equal with any of the treatments, Walsh said. The prostate is not required for fertility or potency, but men who undergo treatment for prostate cancer should be prepared to lose their ability to have an erection.

Running along each side of the prostate is a nerve bundle responsible for erection. Impotence, the loss of sexual function, may occur as a result of damage to these nerves either from surgery or radiation therapy. Over time, potency may return and Viagra can help.

In the future, Walsh says he expects to see new hormonal treatments, along with more research into diet and into the molecular mechanics of cancer cells.

Families coping with prostate cancer should make sure they take care of themselves and not get exhausted, because the patient will need them throughout the process, he said.

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