

# Treatment for Hormone Sensitive Prostate Cancer (HSPC)

## What You Should Know



The prostate is a small, walnut-sized gland in the pelvis of men. It is next to the bladder. Prostate cancer is a form of cancer that grows in the prostate gland. It is the most common cancer in American men and the second leading cause of cancer death for men in the U.S.

There are many treatment options for prostate cancer. These may involve active surveillance, surgery, radiation, hormones (Androgen Deprivation Therapy or ADT), chemotherapy and immunotherapy.

Hormones are substances that are made by glands in the body. Hormones move around in the bloodstream and control the actions of certain cells or organs. Androgens (male sex hormones) are a class of hormones that control the growth and maintenance of male characteristics. Male sex hormones with the highest levels in the body are testosterone and dihydrotestosterone (DHT).

Androgens are needed for normal growth and function of the prostate, a gland in the male reproductive system that helps make semen. Androgens are also needed for prostate cancers to grow.

### What is Hormone Sensitive Prostate Cancer (HSPC)?

Hormone Sensitive Prostate Cancer (HSPC) is a type of prostate cancer that is sensitive to hormone therapy. Hormone therapy works by blocking the production of the androgen hormones. High levels of androgen raise the risk of prostate cancer. Hormone therapies are treatments that can slow the growth of prostate cancer. Most prostate cancers stop responding to hormone therapy at some point and need different forms of treatment.

### How common is HSPC?

Less than 10% of advanced prostate cancer patients have Hormone Sensitive Prostate Cancer (HSPC). But, with better imaging and early detection, more patients are being diagnosed with HSPC than ever before.

### What are treatments for HSPC?

The treatment plan is often a layered approach:

- **Androgen Deprivation Therapy (ADT)** includes oral drugs as well as shots given first to stop about 90% of the production of testosterone.
- **Additional oral drugs** then may be given to further block the last 10% of testosterone to improve the disease response.
- **Systemic chemotherapy (chemo)** may be the third layer of treatment. It uses anti-cancer drugs that are injected into a vein or given by mouth. These drugs travel through the bloodstream to all parts of the body. Unlike topical chemotherapy, which is applied to the skin, systemic chemotherapy can attack cancer cells that have spread to lymph nodes and other organs.
- **Radiation Therapy** may be the last layer of treatment for certain patients. This is when targeted radiation is given directly to the prostate while limiting radiation to nearby bladder and rectal tissue.



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### What should I expect after HSPC treatment?

Patients should expect life-long exposure to treatment. Breaks from treatment may be allowed, but patients may receive treatment for the rest of their lives.

The goal of treatment is to see the PSA levels go down and stay down. High levels of PSA may mean the presence of prostate cancer. PSA is a protein produced by both cancerous and noncancerous tissue in the prostate, a small gland that sits below the bladder in males.

Your doctor may order periodic PSA tests and imaging scans to see if the cancer has changed. Based on the results of those tests, your doctor can help you determine treatment options.

The layered therapy approach has turned advanced prostate cancer from a fatal disease to a chronic medical condition where patients can live quite long with proper medical care. Treatments can be intense, and the side-effects might impact quality of life, to include daily activities, urinary health, sexual health and mental health. It is of great value to have good communication with care providers to help manage the symptoms and maintain overall well-being.

### About the Urology Care Foundation

The Urology Care Foundation is the world's leading urologic foundation – and the official foundation of the American Urological Association. We provide information for those actively managing their urologic health and those ready to make health changes. Our information is based on the American Urological Association resources and is reviewed by medical experts. To learn more, visit the Urology Care Foundation's website, **UrologyHealth.org/UrologicConditions** or go to **UrologyHealth.org/FindAUrologist** to find a doctor near you.

### Disclaimer:

This information is not a tool for self-diagnosis or a substitute for professional medical advice. It is not to be used or relied on for that purpose. Please talk to your urologist or healthcare provider about your health concerns. Always consult a health care provider before you start or stop any treatments, including medications. For more information, visit **UrologyHealth.org/Download** or call 800-828-7866.

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