What is Prostate Cancer?
Prostate cancer happens when abnormal cells form and grow in the prostate gland. Unlike benign (or non-cancerous) growths, these growths are cancerous (malignant). Prostate cancer can be life threatening if it becomes “metastatic” and spreads beyond the prostate. Early stages of prostate cancer rely on testosterone to grow and sometimes, lowering testosterone can control growth.

What is nmCRPC?
Castration-resistant prostate cancer (CRPC) is a form of advanced prostate cancer. If the prostate cancer is diagnosed as CRPC, it means it can grow or spread even with low testosterone levels.

With Non-Metastatic CRPC (nmCRPC), the cancer no longer responds to hormone treatment. It shows signs of growth, like a rising PSA (prostate specific antigen) level, but it is only found in the prostate. It has not spread.

Symptoms of nmCRPC
With nmCRPC, there are often no symptoms. Most men can’t tell if the cancer is growing unless the doctor notices a rise in the PSA level. Changes are tracked with blood tests, physical exams and scans, such as CT, bone, and PET scans. It is of great value to tell your doctor if things don’t feel normal.

How is nmCRPC different than other types of prostate cancer?
Prostate cancer starts as Localized Prostate Cancer. This is when it is only found in the prostate and surgery or radiation can be used to treat the cancer. Sometimes hormone therapy might also be used. As it advances, there may be a biochemical recurrence, which means a rise in the PSA level. It might also progress to become non-metastatic CRPC.

In Non-Metastatic Castration-Resistant Prostate Cancer (nmCRPC), cancer is found growing after hormone treatment. Scans may show it has not spread to other parts of the body.

In the advanced form of prostate cancer, it becomes metastatic. It spreads beyond the prostate to other parts of the body. With Metastatic Castration-Resistant Prostate Cancer (mCRPC), hormone therapy no longer stops cancer growth. Cancer is also found in other tissues and organs.

Signs of mCRPC may begin with:
• Trouble passing urine
• Pain or blood in the urine
• Feeling more tired or weaker than normal
• Unplanned weight loss
• Shortness of breath
• Bone pain
Treatment Options for nmCRPC

The main goal for treating nmCRPC is to shrink the tumor(s), control symptoms and slow progress. Your doctor may also suggest taking calcium, vitamin D to protect your bones or other medications to help maintain bone density. The main treatments for nmCRPC are:

- **Androgen Deprivation Therapy (ADT)** also called hormone therapy. Even if cancer shows signs of growth with ADT, it is still used to slow the growth. If one type isn’t working, another type or dose may be tried. Types of ADT are: orchiectomy (surgery to remove the testicles), LH-RH or GnRH agonists (analogs), LHRH or GnRH antagonists, anti-androgen drugs, and CAB (combined surgery with anti-androgen drugs).

- **Second-Line Anti-Androgen Drugs** like apalutamide, and enzalutamide. These are combined with ADT treatment to stop or slow the spread of cancer.

- **Active surveillance** is used to track cancer growth. Alone, it is used to delay or avoid aggressive therapy.

- **Clinical trials** are research studies to test new treatments or learn how to use existing treatments better or in combination. To learn more, visit UrologyHealth.org/ClinicalTrials.

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.