

Oncology Treatments For Prostate Cancer

External Beam Radical Radiotherapy(Ebrt)

The aim of this type of treatment is to use radiation beams from outside the body to destroy prostate cancer cells. Although efforts are made to only treat the prostate, some radiation may fall outside the prostate causing some injury; this is usually organs nearby i.e. bladder and rectum. Research has shown that the cancer treatment is most effective when the radio therapy is given is conjunction with hormonal therapy. Hormonal therapy is an injection usually given into the abdomen which reduces the effects of testosterone. The hormone treatment is given every3 months for anywhere from6 months to 3 years.

Risks Include:

- Tiredness
- Discomfort in the back passage
- Difficulty passing urine
- Skin irritation
- Hair loss from the pubic region (temporary/permanent)
- Bladder symptoms: frequency, blood in theurine, pain when passing urine, urgency
- Change in bowel motions: frequency, blood, looser, urgency
- Erectile dysfunction
- Inability to have children naturally
- Risk of radiotherapy-induced secondary cancer

Side effects of hormone therapy:

- Hot flushes
- Breast tenderness/increased size
- Weight gain

Long term effects:

- Bone thinning
- Increased risk of heart disease
- Cognitive impairment
- Erectile dysfunction

Brachytherapy

This is a form of radiotherapy which is delivered via pellets which are inserted into the prostate. The pellets may either be permanently (low dose) or temporarily (high dose). This treatment may be with or without additional external beam radio therapy. The pellets are performed under a general anaesthesia.

Risks:

- Bruising of perineum (area between scrotumand back passage)
- Inability to pass urine which may require atemporary catheter



- Erectile dysfunction
- Rectal discomfort
- Infection requiring antibiotics
- Urinary leakage
- Injury to surrounding structures (rectum)
- Need for further cancer treatment
- Radiation-induced secondary cancer