

Prostate cancer that has spread beyond the prostate to other parts of a man's body is considered advanced prostate cancer. In some cases, this might mean it has spread to nearby lymph glands or the seminal vesicles and is referred to as **Stage III prostate cancer**. Additionally, the progression from castration sensitive to castration resistant may also be considered advanced prostate cancer. When cancer has spread to the bones or other organs, this is referred to as **Stage IV prostate cancer** or **metastatic prostate cancer**.

Since there are often few symptoms of prostate cancer, this diagnosis can sometimes be unexpected. In other cases, prostate cancer can return, or recur, after an initial treatment like surgery or radiation. This fact sheet focuses on Stage IV prostate cancer.

TYPES OF TREATMENTS FOR METASTATIC PROSTATE CANCER

The goal of treatment for metastatic prostate cancer is to keep cancer from spreading and causing more harm and to limit side effects from the disease.

Hormone Therapy

There are several different types of hormonal therapy, including androgen deprivation therapy (ADT) and neoadjuvant hormonal therapy (NHT). Hormonal therapies work in different ways to stop or inhibit the actions of the male hormones (androgens), such as testosterone.

When prostate cancer still responds to hormonal treatments and spreads throughout the body to another organ, such as the bones, the disease is now called **metastatic castration-resistant prostate cancer (mCRPC)**.

Immunotherapy

This is a unique type of treatment that trains the body's immune system to fight cancer in men with mCRPC.

Chemotherapy

Chemotherapy works by killing rapidly dividing cells, including cancer cells and other cells in the body, which can lead to hair loss and the development of mouth sores or ulcers.

Clinical Trials

Clinical trials help the medical community develop new treatments and gain new information on the timing, dosage, or combination of treatments for prostate cancer that may lead to better patient outcomes. Contact your doctor or clinicaltrials.gov to learn more.

PROSTATE CANCER IN THE BONES

Advanced prostate cancer can involve metastases, meaning cancer has moved to other organs, lymph nodes, or bones. In prostate cancer, the most common site of metastasis is bone. Metastases can be treated and the associated pain can be treated with the use of external beam radiation therapy or radiopharmaceuticals, which means radiation is directed at a specific spot in the body to kill the cancer cells.

Maintaining Bone Health

Hormone therapy can weaken bones over time. Medicines and lifestyle changes may help prevent bone loss and improve bone density over time. Some options to improve bone health may be:

- Strive for a healthy diet
- Include weight-bearing exercises in your daily routine and talk to your health care professional before starting a new exercise routine
- Take calcium (600 mg twice daily) and vitamin D (400-500 IU twice daily) to help slow bone loss

LIVING WITH ADVANCED PROSTATE CANCER

Living with advanced prostate cancer can lead to shifting lifestyle priorities and can cause anxiety. Reduce anxiety by:

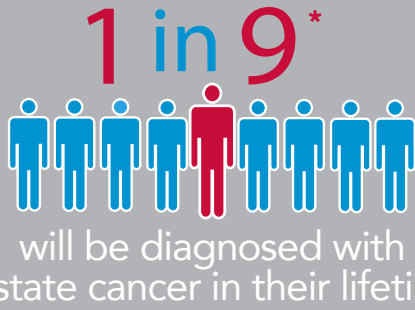
- Talking about these fears with loved ones or in a support group
- Writing down thoughts in a journal or seeing a counselor

There is no need to suffer in silence if you experience side effects from cancer and the treatments. Notify your treatment team of any side effects so you can work together to best help manage them.

We encourage you to use this information in conversations with your health care team about prostate cancer and related topics. For more information about prostate cancer and ZERO – The End of Prostate Cancer, visit our website www.zerocancer.org/learn.



Prostate cancer is the **most commonly diagnosed cancer** in men, other than skin cancer, and the **second leading cause of cancer deaths** in men in the US.¹



*Estimated

3,650,030

Total estimated number of men who will be affected by prostate cancer living in the US in 2020.³

Advanced Prostate Cancer Types:

- Locally Advanced: Cancer has spread beyond the outer layer of the prostate into nearby tissues. Locally advanced prostate cancer is considered nonmetastatic.⁴
- Metastatic: Cancer has spread to other parts of the body, such as the bones, lymph nodes, lungs, or liver.⁵
- Castration-Sensitive Prostate Cancer (CSPC, also called Hormone-Sensitive Prostate Cancer): A form of prostate cancer that still responds to testosterone suppression therapy. CSPC can be referred to as nmCSPC when there is no detectable metastases upon imaging, and as mCSPC it has advanced to metastatic stage.⁶
- Castration-Resistant Prostate Cancer (CRPC): Cancer that keeps growing even when the amount of testosterone in the body is reduced to very low levels. Many early-stage prostate cancers need normal levels of testosterone to grow, but castrate-resistant prostate cancers do not. CRPC can be referred to as nmCRPC when there is no detectable metastases upon imaging, and as mCRPC when it has advanced to metastatic stage. CRPC can be referred to as nmCRPC when it has not metastasized.⁷



Within 5 years of diagnosis, ~10%-20% of men with prostate cancer globally will develop CRPC.⁸

Estimated 5-Year Survival Rate

30% Men with distant metastatic prostate cancer.⁹

vs

100%

Men with localized prostate cancer when compared to similar cancer-free individuals.¹⁰

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