

ADVANCED PROSTATE CANCER DICTIONARY



If you or a loved one has been diagnosed with advanced prostate cancer you may encounter words you have not heard before when trying to learn about the disease. This brochure may help by defining some of the common words and terminology used by healthcare providers and educational information.

ADVANCED PROSTATE CANCER

Cancer that is unlikely to be cured with treatment. The cancer may have spread from the prostate to nearby tissue, lymph nodes, or distant parts of the body. Treatment may be given to help shrink the tumor, relieve symptoms and slow the growth of cancer cells.

CLINICAL TRIALS

A type of research study that tests how well new medical approaches work in people. These studies test new methods of screening, prevention, diagnosis, or treatment of a disease. Also called clinical study.

DE NOVO CANCER

De Novo describes the first occurrence of cancer in the body.

GENETIC TESTING

Tests that look for specific inherited (germline) mutations, or changes (somatic), in your genes that are linked to cancer. Knowing whether you have certain genetic mutations can affect your treatment choices. Men who have a strong family history of prostate cancer or who have advanced prostate cancer should talk with their doctor to determine if genetic testing is appropriate. BRCA1 and BRCA2 mutations are examples of genetic mutations that impact treatment options for men with prostate cancer.

GENOMIC TESTING

Genomic testing is done on cancer tissue and can help inform treatment decisions by providing information about how prostate cancer might behave. By looking at the makeup of the cancer, these tests may help predict whether your prostate cancer grows slowly or aggressively. Genomic testing can be performed on both biopsy tissue and on tissue from an entire prostate following a prostatectomy.



GLEASON SCORE

The Gleason Score is based on biopsy samples taken from the prostate, it is a numerical value given to prostate cancer that describes tumor grade. Grades are assigned to the most common pattern of cancer as well as the second most common. Grades for each pattern range from 1 to 5. A grade of 1 denotes a cancer that closely resembles benign or normal tissue. A grade of 5 is assigned to cancers that appear most aggressive and differ significantly from benign tissue. The Gleason score is obtained by adding together the 2 Gleason grades, and can range from 2 to 10. The Gleason score is used to help plan treatment and determine prognosis (outcome).

IMAGING

There are various types of imaging scans your doctor may use to help choose a treatment plan and monitor the disease. Common types of imaging scans used for cancer include MRI, CT, and PET/CT scans.

METASTATIC CANCER

Cancer cells breaking away from where they first formed (primary cancer), travel through the blood or lymph system, and form new tumors (metastatic tumors) in other parts of the body. The metastatic tumor is the same type of cancer as the primary tumor.

PRECISION MEDICINE

A form of medicine that uses information about a person's own genes or proteins to prevent, diagnose, or treat disease. In cancer, precision medicine uses specific information about a person's tumor to help make a diagnosis, plan treatment, find out how well treatment is working, or make a prognosis.

PROSTATE SPECIFIC ANTIGEN (PSA)

The PSA test measures the amount of prostate-specific antigen protein in your blood. PSA is an important marker used for early detection and monitoring prostate cancer over time.

RECURRENCE

Cancer that has recurred (come back), usually after a period of time during which the cancer could not be detected. The cancer may come back to the same place as the original (primary) tumor or to another place in the body. “Recurrence” is also called recurrent cancer.

SCAN ANXIETY

Often referred to as scanxiety Scanxiety is the term that’s been coined to describe the anxiety people with cancer feel while waiting for scan or imaging results.

SHARED DECISION MAKING

A process that provides a patient centered approach to care and aids a physician and patient in selecting the optimal test or treatment for the patient. In shared decision the physician provides information about the disease, the screening service, and risks and benefits; the patient provides their thoughts, goals for treatment and values. After this discussion the patient and provider jointly make a decision the best course of action.

STAGING

Performing exams and tests to learn the extent of the cancer within the body, especially whether the disease has spread from where it first formed to other parts of the body. It is important to know the stage of the disease in order to plan the best treatment.

TARGETED THERAPY

The foundation of precision medicine, is a type of cancer treatment that targets proteins that control how cancer cells grow, divide, and spread. As researchers learn more about the DNA changes and proteins that drive cancer, they are better able to design promising treatments that target these proteins.

TYPES OF ADVANCED PROSTATE CANCER

Castration-Sensitive Prostate Cancer (CSPC)

Also called hormone sensitive prostate cancer is prostate cancer that responds to treatment to lower testosterone. Also called Hormone Sensitive Prostate Cancer.

Castration-Resistant Prostate Cancer (CRPC)

Prostate cancer that gets worse or spreads despite treatment to lower testosterone. Also called Hormone Refractory Prostate Cancer.

Non-Metastatic CRPC (nmCRPC)

When castration resistant prostate cancer has not spread to other parts of your body.

Metastatic CRPC (mCRPC)

When castration resistant prostate cancer has spread to other parts of your body.

Metastatic CSPC (mCSPC)

If castrate sensitive prostate cancer has spread to other parts of your body. Also called Hormone Sensitive Prostate Cancer



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PROSTATE CONDITIONS EDUCATION COUNCIL

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