

Recurrent Prostate Cancer After Radiation Treatment

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If your prostate cancer was treated with any form of radiation therapy and your PSA is rising, it is important to find out early *why* it's rising and *what* your options are.

What does a rise in PSA mean after radiation treatment for prostate cancer?

A rise in PSA after radiation (beam, seeds, or combination beam + seeds) does *not* automatically mean prostate cancer has come back (recurrence). Rising PSA can mean

- Irritation, infection or inflammation
- Other benign condition (non-cancerous)
- Recurrent prostate cancer

How can you know if your prostate cancer is back (recurrence)?

Only diagnostic tests under physician guidance can rule out cancer. These may include

- Another PSA test and digital rectal exam
- Ultrasound image and/or color Doppler ultrasound of the prostate gland
- Biopsy of the prostate gland

In addition, a doctor will evaluate if cancer is back but has begun to spread beyond the gland (metastasis). Additional tests can include

- Bone scan
- Tumor marker imaging to look for prostate cancer spread to the lymph nodes
- Biopsy of the lymph nodes (surgical removal under anesthetic)
- CT scan or MRI scan to look for evidence of prostate cancer elsewhere in the body

If all tests are negative and show no evidence of cancer, the doctor will recommend how to proceed, including monitoring your PSA and possibly prescribing medications for inflammation or infection.

What if any of the tests are positive for recurrent prostate cancer?

Based on test results, your doctor can tell if the cancer is localized (still contained in the prostate gland) or has begun to spread (metastasis or “distant disease”). This determines treatment options: either salvage or potentially curative local treatment, or systemic cancer control (non-curative) using medications that lower testosterone or block its effects on prostate cancer cells.

What salvage treatments are used for localized recurrence?

The two most available, commonly used local salvage treatments are

- Salvage cryotherapy, or freezing, kills recurrent prostate cancer by encompassing the prostate gland and its capsule or covering, in lethal ice. Ice effectively kills cancer regardless of the aggressiveness of the cell line, and it is minimally invasive with a relatively rapid recovery time.

NOTE: Numerous studies of the effectiveness of salvage cryotherapy show a range of disease-free success. One notable study reflects statistics from as high as 90% for low-risk radiation-recurrent prostate cancer to 69% for high-risk diseaseⁱ.

- Salvage radical prostatectomy (surgical removal) involves major surgery to completely remove the prostate gland plus as much surrounding tissue as possible.

What treatment options are available for recurrence that has spread?

Once recurrent cancer has begun to spread, local salvage treatments are usually considered no longer effective. The most common treatment for metastasized recurrence is the use of hormone ablation therapy to deprive prostate cancer of testosterone, which “fuels” its growth. Different combinations of medications are used to prevent the body from producing testosterone and to block the cancer cells from receiving it. This temporarily stops the cancer from growing, but it is not a permanent cure. Other options include

- Orchiectomy (surgical removal of the testicles to stop testosterone production)
- Various clinical trials
- Chemotherapy

IMPORTANT NOTE: If you had ANY form of radiation treatment for prostate cancer AND your PSA is rising, do not wait! Seek professional help as soon as possible. The earlier the problem is diagnosed, the more treatment options you have. ONLY a doctor can determine why your PSA is rising, and what your options are.

This information is not intended to be used as medical advice, and is not intended as a substitute for medical advice.

ⁱ “Salvage cryotherapy for recurrent prostate cancer after radiotherapy: variables affecting patient outcome.” Izwawa JI et al, Journal of Clinical Oncology Vol. 21 (11) June 2002.