

Dealing With Side Effects



Overview

Urinary and Bowel Problems

Sexual and Fertility Problems

Overview

There can often be unwanted and unexpected side effects that result from the various treatments for prostate cancer. These are not from the cancer itself, but from the surgery, radiation or hormone (ADT) therapy or chemotherapy that are typically used to treat the disease. All treatments will have some side effects, some short term, and some are long term.

Short-term side effects tend to be common and reversible or diminishing. Long-term side effects are less common and are not always fully reversible. Those side effects vary from person to person and as well as physical, they can also effect men psychologically and emotionally. Men about to undergo treatment should seek out information on what the potential side effects might be from their upcoming treatment.

ACC and prostate cancer

Although prostate cancer is not in of itself an 'injury' which ACC covers, complications as a result of treatment for

prostate cancer may be covered by ACC. Read more about ACC and how it can impact on the treatment journey for prostate cancer patients here prostate.org.nz/acc-prostate-cancer

Goserelin-Teva

From December 2020, the Pharmac-funded brand of Goserelin changed from Zoladex to Goserelin-Teva and it has come to our attention that some have had negative experiences with the administration of the implants. We are monitoring the situation and if this your experience we encourage you to complete a consumer report to the Centre for Adverse Reactions Monitoring (CARM). You can do this online at <https://nzphvc.otago.ac.nz/consumer-reporting/> or visit <https://nzphvc.otago.ac.nz/patients-public/#how-to-report> for other reporting options.

Urinary and Bowel Problems

Urinary Problems

Surgery can affect the ability to control the bladder. It can lead to incontinence (inability to control urination) or leaking urine when coughing or with a sudden movement. Radiation treatment can lead to other problems with urination.

Sometimes men who have had surgery or radiation therapy can experience a slowing of their urine stream and a feeling they are not able to completely empty their bladder. In rare cases, men who have had radiation therapy may also experience blood in the urine. Sometimes it can be due to the prostate cancer treatment, but it can also be a sign of other health issues that should be investigated.

Pelvic floor exercises before and after treatment can reduce the risk of incontinence. A specialist continence nurse or pelvic floor physiotherapist can help men manage incontinence. If severe incontinence continues long term other surgical treatments such as a “sling” or artificial urinary sphincter can be inserted to assist with bladder control. In some cases the cost of this can be covered by ACC.

It is important to report any changes or concerns about your urinary symptoms to your healthcare team. You may also find it helpful to visit Continence NZ and watch the following video [Continence and Prostate](#).

Bowel Problems

Bowel problems may result from radiation therapy treatment both during the treatment and also longer term following treatment. Often this occurs as a change in normal bowel function including diarrhoea, bloating and more flatulence (gas). It may also result in bowel incontinence and a lack of control over bowel function. Occasionally there may be bleeding from the rectum.

Any changes or concerns should be discussed with the treating clinicians as, while they are typical side effects from prostate cancer treatment, they can also be associated with other conditions that should be checked out, usually with a colonoscopy. Sometimes simply making lifestyle and dietary changes may provide relief to these side effects.

Sexual and Fertility Problems

Erectile Dysfunction

Erection problems are a very common side effect from prostate cancer treatments. This is mainly due to damage to the nerves surrounding the prostate during the treatment. It can also be caused by loss of libido (sex drive) due to anxiety around the treatments men are going through. Following surgery, there is usually a period of time before erections will recover – this may be a few weeks for some men while for others it is a long term problem. Following radiation therapy, erection problems typically become apparent after some time has lapsed following the treatment. Hormone treatment also affects erectile function and loss of libido due to the reduction in testosterone. There are many medical treatment options to improve erections, including oral medication, injections into the penis, a vacuum device to draw blood into the penis, or a permanent penile implant that uses an implanted device pump to create an erection on demand. One of the leading providers of implant solutions for erectile dysfunction, Boston Scientific, has created an online resource ‘Hard Facts’ which

includes general information on this condition, medication approaches and surgical solutions. [Hard Facts can be accessed here.](#)

Ejaculation Changes

Prostate cancer surgery removes the seminal vesicles along with the prostate. This means that men will not produce or ejaculate semen at orgasm but will still feel the sensations of orgasm. Radiation therapy can also affect ejaculation. Some men don't ejaculate at all after radiation therapy, while some experience minimal or no change. Surgery can cause some men to leak urine during sex, called climacturia. Try to empty your bladder first or use a condom if this is a worry for you or your partner.

Fertility

There is a risk to fertility in most prostate cancer treatments so men with concerns should discuss this with their clinicians. There are options available, such as sperm banking available prior to treatment.