

# FAQs



We are regularly contacted by persons directly affected by prostate cancer and health professionals, seeking information about prostate cancer diagnosis, treatment and post-treatment. Please note, these explanations are based on NZ best practice, are not medical advice but intended to provide further information, explanation and signposting. Please continue to talk with your health professional if you have further questions and medical advice. Be aware of misinformation and make an individual informed about testing, based on the latest evidence and your individual circumstances.

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## Can anyone get prostate cancer?

Anyone with a prostate can get prostate cancer, including transgender women, male-assigned non- binary or intersex people.

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## What symptoms should I look out for and should I wait for symptoms before getting tested?

Prostate cancer often doesn't cause symptoms, especially in the early stages, and can remain undetected for some time. If there are symptoms such as discomfort when urinating, feeling the frequent or sudden need to urinate or pain in the lower back or hips, or blood in urine or semen, they may be caused by other prostate conditions (not prostate cancer) or other medical conditions. Read more about symptoms here ([hyperlink to prostate cancer page](#)) and always see your doctor if you experience any of them.

## Am I more likely to get prostate cancer if my father had it?

Men with a first degree male relative are twice as likely to develop the disease. If you have two or more first degree relatives who were diagnosed under the age of 65 years then that risk increases. The risks are also higher for men whose male relatives were diagnosed when young, and in those known to carry the BRAC2 gene.

## Is there anything I can do to prevent getting prostate cancer?

No one knows how to prevent prostate cancer however evidence suggests that environmental and lifestyle factors may increase the risk. Maintaining a healthy weight, eating a healthy balanced diet and being physically active will improve one's general wellbeing and lower the risk of health problems.

## I hear that Māori men are more likely to die from prostate cancer, is that right?

Māori men have a slightly lower incidence of prostate cancer but a higher death rate than other men. The reasons

for this may be a later diagnosis or the treatment choices offered to them.

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### When should I start getting a prostate check?

We recommend that all men aged 50 and over discuss prostate testing with their doctor (usually a GP). For men this discussion should begin at 45 years of age if there is a family history of prostate cancer, or from 40 if known to have the BRCA2 mutation. A PSA blood test is all it takes to start the process but the check should also include a DRE (Digital Rectal Examination). The PSA test measures the levels Prostate-Specific Antigen in a man's blood that 'can' indicate the presence of early prostate cancers in men who have no symptoms. Read more about what's involved in a prostate check [here](#).

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### My doctor won't give me a PSA test, what should I do?

Not all GPs are proactive in promoting prostate cancer testing so men should be willing to take the initiative and request testing if they wish to be tested. If you are over 50 (or younger with family history of the disease) you should be able to have the PSA test, however if there is still resistance to the PSA test then we suggest you see another GP.

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### Can I get my own PSA test done and how will I know what the results mean?

Self-requested testing is available at a Pathology Services providers (at your own cost) however you will need to consult with your healthcare provider for interpretation of the results. Medical test results should not be interpreted in isolation but in conjunction with other clinical factors.

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### I am told my PSA levels are high, does this mean I have prostate cancer?

Not necessarily. A high PSA can be caused by other conditions such as BPH (Benign Prostatic Hyperplasia) or

enlarged prostate, a common condition that occurs when the prostate grows larger with age); or Prostatitis which is an infection or inflammation of the prostate. Other things that can influence ones PSA level include age, medications, cycling or vigorous exercise, or a urinary infection.

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### How do I know what treatment is best for me and my prostate cancer? —

Once diagnosed you will need to discuss the treatment options with your healthcare team, options that depend on a variety of factors. These include the grade and stage of cancer, your age, general health and preference for mode of treatment.

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### Can I get a second opinion about my treatment options? —

It is quite normal to want a second opinion. Talking it through with another doctor or medical professional who understands prostate cancer can help clear up any concerns and build your confidence about what to do next.

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### How will I know if my cancer has spread if I am on active surveillance? —

Active Surveillance is a way to monitor low-risk prostate cancer that may not be causing any symptoms, and involves regular PSA tests, digital rectal examinations (DREs), biopsies and imaging scans. If the disease appears to be changing, then treatment to treat the cancer will be discussed.

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### What sort of side effects might I expect from my treatment? —

There are often unwanted and unexpected side effects that result from the various treatments for prostate cancer, not from the cancer itself but the method of treatment. All will have some side effects, some short term (more common),

some long term. These side effects can be physical, emotional or psychological and may vary from person to person. Everyone's experience is different. We recommend men about to undergo treatment seek out information about what the potential side effects might be from their upcoming treatment and discuss them with their healthcare team. Learn more about dealing with treatment side effects [here](#).

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**I have to travel to another city for treatment. Is there any assistance available to help with my travel or accommodation expenses?**

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The Prostate Cancer Foundation provides a Welfare Grants Fund to assist patients and families who are experiencing hardship related to their treatment. Click [here](#) to find out more.

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**How might my prostate cancer impact my life beyond diagnosis and treatment?**

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Most men diagnosed with prostate cancer will live a good life beyond their diagnosis and treatment. Survivorship, or living well, is about making the most of life and dealing with the side effects and ongoing issues that may have been caused by an encounter with the disease.

There is growing evidence that eating a health, balanced diet can help in the recovery and enhance the effectiveness of treatments, as does being active which can help one manage some of the common side effects of treatment, speed up recovery and improve quality of life. You might think that it is important to rest while recovering but research shows that tailored exercise benefits most people with cancer, before, during and after treatments. In some people it may also help lower the chances of cancer coming back in some people by as much as 50-60%. The PCFNZ Prost-FIT programme a nationwide network of exercise classes designed specifically for men at any stage of diagnosis, treatment or recovery. Read more about [Prost-FIT](#) and [Survivorship](#) [here](#).

