

2011/ISSUE 1



Your Care

A PUBLICATION FOR THE COMMUNITY FROM CROUSE HOSPITAL

Surviving
Prostate
Cancer

Surviving Prostate Cancer

For 48-year-old Glenn Weisiger, getting prostate cancer wasn't a matter of "if." It was a matter of "when."

Although the diagnosis came as a surprise, Glenn was as prepared as anyone could be. He'd been having routine PSA (prostate-specific antigen) tests done annually since he was 40, with results in the 'normal' range. But when his primary care physician also conducted a DRE (digital rectal exam) in September 2010, he detected a small lump and recommended further testing through biopsy.

Age Increases Risk

The cancer diagnosis that followed was one Glenn's father, grandfather and a maternal uncle had also faced, but not until they were in their 60s. That's the time men

are mostly likely to be diagnosed. According to the American Cancer Society, age is an important risk factor for cancer of the prostate. It's rarely seen in men younger than 40, while the incidence rises rapidly with each decade thereafter.

The probability of being diagnosed with prostate cancer is one in 8,517 for men younger than 40 years old, while it rises to one in 15 for men 60 through 69 and one in eight for men 70 and older.

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— GLENN WEISIGER

Although Glenn had age and wellness on his side (he's a self-proclaimed fitness and healthy food fanatic), he had a second strong risk factor: family history. "I grew up knowing it was inevitable that I'd get prostate cancer," Glenn says matter-of-factly. "That's why I've taken good care of myself and started being tested at age 40."



Age: Risk rises after a man reaches age 50. Almost 2 out of every 3 prostate cancers are found in men over the age of 65.

Race: For unknown reasons, more common in African-American men, less often in Asian-American and Hispanic/Latino men than in non-Hispanic whites.

Nationality: Most common in North America, northwestern Europe, less common in Asia, Africa, Central and South America.

Family history: Men with close family members (father or brother) who have had prostate cancer more likely to get it themselves.

Genes: Some inherited genes seem to raise prostate cancer risk, but account for only a small number of cases overall.

Diet: Role of diet not exactly clear, red meat and high-fat dairy consumption seem to increase risk.

Exercise: Lack of exercise not a clearly defined risk factor. Some studies show high levels of physical activity in older men may lower risk for advanced prostate cancer.

Obesity: Not a clearly defined risk factor.

Smoking: A recent study linked smoking to a small increase in the risk of death from prostate cancer.

Infection and inflammation of the prostate: Some studies suggest that prostatitis (inflammation of the prostate gland) may be linked to an increased risk of prostate cancer.

Source: American Cancer Society



Surgeon David Albala, MD, (right) performing an operation in the Witting Surgical Center.

Family History a Factor

A number of genetic studies suggest hereditary factors may be the underlying cause for five to 10 percent of the diagnoses of prostate cancer. Men who are a brother, father or son of a prostate cancer patient have a risk for developing the disease approximately double that of the general public's population risk.

Despite such a diagnosis, Glenn considers himself fortunate. "I started being tested at a young age, my cancer was caught at its very early stages and my surgery at Crouse couldn't have gone better," he says gratefully. "The nurses and staff were skilled and attentive, and I felt I was in the best hands possible."

After doing research about treatment and prognosis, Glenn consulted with and chose David Albala, MD, chief of urology at Crouse, who is nationally and internationally recognized for his expertise in robotic surgery. "Just six months before I was diagnosed, Dr. Albala came to Syracuse from Duke University. His reputation and bedside manner convinced me to have my procedure at Crouse."

Dr. Albala removed Glenn's prostate on Nov. 17, 2010, at Crouse's new Witting Surgical Center using the da Vinci surgical robot. With this technology, the surgeon looks into a console and uses a control panel to operate robotic "hands." The level of precision is much greater than that of traditional surgical methods and, because the stitches are smaller and tighter, patients lose less blood, experience less pain and recover faster with fewer complications.

Positive Outcomes with da Vinci Technology

The real estate executive was out of work for two weeks, and after just five weeks was back to exercising and downhill skiing. Because of his early diagnosis and successful treatment, Glenn says he hit the "trifecta" in terms of outcomes.

"First and foremost," he emphasizes, "I'm cancer free," referring to post-surgery exams and recent PSA results that confirm his declaration. "I've had no major or ongoing issues with the two aspects of prostate removal that scare men the most — sexual functioning and becoming incontinent. I have a supportive wife and four beautiful children. Life is good."

Life can continue to be good for men diagnosed with prostate cancer, observes Dr. Albala. "The technological advances of robotic surgery offer a great option for the patient in terms of the healing process and prognosis," adding that like other cancers, early detection is key to improving outcomes for men of all ages.



For more information about robotic surgery at Crouse visit crouse.org/robotic-surgery.

*Now cancer free, Glenn Weisiger cherishes the precious moments he spends with his children.
On the cover: Glenn with wife Stephanie.*