



## **Prostate Cancer – Active Surveillance – A Guide for Patients**

### **What is Active Surveillance?**

- Active surveillance is an option for men who have low grade prostate cancer. This is defined as having very early stage prostate cancer, when the prostate biopsy has a Gleason score of less than, or equal to 6.
- Active surveillance is a way for the healthcare team to closely monitor the cancer for signs that it may be changing. If there are any signs of progression or tumour growth, then additional treatments, which may include surgery or radiation, are offered.

In Ontario, active surveillance is the preferred management option for men with low grade prostate cancer. This is because most cases of low grade prostate cancer do not require treatment at the time they are diagnosed. The majority of low grade prostate cancer are slow-growing tumours, and remain confined to the prostate gland. More than half of the patients with low-grade prostate cancer will never develop symptoms or require treatment during their lifetime.<sup>1</sup>

If you choose active surveillance, you will be monitored at regular intervals, and treatment to remove the cancer will be recommended to you when your prostate cancer appears to be more serious than initially thought, or is showing signs of progressing.

Active surveillance is an option for all men with low grade prostate cancer. While it is most commonly recommended for older men or those with multiple medical problems, active surveillance is also suitable for many healthy, younger men. With active surveillance, most patients are able to avoid the possible adverse effects of surgery or radiation treatment.

### **How does active surveillance work?**

The healthcare team will actively monitor the patient, with regular follow-up tests to look for signs that the tumour is changing or more serious than it appeared at the original time of diagnosis. Some of the signs that the tumour is changing is if repeat biopsy shows that the Gleason score is higher (greater than or equal to 7), and/or the tumour is bigger (higher volume of Gleason 6 disease).

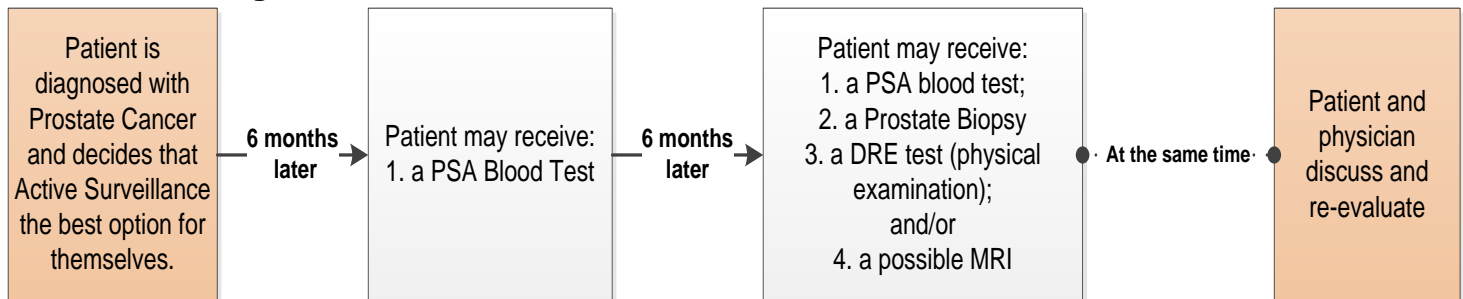
Individual patient preferences, as well as the cancer characteristics, are re-evaluated annually to determine whether active surveillance remains a suitable choice.

A standardized active surveillance pathway has been developed by Cancer Care Ontario<sup>1</sup>, and includes some or all of the following elements:

- A blood test every 3 – 6 months test to measure the level of Prostate Specific Antigen (PSA).
- An annual physical examination of the prostate, called a Digital Rectal Exam (DRE).
- A biopsy, which samples tissue from the prostate to be analyzed by a pathologist, is performed within 6 – 12 months of diagnosis, and then every 3 to 5 years after. However, the frequency of biopsy may change based on specific patient factors.
- A scan of the prostate with Magnetic Resonance Imaging (MRI) may be conducted in special circumstances.

Below is an example of a possible active surveillance pathway a patient may undergo. The healthcare team will discuss the options and help to determine the appropriate pathway for each patient.

### First Year of Diagnosis:



In the second year after diagnosis and beyond, similar testing will occur. The frequency of tests may be reduced over time as determined by the healthcare team.

### When is treatment, such as surgery or radiation therapy, recommended?<sup>2</sup>

- If the follow-up biopsies or tests indicate that the cancer is higher grade than initially thought or the tumour is showing signs of growth or progression.

### What considerations should be made prior to starting active surveillance?

- Adherence to the active surveillance pathway is very important to ensure that the patient is properly monitored for signs of cancer progression and can be offered the most appropriate treatment.
- While active surveillance helps to avoid the side effects, risks and complications of surgery or radiation therapy, some potential side effects of biopsy include pain, infection, or blood in urine, stool, or semen.<sup>3</sup>
- Patients might experience stress or anxiety that the cancer remains in the body.
- Young and healthy men with larger amounts of low grade prostate cancer may benefit from treatment.

Each patient's medical conditions, individualized preferences and values should be expressed with their care providers to help decide on whether active surveillance is the right option.

### Recommended Links:

#### <sup>1</sup>Active Surveillance for the Management of Localized Prostate Cancer:

<https://www.cancercare.on.ca/common/pages/UserFile.aspx?fileId=325696>

- Link to Cancer Care Ontario's guideline

#### <sup>2</sup>Canadian Cancer Society:

<http://www.cancer.ca/en/cancer-information/cancer-type/prostate/treatment/active-surveillance/?region=on>

- Link to additional information on active surveillance

#### <sup>3</sup>Prostate Cancer UK:

<http://prostatecanceruk.org/prostate-information/choosing-a-treatment/active-surveillance#are-there-any-side-effects>

- Link to additional information on active surveillance

#### “Being on Active Surveillance: Robin’s Story”:

[https://www.youtube.com/watch?v=7\\_PweRQv5rl](https://www.youtube.com/watch?v=7_PweRQv5rl)

- Link to patient experience on active surveillance