

Prostate Cancer in West Virginia

Risk Factors

According to the Centers for Disease Control & Prevention (CDC)¹, the following are risk factors for prostate cancer:

- The older a man is, the greater his risk for getting prostate cancer.
- Father, brother, or other family history of prostate cancer.
- Prostate cancer is more common in some racial and ethnic groups than in others.
- The National Cancer Institute (NCI)² states that avoiding cancer risk factors such as smoking, being overweight, and lack of exercise may help prevent certain cancers.

Symptoms¹

- Difficulty starting urination.
- Weak or interrupted flow of urine.
- Frequent urination, especially at night.
- Difficulty emptying the bladder completely.
- Pain or burning during urination.
- Blood in the urine or semen.
- Pain in the back, hips, or pelvis that doesn't go away.
- Painful ejaculation.

What is Prostate Cancer?²

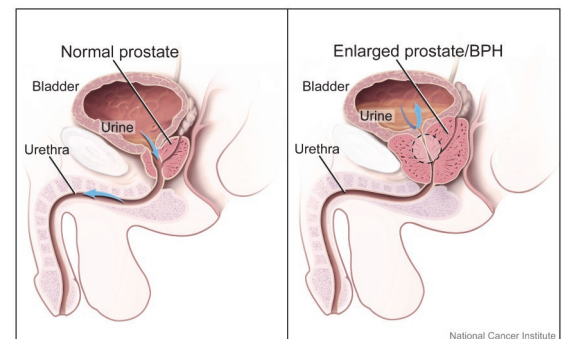
To understand prostate cancer, it helps to know something about the prostate and nearby structures in the body.

The prostate is part of a man's reproductive system. It's located in front of the rectum and under the bladder. The prostate surrounds the urethra, the tube through which urine flows.

A healthy prostate is about the size of a walnut. If the prostate grows too large, it squeezes the urethra, and may slow or stop the normal flow of urine. An enlarged prostate gland is called benign prostatic hyperplasia, or BPH.

Several types of cells are found in the prostate, but almost all prostate cancers develop from the gland cells. Gland cells make the prostate fluid that is added to the semen. The medical term for a cancer that starts in gland cells is adenocarcinoma.

Other types of cancer can also start in the prostate gland, including sarcomas, small cell carcinomas, and transitional cell carcinomas.



Some prostate cancers can grow and spread quickly, but most grow slowly. In fact, autopsy studies show that many older men (and even some younger men) who died of other diseases also had prostate cancer that never affected them during their lives. In many cases it went completely undetected.

West Virginia's Efforts to Assure Prostate Cancer Screening Coverage

The American Cancer Society (ACS) supports legislation assuring that men will receive insurance coverage for prostate screening exams. Most state laws assure annual coverage for men over age 50, and for high-risk men age 40 and over. High-risk refers to African-American men and/or men with a family history of prostate cancer.

In West Virginia, the National Conference of State Legislatures requires the Public Employees Insurance Agency (PEIA) to establish an insurance plan that includes annual prostate cancer checkups for men age 50 and over.

Medicare covers a digital rectal exam (DRE) and a prostate-specific antigen (PSA) blood test yearly for men over 50. There is no co-insurance and no Part B deductible for the PSA test. For other services, the beneficiary would pay 20% of the Medicare-approved amount after the yearly Part B deductible.

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Policy Changes

The American Cancer Society (ACS) recommends that men make an informed decision with their doctor about whether to be tested for prostate cancer. Research has not yet proven that the potential benefits of testing outweigh the harms of testing and treatment.

Starting at age 50, men should talk to their doctor about the pros and cons of testing so they can decide if testing is the right choice for them. If they are African-American or have a father or brother who had prostate cancer before age 65, men should have this talk with a doctor starting at age 45.



The U.S. Preventive Services Task Force (USPSTF) states that elevated PSA readings are not necessarily evidence of prostate cancer and can lead to unnecessary prostate biopsies. Even when biopsies reveal signs of prostate cancer cells, evidence shows that a large proportion will never cause harm, even if left untreated. The disease often progresses slowly, so those who have prostate cancer cells frequently die of other causes.

Rates of Prostate Cancer in West Virginia

The State of West Virginia collects data to understand the causes and patterns of health and illness. Following is the most current information regarding prostate cancer in West Virginia.

WV Cancer Registry³ West Virginia age-adjusted average annual incidence rates for prostate cancer is 114.2 (per 100,000 population). Stage at diagnosis for prostate cancer in WV is approximately 85% for localized disease, 12% for regional/distant disease and 3% for unknown stage.

WV Health Statistics Center⁴ The crude mortality rate for prostate cancer in West Virginia is 20.2 per 100,000. The crude mortality rate for prostate cancer among African-American males in WV (31.9 per 100,000) is higher than that for White males (20.5 per 100,000).

Mortality rates⁴ are highest in Pendleton County with an average annual crude mortality rate of 36.3 per 100,000 and lowest in Monongalia County, 8.7 per 100,000.

References

1. Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion.
2. National Cancer Institute. Topic Page. <http://www.cancer.gov/cancertopics/types/prostate> June 2014.
3. West Virginia Cancer Registry, 2008-2012.
4. West Virginia Health Statistics Center, Vital Statistics System, 2009-2013.



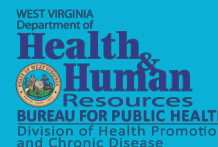
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Clinical Advances¹

There are a number of treatments available for those with prostate cancer. You and your physician will decide together which treatment is right for you.

- Watchful waiting (Closely monitor the patient's prostate cancer by performing PSA and DRE tests regularly, and treating the cancer only if and when the prostate cancer causes symptoms or shows growth.)
- Surgery
- Radiation therapy
- Hormone therapy
- Cryotherapy
- Chemotherapy
- Biological therapy
- High-intensity focused ultrasound



For more information, please contact the West Virginia Comprehensive Cancer Program

www.wvcancer.com

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