



Ladies..... What is it that only men have but can cause problems or worry..... The prostate! A simple guide.

Prostate disease affects nearly 1 in 2 men at some point in their life.

What is the prostate?

Only men have a prostate and it is usually about the size of a walnut. Around the age of 40 it starts to grow or enlarge and this may cause problems for a man when passing urine or not being able to pass urine.

Where is it?

The prostate is inside the pelvis, just below the bladder and in front of the back passage. It wraps around the tube that allows urine to flow out of the bladder and for semen to pass out through the penis.

What does the prostate do?

It supplies the fluid to protect and nourish sperm during intercourse.

It also makes Prostate Specific Antigen, called PSA.

So, what can go wrong?

Prostatitis: an inflammation of the prostate.

Benign Prostatic Hyperplasia (BPH): the prostate gets bigger or enlarges - the most common problem. Sometimes called Benign Prostatic Enlargement.

Prostate cancer - the most common cancer in men, so the earlier he gets checked out by his GP the better.

Did you know...

- Not all problems with the prostate will be prostate cancer or will lead to prostate cancer;
- A man is two and a half times more likely to develop prostate cancer if his father or brother was diagnosed with it.

Recognise these symptoms in someone you know?

- Having to get to the toilet *fast* and needing to pass urine more often than before and during the night;
- Finding it difficult to start passing urine then stopping and starting when passing urine;
- Seeing blood in the urine;
- Taking longer to empty the bladder with a weak dribbly flow of urine;
- Having pain or stiffness in the lower back, hips or upper thighs;
- Have an unexplained weight loss.

If this sounds familiar then it is time for him to make an appointment to see his GP.

Early detection, diagnosis and treatment of prostate problems are key to improving the quality of life for men affected by prostate disease.

Why?

His GP may be able to help with these symptoms and so improve his quality of life. Let him get back to the things he enjoys doing - without worrying where the nearest toilet is!

Why won't men just go to see the doctor?

They can be:

- Fearful of what the doctor might tell them
- Anxious about the tests the doctor might do
- Embarrassed by the problem
- Strong willed and get it into their heads that 'Real' men shouldn't have problems down there
- Misled into thinking that nothing can be done about it - it's just a part of getting older!

What tests might the GP do?

Urine Test

This will be checked for blood, glucose (a type of sugar) or any signs of infection in the bladder or kidneys.

Blood tests

PSA (Prostate Specific Antigen) blood test.

PSA is made only in the prostate. Because some PSA leaks out of the prostate, it's normal to find PSA in a man's blood. This is called the PSA level.

As a man gets older or if the prostate is damaged or enlarged then more PSA can leak out into the blood so giving a higher PSA level.

There are benefits but there are also drawbacks in having this test. For more information and to help him decide whether or not to have the test, check out our website or see our leaflets on the PSA test. www.prostatescotland.org.uk

He can also talk this over with his GP.

Another blood test done may be to check that his kidneys are working properly.

Digital Rectal Examination (called a DRE)

Because the prostate cannot be seen or checked from outside the body, one of the first examinations the doctor will do is a DRE.

The doctor puts a gloved finger into the back passage to feel the shape, size and condition of the prostate. This helps the doctor decide what may be best for the man.

Many men can be anxious or worried about this examination. Reassure him that although he may feel embarrassed or uncomfortable, the doctor has done this many times before.

Changing things in his lifestyle

A healthier lifestyle can only be good for him!

Weight

Men who are very overweight are more likely to develop Benign Prostatic Hyperplasia (BPH) and possibly have a greater chance of developing aggressive prostate cancer. So, shedding those extra pounds is important. He can make a start by:

cutting down on sugar, sweet foods, chocolate, sweets, puddings, chips, fried foods, crisps and takeaways.

Healthier Diet for the family

Have at least 5 portions of fruit and vegetables each day in a variety of colours!

Eating more fruit and vegetables and cutting down on fat may also be better for a healthy heart and bowel.

Drinks

Get him to cut down on drinks before bedtime especially tea, coffee and cola drinks.

Replacing some ordinary tea with green tea or decaffeinated coffee during the day may be helpful.

Limit alcohol intake.

Keeping active

Encourage him to take moderate physical exercise at least 5 times a week. This could be as simple as walking 30 minutes every day, why not keep him company and go too. If he hasn't exercised for a long time, get him to check with his GP and build up gradually.

Smoking

If he smokes the best advice is for him to give up! Although smoking does not cause prostate disease directly, it has a harmful effect on the body.

What can you do to help?

Talk to him.

Explain it is much better to be checked out as early as possible.

He may have a lot of mixed feelings – fear, embarrassment, worry, anxiety and the inevitable what ifs

Remind him.

A night's sleep without constant trips to the toilet, an outing that he doesn't have to plan around toilet stops!

Get him to talk to other men.

More than likely a friend or workmate will have had a similar experience, talking to them may help him take the first step.

Book an appointment with the GP.

Encourage him by going with him for support. The GP will more than likely be able to help the symptoms perhaps by starting treatment or referring him to a specialist called a Urologist.

Thank him.

This will not only improve his quality of life but yours too!

The most important thing is to encourage him to see his GP

The information contained in this leaflet has been developed by Prostate Scotland and reviewed by its Advisory Group of doctors, nurses and patients. This leaflet is not intended to replace medical advice or seeing a doctor for specific illnesses or symptoms.

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