

Guide to Living with

Healthmonitor®

# Advanced Prostate Cancer

**10** ways  
to thrive!

*(from men like you)*

QUESTIONS  
YOU *MUST*  
ASK YOUR  
UROLOGIST

KNOW YOUR  
TREATMENT  
OPTIONS

Today's advances mean  
you may have many  
years ahead

**"You have the  
power over  
your future!"**

Joel's fighting Stage IV  
prostate cancer—and helping  
others do the same

COMPLIMENTS OF YOUR HEALTHCARE PROVIDER

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# Advanced Prostate Cancer

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*When Marshall Mullins found out that he had prostate cancer, he bought himself a Harley—"take advantage of your good days!" he says.*

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# Take charge OF YOUR FUTURE!

If you have advanced prostate cancer, know this:  
Your life is not over; it has simply taken a turn.

For Don K., hearing he had metastatic prostate cancer at age 48 stopped him in his tracks: "I just thought about all the moments I was looking forward to in my life. It was like my whole life's blackboard went blank"

Mark V. says, "It's like being hit over the head by a two-by-four."

Jerome B., too, felt blindsided: "I had all this ambition and all these plans still ahead of me"

Yet years—four, five and more—have gone by and Don, Mark and Jerome are still here, still spending time with their loved ones, still pursuing their passions, still swept up by the everyday. They're testament to the power of today's treatments. Fact is, while advanced cancer may not be curable, it is treatable. New therapies are not merely promising

greater survival, but greater quality of life. "Just because you're diagnosed with advanced prostate cancer, this does not mean it's a death sentence," says Jerome. "I'm proof. I've had it for 18 years, and I'm still here"

For some men, the diagnosis comes with a silver lining, urging them to get down to the business of living—*really* living. "I'd been wanting to restore cars all my life," says Mark, who adds that after his

diagnosis, "time passed, my situation improved, and Bingo! I've taken that car [he's restored] for many a joy ride!"

Don, instead, realized that "some-day is today...I almost wish I had had [that perspective] for the 48 years I lived my life without cancer"

What will it be for you? Every case of advanced prostate cancer is as individual as the man who has it. And discovering your path to feeling your best means learning about your cancer, talking with your healthcare team, learning your treatment options and having a few heart-to-hearts with the people who mean everything to you.

In the pages of this guide, you'll find the information, inspiration and empowerment that can accompany you on your journey. Read it. Use it to spark a conversation with your doctor. Refer to it when you need a boost. Let it remind you that others have gone before you—and they're still here. You have every reason to believe you'll follow in their footsteps. 🏀



"Just because you're diagnosed with advanced prostate cancer, this does not mean it's a death sentence," says Jerome. "I'm proof. I've had it for 18 years, and I'm still here."



*“It’s rejuvenating to celebrate good outcomes.”*

– BILL CURRY

# Keeping hope alive when cancer spreads

Learn the basics of metastatic prostate cancer—and what it means for your future.

**H**ave you enjoyed a moment of celebration lately? Seattle resident Bill Curry thinks it’s a good idea—and that’s despite his Stage IV prostate cancer diagnosis. In fact, Bill celebrated his most recent checkup with champagne and fried chicken—a fête he’d planned weeks ahead. “It’s rejuvenating to celebrate good outcomes, and just setting a goal or celebrating

a milestone like finishing treatment can be important,” says Bill. Fortunately, like Bill, you may be celebrating a lot of milestones in the months ahead, thanks in large part to today’s advanced treatments. Read on to learn more about your diagnosis—after all, understanding your condition is one of the best steps you can take in ensuring you have many happy, healthy years ahead of you.

## What is metastatic prostate cancer?

Stage IV, or metastatic prostate cancer, occurs when cancerous cells break away from the original tumor in the prostate gland and travel through blood or lymph vessels to lymph nodes, organs or tissues in other parts of the body. While most men are diagnosed when cancer is still local and not metastasized, a small percentage is initially diagnosed with Stage IV disease, and some will develop it later after an initial diagnosis showed just early-stage cancer.


## Where does it spread?

In Stage IV prostate cancer, malignant cells have moved outside the prostate gland and seminal vesicles (the glands that contain semen) to nearby tissue or organs (such as lymph nodes, rectum, bladder or pelvic wall) or to distant tissue or organs. Most often, these cells target the bones—particularly the hips, spine and ribs—according to the American Cancer Society. Less frequently, prostate cancer spreads to the lungs and liver and, rarely, the brain.

## What are the symptoms?

Bone pain, weight loss, swelling in the legs and feet, pelvic discomfort, erectile problems, trouble urinating, and blood in the urine and/or semen.

## Can treatment still help?

While Stage IV prostate cancer cannot be cured, it can be treated. Therapies are available that can halt or slow cancer growth, prolong life and ease challenging symptoms such as bone pain, so your quality of life is the best it can be. Read on for more information about various treatment options and how they can help you. 

# When is it time to discuss a different treatment for your advanced prostate cancer?

This checklist is not intended to be used as a diagnostic tool or to replace a discussion with your doctor.

## Use the questions below to help start a conversation with your doctor:

- Have you had medical (e.g., hormonal) or surgical treatments to lower your testosterone?  
 YES    NO
- Has your prostate cancer progressed?  
 YES    NO
- Has your PSA risen?  
 YES    NO
- Has your doctor ordered an imaging study that showed your cancer has spread beyond the prostate?  
 YES    NO



**If you answered “YES” to these questions, don’t wait.** Today is a great time to ask your urologist or oncologist about all of your treatment options.

# Know your treatment options

Yes—you do have choices, even when your cancer has metastasized!



Many men outlive their prostate cancer, even those with advanced, according to the American Society of Clinical Oncology.

Treatments for metastatic prostate cancer have come a long way and are getting better every day. The right therapies for you will depend on several factors—your age and health, your treatment goals and the characteristics of your cancer, including where and how much it has spread. Your doctor also considers your response to any prior treatments.

Explore all the options with your urologist and other members of your healthcare team to come up with a treatment approach that works for you.

**1 Hormone therapy** is often used in men with metastatic cancer to slow or stop its progression. Also called androgen deprivation therapy, it works by blocking the production of male hormones called androgens (testosterone is a type of androgen), which promote the growth of prostate cancer. Drug options include luteinizing hormone-releasing hormone (LHRH) analogs, LHRH antagonists and anti-androgens.


In some cases, hormone therapy

or surgery fails to slow the growth of tumors that have spread to other part of the body; this is called metastatic castration-resistant prostate cancer (mCRPC). For men who have mCRPC, another type of hormone therapy, taken with the steroid prednisone, works by blocking the production of androgen in the testicles, adrenal glands and the tumor itself. This type can be used either before or after chemotherapy and may help you delay or avoid chemotherapy altogether.

**2 Chemotherapy** may be used if hormonal therapies are not appropriate for you or if they've been used and no longer control your cancer. Chemo drugs can destroy or shrink tumors, slow cancer's growth and control your symptoms. Chemo drugs can also harm or kill normal cells along with cancer cells.

**3 Immunotherapy** (or biologic therapy) works with the body's own immune system to fight cancer. Vaccines—a type of immunotherapy—are currently being used in patients with metastatic prostate cancer to help the immune system attack malignant cells.

**4 Radiation therapy** can kill tumors, treat bone pain and relieve swelling. Different types of radiation treatments are available that can focus radiation on tumors and spare healthy tissue.

**5 Surgery** may be used to remove a tumor and also to treat fractures caused when prostate cancer metastasizes to the bones. In some advanced cases, surgery to remove the testicles can be performed to lower testosterone levels and prolong survival time. 



## WORRIED ABOUT TREATMENT COSTS?

Discuss your concerns with your healthcare team—there are many avenues you can pursue to help keep costs down! The office itself may be willing to lower your bill, you may be able to use a specially discounted pharmacy, or your doctor may be able to work out a better arrangement with your insurance company. You may also contact pharmaceutical companies directly to find out about discount programs for specific drugs.

## Your healthcare team

During your treatment, a variety of medical professionals may come in and out of your life. Here are some of the healthcare providers you may work with:

**Urologist:** a doctor who specializes in the male reproductive organs, and who can diagnose, treat and manage patients with urological disorders, such as prostate cancer.

**Medical oncologist:** an MD who specializes in treating cancer with medicine, including chemotherapy.

**Radiation oncologist:** an MD who treats cancer using radiation.

**Surgical oncologist:** an MD who treats cancer through surgery.

**Palliative care doctor:** an MD with expertise in pain-relief methods to improve quality of life.

**Oncology nurse:** an RN who gives care, support and education during your cancer treatment.

**Infusion nurse:** an RN who administers medications, such as chemotherapy, and fluids through infusions.

**Nurse navigator:** an RN or NP who can assist you at every stage of your cancer care, from scheduling treatments to accessing social and financial resources.

**Registered dietitian:** a nutrition expert who can help you choose the best foods to eat, especially for those times you may not feel up to eating.

**Psychiatrist/Psychologist:** mental health professionals who can provide counseling for emotional issues you might experience during treatment. Psychiatrists can also prescribe medication.

**Social worker:** a professional who can help you deal with psychological and social issues, as well as financial concerns, including insurance matters.



He spent 35 years fighting dangerous fires.

RETIREMENT WON'T CHANGE WHO HE IS.  
NEITHER WILL

**ADVANCED PROSTATE CANCER.\***

IF YOU THINK YOUR TREATMENT OPTIONS ARE LIMITED, THINK AGAIN.

\*ZYTIGA® is a prescription medicine used along with prednisone. If you have prostate cancer that is resistant to medical (eg, hormonal) or surgical treatments that lower testosterone and has spread to other parts of the body (metastatic castration-resistant prostate cancer)...

...talk to your doctor to see if ZYTIGA® is right for you and visit [ZYTIGA.com/health](http://ZYTIGA.com/health) for more information.

once-daily

 **Zytiga**®  
(abiraterone acetate)  
250 mg tablets

#### WHAT IS ZYTIGA® (abiraterone acetate)?

ZYTIGA® is a prescription medicine that is used along with prednisone. ZYTIGA® is used to treat men with castration-resistant prostate cancer (prostate cancer that is resistant to medical or surgical treatments that lower testosterone) that has spread to other parts of the body.

#### IMPORTANT SAFETY INFORMATION

##### Who should not take ZYTIGA® (abiraterone acetate)?

Do not take ZYTIGA® if you are pregnant or may become pregnant. ZYTIGA® may harm your unborn baby. Women who are pregnant or who may become pregnant should not touch ZYTIGA® without protection, such as gloves.

ZYTIGA® is not for use in women or children. **Keep ZYTIGA® and all medicines out of the reach of children.**

##### Before you take ZYTIGA®, tell your healthcare provider if you:

- Have heart problems
- Have liver problems
- Have a history of adrenal problems
- Have a history of pituitary problems
- Have any other medical conditions
- Plan to become pregnant (See “Who should not take ZYTIGA®?”)
- Are breastfeeding or plan to breastfeed. It is not known if ZYTIGA® passes into your breast milk. You and your healthcare provider should decide if you will take ZYTIGA® or breastfeed. You should not do both. (See “Who should not take ZYTIGA®?”)
- Take any other medicines, including prescription and nonprescription medicines, vitamins, and herbal supplements. ZYTIGA® can interact with many other medicines.

##### If you are taking ZYTIGA®:

- Take ZYTIGA® and prednisone exactly as your healthcare provider tells you.
- Take your prescribed dose of ZYTIGA® one time a day. Your healthcare provider may change your dose if needed.
- Do not stop taking your prescribed dose of ZYTIGA® or prednisone without talking to your healthcare provider first.
- Take ZYTIGA® on an empty stomach. **Do not take ZYTIGA® with food.** Taking ZYTIGA® with food may cause more of the medicine to be absorbed by the body than is needed and this may cause side effects.
- No food should be eaten 2 hours before and 1 hour after taking ZYTIGA®.
- Swallow ZYTIGA® tablets whole. Do not crush or chew tablets.
- Take ZYTIGA® tablets with water.
- Your healthcare provider will do blood tests to check for side effects.
- Men who are sexually active with a pregnant woman must use a condom during and for one week after treatment with ZYTIGA®. If their sexual partner may become pregnant a condom and another form of birth control must be used during and for one week after treatment with ZYTIGA®. Talk with your healthcare provider if you have any questions about birth control.

##### ZYTIGA® may cause serious side effects including:

- **High blood pressure (hypertension), low blood potassium levels (hypokalemia), and fluid retention (edema).**
- Tell your healthcare provider if you get any of the following symptoms:
- Dizziness
  - Fast heartbeats
  - Feel faint or lightheaded

- Headache
- Confusion
- Muscle weakness
- Pain in your legs
- Swelling in your legs or feet
- **Adrenal problems** may happen if you stop taking prednisone, get an infection, or are under stress.
- **Liver problems.** You may develop changes in liver function blood test. Your healthcare provider will do blood tests to check your liver before treatment with ZYTIGA® and during treatment with ZYTIGA®.

##### The most common side effects of ZYTIGA® include:

- Weakness
- Joint swelling or pain
- Swelling in your legs or feet
- Hot flushes
- Diarrhea
- Vomiting
- Cough
- High blood pressure
- Shortness of breath
- Urinary tract infection
- Bruising
- Low red blood cells (anemia) and low blood potassium levels
- High blood sugar levels, high blood cholesterol and triglycerides
- Certain other abnormal blood tests

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

**THESE ARE NOT ALL THE POSSIBLE SIDE EFFECTS OF ZYTIGA®. FOR MORE INFORMATION, ASK YOUR HEALTHCARE PROVIDER OR PHARMACIST.**

**Tell your healthcare provider about all the medicines you take,** including prescription and nonprescription medicines, vitamins, and herbal supplements.

ZYTIGA® can interact with many other medicines.

You should not start or stop any medicine before you talk with the healthcare provider who prescribed ZYTIGA®.

Know the medicines you take. Keep a list of them with you to show to your healthcare provider and pharmacist when you get a new medicine.

Call your doctor for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch), or call 1-800-FDA-1088 (1-800-332-1088).

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Janssen 

**ZYTIGA<sup>®</sup> (abiraterone acetate) tablets**

**BRIEF SUMMARY — PLEASE SEE THE ZYTIGA<sup>®</sup> PACKAGE INSERT FOR FULL PRESCRIBING INFORMATION.**

Read this Patient Information that comes with ZYTIGA<sup>®</sup> before you start taking it and each time you get a refill. There may be new information. This information does not take the place of talking with your healthcare provider about your medical condition or your treatment.

**What is ZYTIGA<sup>®</sup>?**

ZYTIGA<sup>®</sup> is a prescription medicine that is used along with prednisone. ZYTIGA<sup>®</sup> is used to treat men with castration-resistant prostate cancer (prostate cancer that is resistant to medical or surgical treatments that lower testosterone) that has spread to other parts of the body.

ZYTIGA<sup>®</sup> is not for use in women.

It is not known if ZYTIGA<sup>®</sup> is safe or effective in children.

**Who should not take ZYTIGA<sup>®</sup>?**

Do not take ZYTIGA<sup>®</sup> if you are pregnant or may become pregnant. ZYTIGA<sup>®</sup> may harm your unborn baby.

Women who are pregnant or who may become pregnant should not touch ZYTIGA<sup>®</sup> without protection, such as gloves.

**What should I tell my healthcare provider before taking ZYTIGA<sup>®</sup>? Before you take ZYTIGA<sup>®</sup>, tell your healthcare provider if you:**

- have heart problems
- have liver problems
- have a history of adrenal problems
- have a history of pituitary problems
- have any other medical conditions
- plan to become pregnant. See “Who should not take ZYTIGA<sup>®</sup>?”
- are breastfeeding or plan to breastfeed. It is not known if ZYTIGA<sup>®</sup> passes into your breast milk. You and your healthcare provider should decide if you will take ZYTIGA<sup>®</sup> or breastfeed. You should not do both. See “Who should not take ZYTIGA<sup>®</sup>?”

**Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. ZYTIGA<sup>®</sup> can interact with many other medicines.**

You should not start or stop any medicine before you talk with the healthcare provider that prescribed ZYTIGA<sup>®</sup>. Know the medicines you take. Keep a list of them with you to show to your healthcare provider and pharmacist when you get a new medicine.

**How should I take ZYTIGA<sup>®</sup>?**

- Take ZYTIGA<sup>®</sup> and prednisone exactly as your healthcare provider tells you.
- Take your prescribed dose of ZYTIGA<sup>®</sup> one time a day.
- Your healthcare provider may change your dose if needed.
- Do not stop taking your prescribed dose of ZYTIGA<sup>®</sup> or prednisone without talking with your healthcare provider first.
- Take ZYTIGA<sup>®</sup> on an empty stomach. **Do not take ZYTIGA<sup>®</sup> with food.** Taking ZYTIGA<sup>®</sup> with food may cause more of the medicine to be absorbed by the body than is needed and this may cause side effects.
- No food should be eaten 2 hours before and 1 hour after taking ZYTIGA<sup>®</sup>.
- Swallow ZYTIGA<sup>®</sup> tablets whole. Do not crush or chew tablets.
- Take ZYTIGA<sup>®</sup> tablets with water.

- Men who are sexually active with a pregnant woman must use a condom during and for one week after treatment with ZYTIGA<sup>®</sup>. If their sexual partner may become pregnant, a condom and another form of birth control must be used during and for one week after treatment with ZYTIGA<sup>®</sup>. Talk with your healthcare provider if you have questions about birth control.
- If you miss a dose of ZYTIGA<sup>®</sup> or prednisone, take your prescribed dose the following day. If you miss more than 1 dose, tell your healthcare provider right away.
- Your healthcare provider will do blood tests to check for side effects.

**What are the possible side effects of ZYTIGA<sup>®</sup>?**

**ZYTIGA<sup>®</sup> may cause serious side effects including:**

- **High blood pressure (hypertension), low blood potassium levels (hypokalemia) and fluid retention (edema).** Tell your healthcare provider if you get any of the following symptoms:
  - dizziness
  - fast heartbeats
  - feel faint or lightheaded
  - headache
  - confusion
  - muscle weakness
  - pain in your legs
  - swelling in your legs or feet
- **Adrenal problems** may happen if you stop taking prednisone, get an infection, or are under stress.
- **Liver problems.** You may develop changes in liver function blood test. Your healthcare provider will do blood tests to check your liver before treatment with ZYTIGA<sup>®</sup> and during treatment with ZYTIGA<sup>®</sup>.

The most common side effects of ZYTIGA<sup>®</sup> include:

- weakness
- swelling in your legs or feet
- diarrhea
- cough
- shortness of breath
- bruising
- joint swelling or pain
- hot flashes
- vomiting
- high blood pressure
- urinary tract infection
- low red blood cells (anemia) and low blood potassium levels
- high blood sugar levels, high blood cholesterol and triglycerides
- certain other abnormal blood tests

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of ZYTIGA<sup>®</sup>. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

**Keep ZYTIGA<sup>®</sup> and all medicines out of the reach of children.**

**General Information about ZYTIGA<sup>®</sup>**

Medicines are sometimes prescribed for purposes other than those listed in a patient information leaflet. Do not use ZYTIGA<sup>®</sup> for a condition for which it was not prescribed. Do not give your ZYTIGA<sup>®</sup> to other people, even if they have the same symptoms that you have. It may harm them. You can ask your healthcare provider or pharmacist for information about ZYTIGA<sup>®</sup> that is written for healthcare professionals.

For more information contact Janssen Biotech, Inc. at **1-800-526-7736 (1-800-JANSSEN)** or **www.Zytiga.com**.



# Tracking your progress

Your care team will rely on a number of tests to see how you're doing during treatment, including:

**Routine blood tests:** These include a CBC (complete blood count), blood chemistry tests and tests for blood lipids, blood sugar and sex hormone levels. Blood tests can indicate anemia (low red blood cells), neutropenia (low white blood cells) and low platelets, which can tell your doctor if you are able to receive chemo. Also, tests for changes in lipid (blood fats) levels, blood sugar and androgen (male hormone) levels may be used to monitor changes in your body.

**Prostate specific antigen (PSA) test:** Used to diagnose prostate cancer, your PSA levels are tracked throughout treatment to indicate whether your treatment is successfully at slowing your cancer.

**Testosterone level checks:** Also sometimes used to diagnose prostate cancer, your testosterone levels may be tracked during treatment to indicate whether it is successful at slowing your cancer.

**X-rays:** Used to show tumors in the body.

**Dihydrotestosterone (DHT) test:** Men on hormone therapy may need this test to check their testosterone levels.

**Needle biopsy:** May be performed to get more information if an X-ray shows abnormal areas.

**Circulating tumor cells (CTC) test:** A blood test that checks to see if tumor cells are circulating in your blood.

**Urine test:** Often given at the same time as the CBC, this test looks for several things, including how well your liver and kidneys are performing during treatment.

**CT scan:** An imaging technique that provides detailed pictures of areas inside the body.

**MRI:** A scan that uses a magnet and radio waves to take pictures of areas inside the body.

**Ultrasound:** A test that uses sound waves to take pictures of areas inside the body.

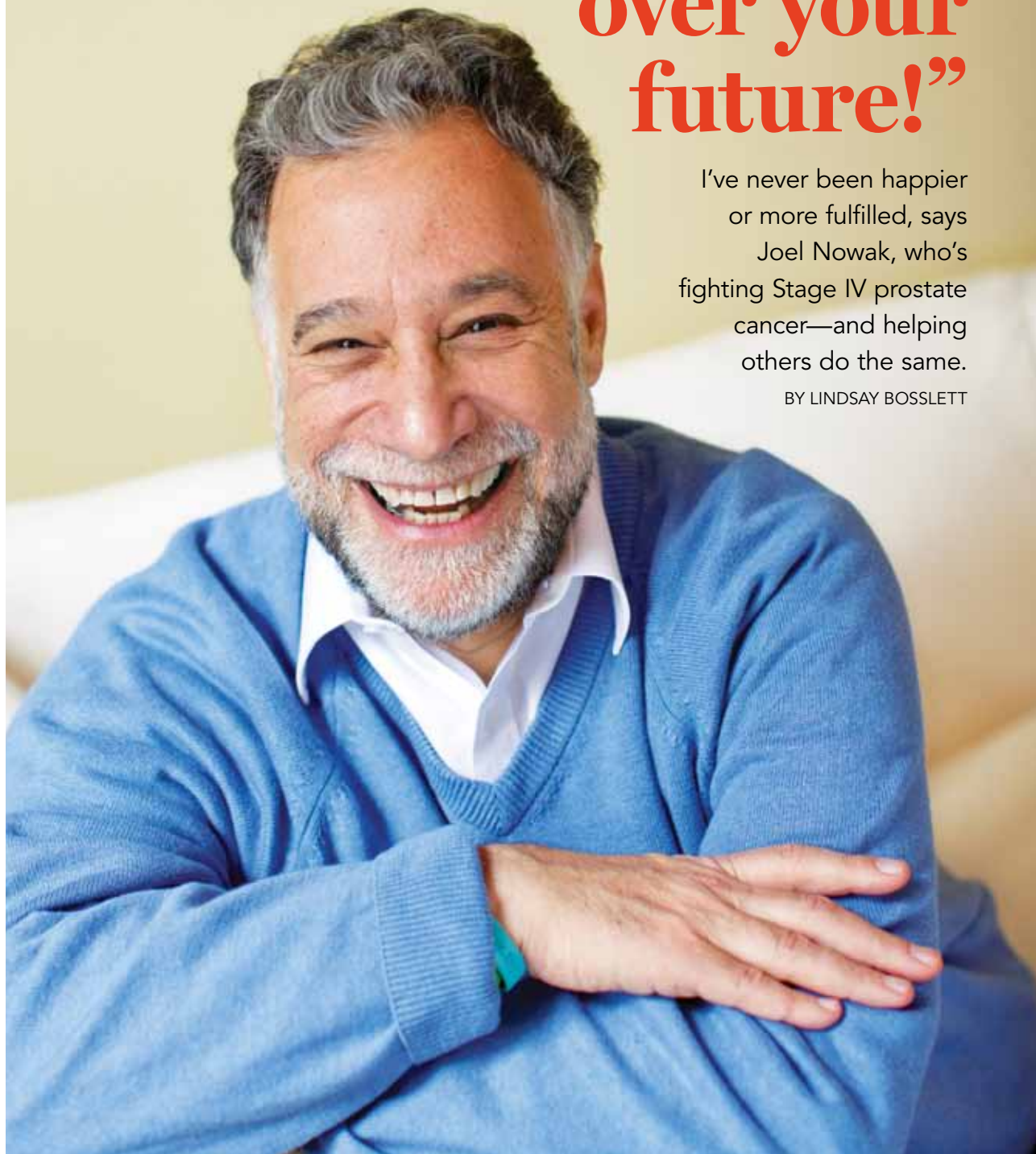
**Bone scan:** Used to detect tumors that have spread in the bone; radioactive material is injected and collects in areas of the bone where tumors are.

**Seminal vesicle biopsy:** Removal of fluid from seminal vesicles (glands that produce semen) using a needle to check for cancer cells.

# “You have the power over your future!”

I’ve never been happier or more fulfilled, says Joel Nowak, who’s fighting Stage IV prostate cancer—and helping others do the same.

BY LINDSAY BOSSLETT



Joel Nowak, MA, MSW, is a bit of an expert when it comes to taking a cancer diagnosis in stride.

“Since 1998 I’ve been diagnosed with four different cancers—thyroid first, which I beat, then prostate, then the kidney and skin cancer, both of which I also beat,” the 62-year-old Brooklyn, NY, resident recounts. “I’ve definitely had my fair share of treatment!”

You might expect to find such a man feeling defeated or possibly angry. But there’s not a hint of bitterness when you ask him about his health.

“I made the conscious decision to choose happiness,” Joel says.

Joel’s original prostate cancer diagnosis came in 2001, after a routine PSA test.

Joel opted for laparoscopic surgery to remove the prostate. The procedure and recovery went smoothly, and all seemed fine until Joel’s PSA numbers took another jump in 2005. After some scans, the bad news: The prostate cancer was back, and this time it was Stage IV—metastatic. He researched his options, and with the advice of his doctor decided to start with hormone treatments before doing chemotherapy. He is now on a new type of hormone therapy and it is still effectively keeping his cancer under control.

And he’s using his many cancer diagnoses to inspire him! After retiring from his job in commercial real estate two years ago, Joel has devoted all his time to cancer advocacy. In addition to providing medical testimony at government hearings, running online and in-person support groups, speaking at conferences, running health fairs and writing about his condition, Joel heads up a program for Malecare, a nationwide organization that helps men dealing with advanced prostate cancer.

“I’m out every day walking my dog, Charlie,” Joel says. “I’m traveling to places like Iceland and Alaska with family, and constantly adding new things to my bucket list. There’s no telling what the future holds!”

“I have become an empowered patient—and that has made all the difference!”

## Take charge of your cancer

Despite advanced prostate cancer, Joel stays positive. Here, the tips that help him stay strong and hopeful:

- **Work closely with your doctor.** “Ask questions, then ask some more,” Joel says. “Remember, your doctor is there to help you. You need to arm yourself against cancer with information that can help you and your doctor pick the best treatment available. That means knowing about new options and being honest about what treatments and side effects you can and cannot handle. I learned that ultimately I was responsible for my own decisions, not my doctors—so I needed to help them as much as they have to help me. I have become an empowered patient—and that has made all the difference.”
- **Accept the treatment you choose.** “First, educate yourself about *all* the options out there that can treat your prostate cancer,” Joel says. “Then once you’ve weighed all the pros and cons with your doctor, don’t agonize over the choice you make. There is no right or wrong treatment, no right or wrong answer. If you choose a treatment and it doesn’t work, you can try another. Everyone is different, every body is different and no one can tell you for sure how well something will work on your body. Agonizing over regret is just going to make you miserable. Make your choice and move on. Each day is a new day and a new chance to make a different choice, once you have more information to base it on.”
- **Don’t let statistics get you down.** “Your first instinct is probably going to be to ask your doctor, ‘Doc, how long do I have?’ but the truth is he or she doesn’t really know. You could have many, many years left! Statistics only tell you a group trend; they don’t tell you anything about how well a treatment is going to work for you, an individual.”
- **Anticipate treatment side effects.** “The only treatment that doesn’t have side effects is no treatment, and that choice means dying from cancer,” Joel says. “Surgery, radiation, chemo, hormones—they all have different side effects. Research what they will be so you know and aren’t surprised. Then it’s much easier to power through them. And you can better plan for ways to deal with them, whether it’s by getting an antinausea medication prescription or something that offsets impotency.”

# 10

These men are proof that you can live—really live!—despite prostate cancer, no matter its stage. Read on for the strategies that keep them centered, active and optimistic!

## ways to thrive!

### ► Our panel



**Jim Mantock**  
Diagnosed:  
Stage I in 2008;  
stage IV in 2011



**Tony Crispino**  
Diagnosed:  
Stage III in 2006



**Rick Redner**  
Diagnosed:  
Stage III in 2011



**Marshall Mullins**  
Diagnosed:  
Stage IV in 2012



**Isadore Wayne Sr.**  
Diagnosed:  
Stage III in 2002

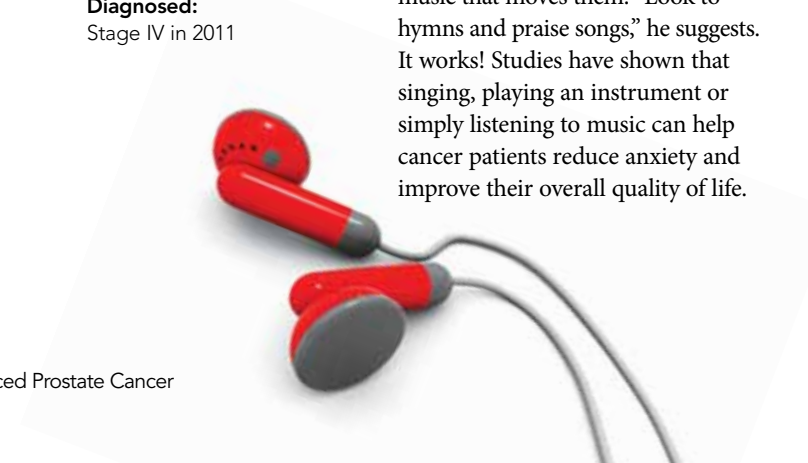


**Bill Curry**  
Diagnosed:  
Stage IV in 2011

**1 COOL OFF ANXIETY**  
“I get panic attacks—which occur when anxiety is out of control,” says Jim Mantock. What helps is cooling off physically. “In the winter, I just open the door and let the cold air come in. In the summer, if it’s warm, I get a cold washcloth and drape it over my forehead. The quick reduction in heat seems to do wonders for anxiety.”

**2 STAY CURRENT—AND FLEXIBLE**  
Cancer breakthroughs are happening all the time, which is why Tony Crispino finds it helpful to stay on top of prostate cancer news. “Once you get started on your treatment journey, you’re going to have to stay open to changes,” he says. “Whatever you deal with today could change tomorrow.”

**3 FIND YOUR SONG(S)**  
“Listening to Bill Withers’ ‘Lean on Me’ and Laura Story’s ‘Blessings’ calms my soul,” says Rick Redner, who encourages others to find the music that moves them. “Look to hymns and praise songs,” he suggests. It works! Studies have shown that singing, playing an instrument or simply listening to music can help cancer patients reduce anxiety and improve their overall quality of life.



### 4 TAKE IT TO THE LIMIT!

“Within a few months of my diagnosis, I bought a Harley Trike and got it custom-painted, memorializing my year in Vietnam,” says Marshall Mullins. “I take it to shows throughout Colorado and neighboring states to talk to people about veterans’ issues and prostate cancer awareness. My wife and I also plan trips to see family and friends. Take advantage of your good days!”



**5 EAT MEDITERRANEAN**  
“After my diagnosis, I made some diet changes,” Isadore Wayne says. “I started eating more fruits and veggies and cut out a lot of red meat. I ate more fish and chicken. Studies suggest that high-fat dairy and red meat may cause prostate and other cancers, so I limit myself on those. And I feel much better. You can do all your doctor tells you, but if you don’t help yourself by becoming a healthier person, it may not help” [A study published in the journal *European Urology* reported that men diagnosed with prostate cancer who ate a Mediterranean diet had a lower risk of overall mortality than those who did not.]



**6 TAKE CARE OF YOUR BONES**  
“I was diagnosed with osteoporosis, a common side effect of hormone therapy, which I underwent for 27 months following surgery,” says Bill Curry. “I had infusions of a bisphosphonate drug and took calcium supplements. I also eat calcium-rich foods and do weight- and resistance-training.”

**7 DO A “SELF-CHECK” WITH INVITATIONS**  
Says Jim: “Sometimes my wife, Lisa, will say, ‘You need to get outside.’ But before agreeing, I stop and ask myself, *Will I feel worse if I go out?* If I am pretty sure I will, I tell her, and she backs off. Most of the time, she makes the right call!”

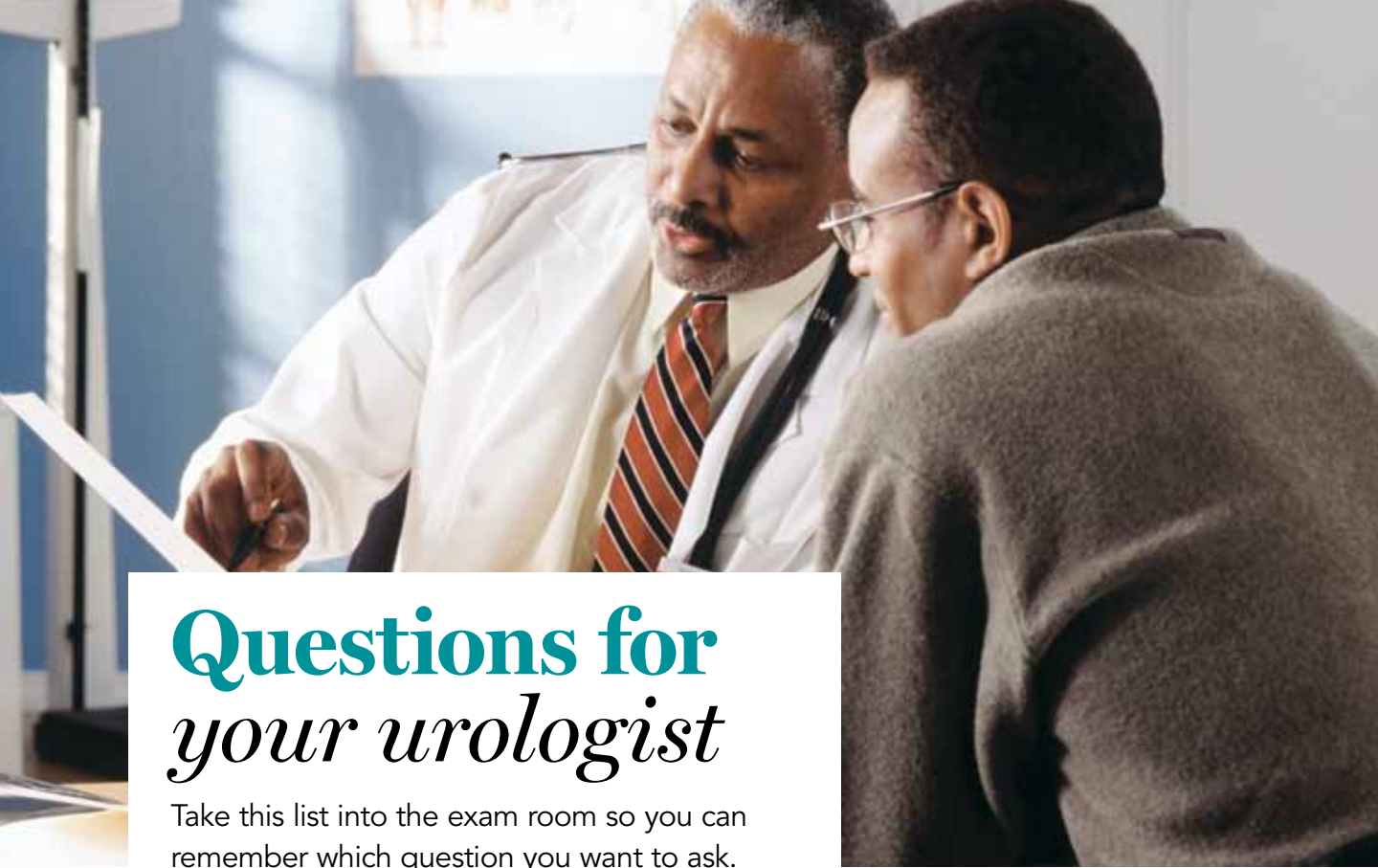


**8 GET THE MEDS YOU NEED**  
“If you have problems with insurance, or with getting a certain medication paid for, don’t ever give up,” says Marshall. “When my oncologist told me that I should try a drug that cost \$5,000 a month, I was told Medicare wouldn’t cover it. But we found a program through the drug company that would get the medication for me with a co-pay we could afford.”

**9 LOOK FOR THE LONGTIMERS!**  
One of the best things about joining a prostate cancer community [see back page for resources] is connecting with others who have been there. “You can’t know how helpful it is to hear a longtime survivor tell you that there are many like you and you can do great,” says Tony.

**10 CELEBRATE MILESTONES!**  
“After my diagnosis, I celebrated all kinds of things,” says Rick. Examples? “When I decided how to treat my prostate cancer, when I found the doctor who’d treat my prostate cancer, when a prayer was answered, and when a friend or family member reached out to me. To celebrate, my wife and I might have a meal out, rent a movie, enjoy a romantic evening at home or order our favorite takeout food.”





# Questions for *your urologist*

Take this list into the exam room so you can remember which question you want to ask.

1. What are the results of my latest tests and scans, and what do they suggest about my current treatment?  

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2. Do you recommend any other treatment strategies at this time? If so, what are the risks and benefits of each?  

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3. Are there any treatments that can help me avoid or delay chemotherapy?  

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4. What are the side effects of any treatment you recommend and how can I avoid or manage them?  

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5. Should I call your office if I experience any specific symptoms? If so, what are they?  

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6. What tests will be used to monitor me, and how often will I need them performed?  

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7. Can you recommend any specific lifestyle changes that can help me feel my best?  

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8. Is there a clinical trial that can help me? What are the pros and cons?  

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9. Can I still work during treatment?  

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