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PATIENT & CAREGIVER EDUCATION

# About Your MSK Precise™ Prostate Program

This information will help you get ready for your MSK Precise radiation therapy to your prostate, including what to expect before, during, and after your treatment. You will also learn about side effects and how to care for yourself during your treatment.

We suggest you read through this resource at least once before you start MSK Precise, and then use it as a reference in the days leading up to your treatments to help you prepare. Bring it with you to your simulation appointment and all future appointments with your radiation oncologist so that you and your healthcare team can refer to it.

## About MSK Precise

Radiation therapy uses high-energy rays to treat cancer. It works by damaging the cancer cells and making it hard for them to reproduce. Your body is then naturally able to get rid of these damaged cancer cells. Radiation therapy also affects normal cells. However, your normal cells are able to repair themselves in a way that cancer cells can't.

MSK Precise is different from traditional radiation therapy. It uses a precise, high-dose form of radiation therapy called

stereotactic radiosurgery to deliver high doses of radiation to tumors accurately.

Because the normal movements of your body can cause your prostate to move slightly during or between treatments, your healthcare team will insert markers into your prostate. These allow your doctors to know the exact location of your prostate so they can deliver high-dose radiation therapy to the prostate. You can read more about the markers in the “About Fiducial Markers and Rectal Spacers” section.

You will receive high doses at each treatment session, so your treatment course will be shorter than with standard radiation therapy. Your treatment will be 5 sessions.

Radiation therapy takes time to work. It takes days or weeks before cancer cells start to die, and they keep dying for weeks or months after radiation therapy ends.

MSK Precise can be used alone to treat your cancer or in combination with other forms of therapy, such as brachytherapy or hormonal therapy.

## **Your Role on Your Radiation Therapy Team**

You will have a team of healthcare providers working together to provide the right care for you. You're part of that team, and your role includes:

- Arriving on time for all your radiation therapy sessions.
- Asking questions and talking about your concerns. We have

included a list of questions you might want to ask at the end of this resource.

- Letting someone on your radiation therapy team know when you have side effects.
- Telling your doctor or nurse if you're in pain.
- Caring for yourself at home.
- Quitting smoking, if you smoke. If you want to quit, call our Tobacco Treatment Program at 212-610-0507.
- Following your healthcare team's instructions to care for your skin.
- Drinking liquids as instructed.
- Eating the foods suggested by your radiation therapy team.
- Maintaining your weight.

## **About Fiducial Markers and Rectal Spacers**

Before you start MSK Precise, you might have a procedure to place fiducial markers, rectal spacers, or both.

- Fiducial markers are tiny metal objects (about the size of a grain of rice). They allow your doctors to align the beams of radiation to make sure that your radiation therapy is delivered exactly the same way each time. This helps them to target your tumor and avoid your healthy tissue. The fiducial markers will stay in your prostate after your treatment.
- SpaceOAR® hydrogel rectal spacers are placed between your prostate and rectum to move your rectum away from your

prostate. This protects your rectum from radiation and reduces some side effects of radiation therapy. The rectal spacers will stay in place for about 3 months. Then, they will be absorbed by your body and come out in your urine.

Your appointment to have fiducial markers and rectal spacers placed is on

Date: \_\_\_\_\_ with Dr.

\_\_\_\_\_

Read the resource *About the Placement of Fiducial Markers and Rectal Spacers for Radiation Therapy to Your Prostate* ([www.mskcc.org/pe/fiducial\\_markers\\_rectal\\_spacers](http://www.mskcc.org/pe/fiducial_markers_rectal_spacers)). This resource has important information you will need to know before your procedure.

## Simulation

Before you start your treatment, you will have a treatment planning procedure called a simulation. This is done to make sure that:

- Your treatment site is mapped out.
- You get the right dose of radiation.
- The amount of radiation that gets to your nearby tissues is as small as possible.

During your simulation, you will have imaging performed (see

below) and your skin will be marked with little tattoo dots. These marks identify the area that will be treated.

Your simulation will take about 4 hours but can be shorter or longer depending on the treatment your doctor has planned for you.

### **Getting ready for your simulation**

Buy the supplies listed below. You can buy them at your local pharmacy without a prescription.

- 1 bottle of psyllium (Metamucil®) or methylcellulose (Citrucel®) powder
- 1 package of simethicone (Gas-X®) tablets
- 6 Fleet® (saline) enemas

### **3 days before your simulation**

Take psyllium or methylcellulose powder and simethicone tablets every day starting 3 days before your treatment. Follow the instructions below.

- Mix 1 rounded teaspoon of psyllium or methylcellulose powder in 8 ounces of water. Drink the mixture 2 hours before or 2 hours after you take your other medications.
- Take 2 tablets of simethicone twice a day, after meals. This means you will take a total of 4 tablets each day.



**Remember to take the psyllium or methylcellulose powder and simethicone tablets every day from now until the end of**

## **your treatment.**

### **The day of your simulation**

- Do a Fleet enema 2 to 3 hours before you leave for your simulation appointment.
- Remember to take psyllium or methylcellulose powder and simethicone tablets.
- It's okay to have a light meal.
- During your simulation, you will be lying in one position for a long time. If you think you will be uncomfortable lying still, you can take acetaminophen (Tylenol®) or your usual pain medication before your simulation. If you think you might get anxious during your procedure, speak with your doctor about whether medication may be helpful.
- Wear comfortable clothes that are easy to take off because you might need to change into a hospital gown. Don't wear jewelry, powders, or lotions.

### **What to expect**

A member of your radiation therapy team will check you in. You will be asked to state and spell your full name and date of birth many times. This is for your safety as part of our standard identification process. People with the same or similar name might be having care on the same day as you.

When you arrive for your appointment, your radiation therapist will greet you and take a photograph of your face. This picture

will be used to identify you throughout your treatment.

Your radiation therapist will review and explain the simulation to you. If you haven't already signed a consent form, your radiation oncologist will review everything with you, and ask for your signature.

### **During your simulation**

For your simulation, you might need to get undressed and change into a gown. You should keep your shoes on. You may be asked to drink water before the simulation begins. This is to fill your bladder. You may also need to have a catheter placed into your bladder during the procedure. The catheter will be removed when your simulation is done.

Your therapists will help you lie down on a table and make every effort to ensure your comfort and privacy.

Although the table will have a sheet on it, it's hard and has no cushion. If you haven't taken pain medication and think you might need it, tell your therapists before your simulation begins. Also, the room is usually cool. If you feel uncomfortable at any time, let your therapists know.

Throughout your simulation, you will feel the table move into different positions. The lights in the room will be turned on and off and you will see red laser lights on each wall. Your therapists use these laser lights as a guide when they position you on the table. **Don't stare into the red beam because it can damage your eyes.**

Although your therapists will walk in and out of the room during your simulation, there will always be someone who can see and hear you. You will hear your therapists speaking to each other as they work, and they will explain to you what they're doing. Don't move once your simulation begins, because it might change your position. However, if you're uncomfortable or need assistance, tell your therapists.

To help pass the time, your therapists can play music for you.

## **Positioning**

While you're lying on your back on the table, a mold will be made of your lower body. Your radiation therapists will place a warm, wet sheet of plastic over your lower hip and thigh areas. They will press on it to shape it to fit around your body. As the mold cools, it hardens. This procedure takes about 15 minutes.

During your simulation, and every day of your treatment, this mold will be placed over you. It will be attached to the table on which you're lying. It helps make sure you're in the correct position each time you receive your treatment.

## **Imaging**

While you're lying in your position, you will get a CT scan of the area to be treated (see Figure 1). These scans are used only to map your treatment. **They aren't used for diagnosis or to find tumors.** You might also have magnetic resonance imaging (MRI) of your prostate done during the simulation process. If you need other imaging, your nurse will explain this to you.



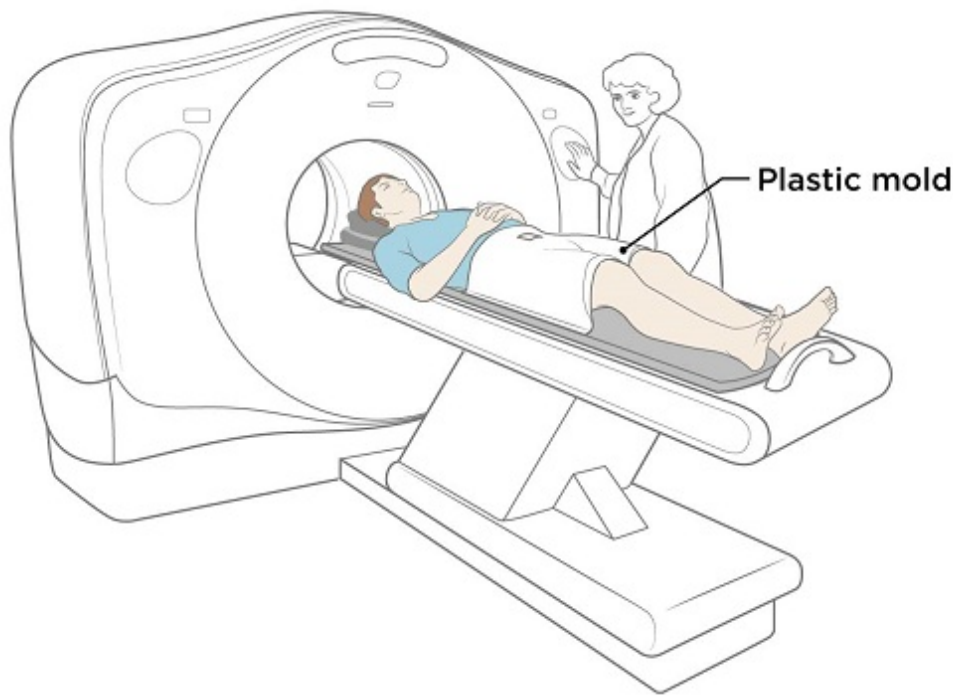


Figure 1. Computed Tomography (CT) scan machine

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If the CT scan shows that you have gas in your rectum and you're not able to pass gas, a small rubber catheter (thin, flexible tube) might be inserted into your rectum. The catheter placement isn't painful.

It will take about 45 minutes to get your CT scan. During the scan, you will hear the machine turn on and off. Even if the noise seems loud, your therapists will be able to hear you if you speak with them.

### **Skin markings (tattoos)**

Your therapists will draw on your skin in the area being treated with a felt marker and make about 4 to 6 permanent skin markings called tattoos. Your therapists will use a sterile needle and a drop of ink to make the tattoo. The sensation of getting one feels like a pinprick. The tattoo marks are no bigger than the head of a pin. The felt markings can be washed off after your simulation. **The tattoos are permanent and will not wash**

**off.** If you're concerned about receiving tattoos as part of your radiation treatment, talk with your doctor.

After the tattoos are made, your therapists will take several photographs of you in your simulation position. The photographs and tattoo marks will be used to position you correctly on the table each day of your treatment.

### **After your simulation**

At the end of your simulation, we will give you an appointment for your set-up procedure and your first treatment.

### **Scheduling your treatment**

Radiation treatments are given Monday through Friday, every other day. Your treatment might start any day of the week, and it will be every other day for a total of 5 treatments.

You must come in every day that you're scheduled for your treatment. Treatment might not be as effective if you skip or miss appointments. If additional time is needed due to unforeseen circumstances, your radiation oncologist will tell you. If for some reason you can't come in for treatment, you must call your radiation oncologist's office to let your team know. If you need to change your schedule for any reason, speak with your radiation therapist.

### **Treatment planning**

During the time between your simulation and start of treatment, your radiation oncologist will work with a team to plan your treatment. They will use your simulation scans to plan the angles and shapes of your radiation beams. The details are carefully

planned and checked. This process can take up to 2 weeks.

## **Vitamins and dietary supplements**

Many people ask about taking vitamins during treatment. You can take a daily multivitamin, if you want to. Don't take more than the recommended daily allowance of any vitamin. Don't take any other vitamins or any supplements without talking to your doctor. This includes both nutritional and herbal supplements.

Remember to keep taking psyllium or methylcellulose powder and simethicone tablets every day until the end of your treatment.

## **Set-up Procedure and First Treatment**

### **The day of your set-up procedure and first treatment**

Do a Fleet enema 2 to 3 hours before you leave for your set-up procedure and first treatment. Remember to also take psyllium or methylcellulose powder and simethicone tablets as usual.

### **What to expect**

Your set-up procedure and first treatment will take about 90 minutes. If pain medication was helpful during simulation, you might want to take it before this procedure.

When you come for your set-up procedure, you will be shown to the dressing room and asked to change into a gown. Your therapists will bring you to the room where you will receive your treatment each day. They will position you on the treatment table. You will lie exactly as you did on the day of your simulation.

Special images (x-rays or CT scans) called beam films will be taken to make sure that your position and the area being treated are correct. The beam films will be repeated throughout your treatment. **They aren't used to see how your tumor is responding to the treatment.** The beam films help your therapist to make sure the radiation beams are correctly lined up with your prostate.

You will have your first treatment after your set-up procedure.

## **During Your Treatment**

Do a Fleet enema 2 to 3 hours before you leave for each of your treatments. Remember to also take psyllium or methylcellulose powder and simethicone tablets every day until your treatment is finished.

### **What to expect**

After you check in at the reception desk, have a seat in the waiting room. When they're ready for you, your radiation therapists will tell you to change into a gown. You should keep your shoes on during the treatment.

Some people will need to have a full bladder for their treatment. If your doctor decides this is needed, your therapist will tell you how much water to drink and when to begin drinking it.

Your radiation therapists will bring you into the treatment room and help you lie on the table (see Figure 2). You will be positioned exactly how you were lying during your set-up procedure. Once you're positioned correctly, your therapists will leave the room,

close the door, and begin your treatment.

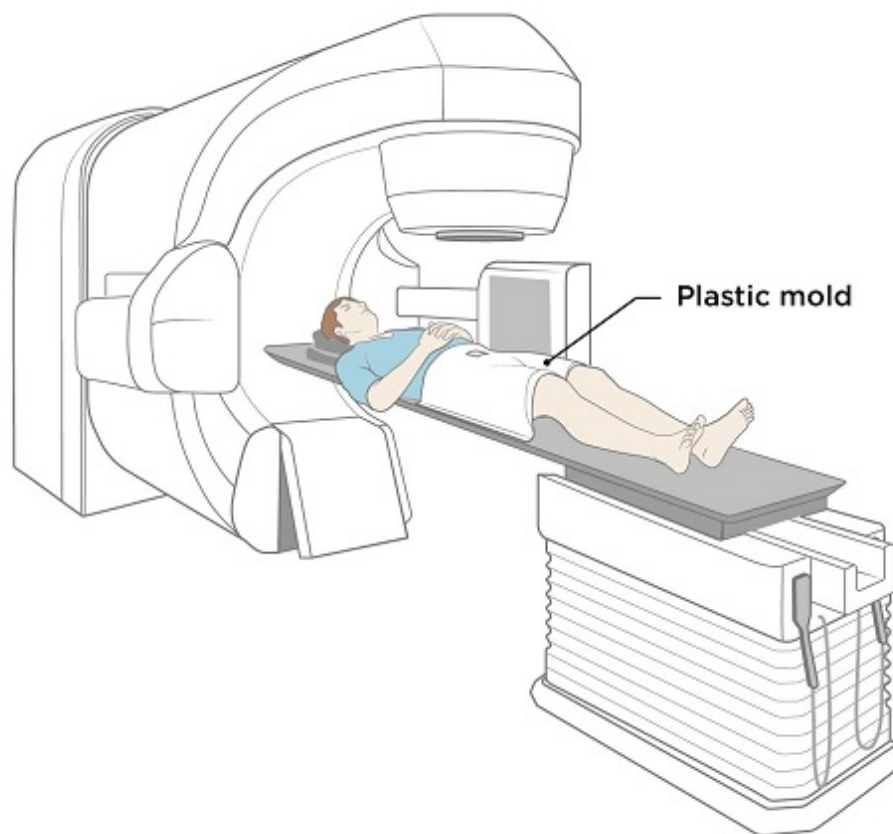


Figure 2. During your treatment

The beams of radiation are shaped by many small leaves of tungsten (a type of metal) sitting at the opening of the treatment machine. The computer will move the leaves into different positions to block the radiation. The radiation that passes through the opening between the leaves creates the beam that is directed toward your body. The leaves move while the beam is passing through. This varies the intensity of the beam and ensures that you receive the exact doses prescribed by your radiation oncologist.

You will not see or feel the radiation, but you may hear the machine as it moves around you and is turned on and off. You will be in the treatment room for 15 to 45 minutes, depending on

your treatment plan. Most of this time will be spent putting you in the correct position. The actual treatment only takes a few minutes.

Although you will be alone during the treatment, your therapists will see you on a monitor and hear you through an intercom at all times. Your radiation therapist will make sure that you're comfortable during the treatment. Breathe normally during your treatment, but don't move. However, if you're uncomfortable or need help, speak to your therapists. They can turn off the machine and come in to see you at any time, if necessary.

**Neither you nor your clothes will become radioactive during or after treatment. It's safe for you to be around other people.**

### **Status check visit**

Your radiation oncologist and radiation nurse will see you once during your treatment to talk with you about any concerns, ask about any side effects you may be having, and answer your questions. This visit will be before or after your treatment. You should plan on being at your appointment about 1 extra hour on this day.

If you need to speak with your radiation oncologist or radiation nurse any time besides this visit, call your radiation oncologist's office or ask the support staff or your therapists to contact them when you come in for treatment.

## **Side Effects**

Some people develop side effects from radiation therapy. Which side effects and how severe they are depend on many factors, such as the area being treated, the dose of radiation, the number of treatments, and your overall health. The side effects can be worse if you're also getting hormonal therapy. Below are the most common side effects of MSK Precise. You may have all, some, or none of these.

## **Urinary changes**

Your prostate gland might swell and the lining of your bladder might become irritated during treatment. Even after a few treatments you might have:

- Difficulty starting to urinate.
- Increased frequency of urination.
- Frequent need to urinate at night.
- Sudden urge to urinate.
- Burning with urination.

Below are guidelines to help you manage these symptoms.

- Drink 6 to 8 glasses of water throughout the day.
- Decrease your intake of liquids after 8:00 PM.
- Avoid foods and beverages that can irritate the bladder.

Examples are:

- Caffeine (such as coffee, tea, and soda)
- Alcohol
- Spicy foods (especially if you have burning with urination)

- Acidic fruit juices and fruit products (such as tomatoes and tomato juice)
- Tell your doctor or nurse know if you have any urinary changes. They can recommend a change in your diet or prescribe medication that can help.

## **Bowel Changes**

The wall of your rectum can become irritated. After a few treatments you might have:

- More frequent and softer bowel movements.
- Worsening of hemorrhoidal symptoms.
- Rectal discomfort.
- Mucous discharge.
- A small amount of rectal bleeding.
- Increased gas.
- An increased urge to have a bowel movement.

These symptoms are usually mild. When you begin treatment, there are no restrictions on your diet. If you develop any of these symptoms, talk with your nurse about how you can change your diet to reduce them. If you're still uncomfortable, tell your doctor or nurse. They can prescribe medication to help.

In general, these symptoms improve about 1 to 2 months after your treatment ends. Most people continue to take medications to treat bowel changes for a period of time after the treatment. It's important to tell us both if you develop symptoms and also to



keep us informed on how you're doing.

## **Sexual health**

You might have concerns about the effects of cancer and your treatment on your sexuality. You aren't radioactive. You can't pass radiation to anyone else, so it's safe to be in close contact with other people.

You can be sexually active during radiation treatment unless your radiation oncologist gives you other instructions. However, if you're sexually active with a woman who is able to have children, you must use birth control (contraception) to prevent pregnancy during your treatment, because your sperm might have been damaged by radiation. See the resource *Sexual Activity During Cancer Treatment: Information for Men*

([www.mskcc.org/pe/sexual\\_activity\\_treatment\\_men](http://www.mskcc.org/pe/sexual_activity_treatment_men)) for additional information. Another excellent resource is the booklet *Sexuality for the Man With Cancer* from the American Cancer Society. You can get a copy by calling 800-227-2345 or go to [www.cancer.org/acs/groups/cid/documents/webcontent/002910-pdf.pdf](http://www.cancer.org/acs/groups/cid/documents/webcontent/002910-pdf.pdf)

Some men have a burning sensation during ejaculation. In most men, it goes away 1 to 2 months after treatment is done.

Some men develop sexual changes after treatment is done. You might have:

- Erectile dysfunction (difficulty or inability to have or maintain an erection).

- A change in the sensation of orgasm.
- A change in the amount or consistency of your ejaculation.

These sexual changes can occur many months or even years after treatment. There are treatments for erectile dysfunction. We can give you a referral to a doctor who treats these problems.

Memorial Sloan Kettering (MSK) has a Male Sexual and Reproductive Medicine Program to help people address the impact of their disease and treatment on sexual health. You can meet with a specialist before, during, or after your treatment. We can give you a referral, or you can call 646-888-6024 for an appointment.

## **Reproductive health**

Exposure of your testes to radiation might affect sperm production and your ability to have children in the future. If you want to preserve your ability to have biological children, we recommend banking your sperm before treatment begins. This involves collecting, freezing, and storing your sperm. Sperm can be stored for as long as you want, even for many years. See the resources *Sperm Banking* ([www.mskcc.org/pe/sperm\\_banking](http://www.mskcc.org/pe/sperm_banking)) and *Building Your Family After Cancer Treatment: Information for Men* ([www.mskcc.org/pe/building\\_family\\_men](http://www.mskcc.org/pe/building_family_men)) for more information.

If you're sexually active with a woman of reproductive age, it's important to use birth control during treatment and for 1 year after treatment is completed. This is to make sure you don't conceive with sperm that might have been damaged by exposure

to radiation, which could possibly result in birth defects.

## **Skin and hair reactions**

During treatment, you will probably not notice any changes in your skin in the area being treated. However, you might lose some or all of the hair in your pubic area. The hair will usually grow back 3 to 6 months after treatment is done; however, the color and texture might be different.

Below are guidelines to help you care for your skin during treatment. **These guidelines refer only to the skin in the area being treated with radiation.**

### **Keep your skin clean**

- Bathe or shower daily using warm water and a mild unscented soap, such as Neutrogena<sup>®</sup>, Dove<sup>®</sup>, baby soap, Basis<sup>®</sup>, or Cetaphil<sup>®</sup>. Rinse your skin well and pat it dry with a soft towel.
- When washing, be gentle with your skin in the area being treated. Don't use a washcloth, a scrubbing cloth, or brush.
- If you received tattoo marks before your treatment, they're permanent and won't wash off. You might get other markings during treatment such as an outline of your treatment area with a purple felt-tipped marker. You can remove these markings with mineral oil when your therapists say it's okay.
- **Don't use alcohol or alcohol pads on your skin in the area being treated.**

### **Avoid irritating the skin in the area being treated**

- Wear loose-fitting cotton clothing in the area being treated. Don't wear tight clothing that will rub against your skin.
- Use only the moisturizers, creams, or lotions that are recommended by your doctor or nurse.
- If your skin is itchy, don't scratch it. Apply moisturizer. Ask your nurse for recommendations on how to relieve the itching.
- Don't let your treated skin come into contact with extreme hot or cold temperatures. This includes hot tubs, water bottles, heating pads, and ice packs.
- If you have no skin reactions during your treatment, you can swim in a chlorinated pool. However, be sure to rinse off the chlorine right after getting out of the pool.
- Avoid tanning or burning your skin during treatment and for the rest of your life. If you're going to be in the sun, use a PABA-free sunblock with an SPF of 30 or higher. Also, wear loose-fitting clothing that covers you as much as possible.

## **Fatigue**

Fatigue is a feeling of being tired or weak, not wanting to do things, not being able to concentrate, or feeling slowed down. You might develop fatigue after 2 to 3 weeks of treatment, and it can range from mild to severe. Fatigue can last 6 weeks to 12 months after your treatment ends.

There are a lot of reasons why you might develop fatigue during treatment, including:

- The effects of radiation on your body.
- Traveling to and from treatment.
- Not having enough restful sleep at night.
- Not eating enough protein and calories.
- Having pain or other symptoms.
- Feeling anxious or depressed.
- Certain medications.

You might find that your fatigue is worse at certain times of the day. Below are suggestions to help you manage your fatigue.

## **Ways to manage fatigue**

- If you're working and are feeling well, continue to do so. However, working less can help increase your energy.
- Plan your daily activities. Pick those things that are necessary and most important to you and do them when you have the most energy. For example, you might go to work but not do housework, or watch your children's sports event but not go out to dinner.
- Plan time to rest or take short naps (10 to 15 minutes) during the day, especially when you feel more tired. If you do nap, try to sleep for less than 1 hour at a time.
- Try to sleep at least 8 hours every night. This might be more sleep than you needed before you started radiation therapy. You might also find it helpful to go to sleep earlier at night and get up later in the morning. One way to sleep better at night is

to be active during the day. For example, if you're able to exercise, you could go for a walk or do yoga. Another way to sleep better at night is to relax before going to bed. You might read a book, work on a jigsaw puzzle, listen to music, or do calming hobbies.

- Ask family and friends to help you with things like shopping, cooking, and cleaning. Check with your insurance company to see if they cover home care services.
- Some people have more energy when they exercise. Ask your doctor if you can do light exercise, such as walking, stretching, or yoga. Avoid riding a bicycle during treatment as this can put pressure on your prostate area.
- Eat foods that are high in protein and calories. Ask your nurse for the resource *Eating Well During and After Your Cancer Treatment* ([www.mskcc.org/pe/eating\\_cancer\\_treatment](http://www.mskcc.org/pe/eating_cancer_treatment)).
- Other symptoms, such as pain, nausea, diarrhea, difficulty sleeping, or feeling depressed or anxious can increase your fatigue. Ask your doctor or nurse for help with any other symptoms you might have.

## Emotional health

The diagnosis and treatment of cancer can be a very stressful and overwhelming event.

You might feel:

Anxious	Angry	Nervous
Afraid	Depressed	Numb

Alone	Helpless	Worried
Ambivalent	Frustrated	

All these feelings are expected if you or someone you love has a serious illness. You might also worry about telling your employer that you have cancer or about paying your medical bills. You might worry about how your family relationships might change, about the effect of cancer treatment in your body, or if you will continue to be sexually attractive. You might worry that the cancer will come back. We are here to support you.

## **Ways to cope with your feelings**

- **Talk with others.** When people try to protect each other by hiding their feelings, they can feel very alone. Talking can help the people around you know what you're thinking. It might help to talk about your feelings with someone you trust. You can choose your spouse or partner, a close friend, family member, chaplain, nurse, social worker, or psychologist. You might also find it helpful to talk to someone who is going through radiation therapy, or a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, you have a chance to speak with former patients and caregivers. To learn more about this service, please call 212-639-5007.
- **Join a support group.** Meeting other people with cancer will give you a chance to talk about your feelings and listening to other people who have same concerns. You will learn how others cope with their cancer and treatment. Your doctor, nurse, or social worker can tell you about the support groups

you might be interested in.

- Try relaxation and meditation. You can try thinking of yourself in a favorite place while breathing slowly and paying attention to each breath or listening to a soothing music or sound. For some people, praying is another way of meditation. These kinds of activities can help you feel relaxed and calm.
- Exercise. Many people find that light activity, such as walking, biking, yoga, or water aerobics, helps them feel better. Talk with your doctor or nurse about types of exercise you can do.

We all have our own way of dealing with difficult situations. Generally, we use whatever has worked for us in the past. However, sometimes this isn't enough. We encourage you to speak with your doctor, nurse, or social worker about your concerns.

## **After Your Treatment**

At the end of treatment, you will be told how often to see your doctors for follow-up appointments. Please be sure to keep your follow-up appointments with your radiation oncologist. He or she will evaluate your response to treatment. You might have blood tests, x-rays, scans, and biopsies during these visits. Before coming, write down your questions and concerns. Bring this and a list of all your medications with you. You can also call your doctor or nurse at any time after your treatment is completed, or in between follow-up appointments, if you have any questions or concerns.

### **Late side effects**



Keeping your follow-up appointments will help us identify any late effects of treatment.

Radiation can cause permanent side effects in the bladder and bowel. Many people aren't aware of these changes and don't have any symptoms. However, some people will develop symptoms 4 months or more after treatment. These might be similar to the ones you had during treatment. However, there's a very small chance that you might develop others. These are very rare but can include:

- Narrowing of the opening of the bladder
- Loss of urinary control
- Blood in the urine
- Rectal bleeding

These symptoms can come and go over time. They can also be persistent and chronic. Even if you don't develop any late side effects, remember that the tissues in your bladder and rectum have been affected by the treatment. Call your radiation oncologist if you:

- Have any new urinary, bladder, or bowel symptoms.
- Need to have a colonoscopy. Avoid having a colonoscopy for the first year after treatment.
- Need any type of rectal procedure.

If you took vitamins before your treatment, you can re-start taking them 1 month after your treatment is done. If you would

like to speak with a dietitian about your diet or supplements, please ask your nurse to arrange this.

## **Resources**

Many of the resources listed in this guide can be found on the Internet. If you don't have a computer or if you don't know how to use the Internet, check with your local public library or community center.

### **MSK support services**

#### **Counseling Center**

646-888-0200

Many people find that counseling helps them. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed.

#### **Integrative Medicine Service**

646-888-0800

MSK's Integrative Medicine Service offers patients many services to complement traditional medical care. These include music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

#### **Male Sexual & Reproductive Medicine Program**

646-888-6024

This program helps male patients who are dealing with cancer-related sexual health challenges, including erectile dysfunction.

#### **Nutrition Services**

212-639-7312

MSK's Nutrition Service offers nutritional counseling with one of our certified dietitians. Your dietitian will review your current eating habits and give advice on what to eat during and after treatment.

### **Patient and Caregiver Support Program**

212-639-5007

You may find it comforting to talk with a cancer survivor or caregiver who has been through a similar treatment. Through our Patient and Caregiver Support Program, we're able to offer you a chance to talk with former patients and caregivers.

### **Resources for Life After Cancer (RLAC) Program**

646-888-8106

At MSK, care doesn't end after active treatment. The RLAC Program is for patients and their families who have finished treatment. This program has many services, including seminars, workshops, support groups, counseling on life after treatment, and help with insurance and employment issues.

### **Tobacco Treatment Program**

212-610-0507

If you want to quit smoking, MSK has specialists who can help. Call for more information.

### **External resources**

#### **American Cancer Society (ACS)**

[www.cancer.org](http://www.cancer.org)

800-ACS-2345 (800-227-2345)

Offers a variety of information and services, including Hope

Lodge, a free place for patients and caregivers to stay during cancer treatment.

## **American Society for Therapeutic Radiology and Oncology**

[www.rtanswers.org](http://www.rtanswers.org)

800-962-7876

A group of radiation oncology professionals that specializes in treating patients with radiation therapy. Provides detailed information on treating cancer with radiation and contact information for radiation oncologists in your area.

## **CancerCare**

[www.cancer.org](http://www.cancer.org)

800-813-HOPE (800-813-4673)

275 Seventh Avenue (Between West 25<sup>th</sup> & 26<sup>th</sup> Streets)

New York, NY 10001

Provides counseling, support groups, educational workshops, publications, and financial assistance.

## **Cancer Support Community**

[www.cancersupportcommunity.org](http://www.cancersupportcommunity.org)

Provides support and education to people affected by cancer.

## **National Cancer Institute (NCI) Cancer Information Service**

[www.cancer.gov](http://www.cancer.gov)

800-4-CANCER (800-422-6237)

Provides education and support to people with cancer and their families. Publications are available online and in print.

# National Alliance of State Prostate Cancer Coalitions (NASPCC)

[www.naspcc.org](http://www.naspcc.org)

## Prostate Cancer Foundation

[www.pcf.org](http://www.pcf.org)

## US Too International Prostate Cancer Education and Support Network

[www.ustoo.org](http://www.ustoo.org)

## Contact Information

If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at the numbers listed below.

Radiation oncologist:

\_\_\_\_\_

Phone number: \_\_\_\_\_

Radiation nurse: \_\_\_\_\_

Phone number: \_\_\_\_\_

After 5:00 PM, during the weekend, and on holidays, call -  
\_\_\_\_\_ and ask for the radiation oncologist on call.  
If there's no number listed, or you're not sure, call 212-639-  
2000.

## Questions to Ask Your Doctor or Nurse

We recommend that you write down the questions to ask during your visit with your doctor or nurse. Write down the answers during your appointment so that you can review them again later.

Examples of questions you can ask are written below.

What kind of radiation therapy will I get?

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How many treatments will I get?

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What side effects should I expect during radiation therapy?

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Will these side effects go away after radiation therapy is finished?

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What kind of late side effects should I expect after radiation treatment?

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For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

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About Your MSK Precise™ Prostate Program - Last updated on December 17, 2018

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