This information explains a treatment for prostate cancer called active surveillance.

Not all prostate cancers are the same. Some may grow quickly, while others grow slowly and are less likely to spread to other parts of your body (metastasize). If you have a slow-growing cancer, your doctor may recommend active surveillance for your treatment.

About Active Surveillance

Active surveillance is a form of treatment for prostate cancer. It’s not the same as receiving no treatment.

During active surveillance, your healthcare team will monitor your prostate cancer closely. You will have tests every few months to watch for any changes in your prostate. For more information about the schedule for testing, see the section called “Active surveillance schedule.”

This treatment option helps men with slow-growing prostate cancer avoid the possible side effects of surgery and radiation therapy, such as urinary incontinence (trouble holding in your urine), rectal bleeding, and erectile dysfunction (difficulty getting or keeping an erection).

Throughout your care, you will be seen by your doctor and advanced practice provider (APP). An APP is a nurse practitioner (NP) or physician assistant (PA) that has the education and training to provide you with care under the supervision of your doctor.
If your healthcare team notice any changes in your prostate or tumor, they may recommend stopping active surveillance and starting another type of treatment, such as surgery or radiation therapy.

**When to Choose Active Surveillance**

Your doctor may recommend active surveillance if you have:

- A small tumor that’s only in your prostate
- A slow-growing cancer
- A low risk that the cancer will grow or spread
- A tumor that isn’t life threatening

You will have a prostate biopsy and a magnetic resonance imaging (MRI) scan of your prostate to check for these. You may also have genetic testing.

Your healthcare team will use the results from all of these tests to see if active surveillance is the right treatment option for you.

**Prostate biopsy**

During a prostate biopsy, small samples of tissue are taken from your prostate gland. The samples are examined under a microscope, checked for signs of cancer, and given a Gleason score. A Gleason score lets your healthcare provider know how likely it is that your cancer will spread.

**Prostate MRI**

An MRI uses strong magnetic fields to produce pictures of the inside of your body. It’s used to see the type, size, and location of tumors. A prostate MRI provides the best look at your entire prostate and can help your healthcare provider see areas of the gland that might not have been sampled during your biopsy. Your MRI may show some changes to your prostate over time. This is normal. Your healthcare provider will look for any major changes. Depending on the results of your prostate MRI, your doctor may ask you to have a second prostate biopsy.
Prostate-specific antigen (PSA) blood test

You will also have a PSA blood test done. PSA is a normal protein made by your prostate gland. PSA blood tests are done to check your levels to see if your tumor is growing. Your PSA levels will go up and down during active surveillance. This is normal. Your healthcare provider will monitor your levels and look for major changes over time.

What to Expect During Active Surveillance

If you and your healthcare provider decide that active surveillance is right for you, we will enroll you in the program to closely monitor your cancer. The active surveillance program requires regular follow-up appointments. For more information about your schedule, see the section called “Active Surveillance Schedule.”

At your first appointment, you will meet with your doctor to review your test results. If you have tests done by a doctor or hospital outside of MSK, it’s very helpful to send your radiology disks, pathology slides, and copies of your laboratory test results to your doctor at Memorial Sloan Kettering (MSK) to review before your appointment.

You will also meet the rest of your healthcare team, including your APP and nurses.

Your doctor won’t be at all your follow-up appointments. Your appointments will alternate between your doctor and APP. Your follow-up appointments with your APP may be done at their clinic. Your doctor and APP will work together as part of your healthcare team. They will review your active surveillance schedule with you.
Active surveillance schedule

Here is an example of what your active surveillance schedule may look like. Additional appointments will be scheduled for you depending on your test results.

<table>
<thead>
<tr>
<th>Appointment</th>
<th>What to expect</th>
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| Your first appointment              | ● Review your test results and medical history  
                                       ● Have a physical exam  
                                       ● Meet your healthcare team |
| 3 to 6 months after your first      | ● Additional testing  
                                       *If you need to have an MRI done, wait 3 months after your prostate biopsy so that your prostate can heal. |
| appointment                        |  
| 6 months after your first appointment | ● You will find out if you’re eligible for the active surveillance program.  
                                       ● If you’re eligible, your follow-up appointments will be scheduled for you. You will have a PSA blood test and a physical exam every 6 months. |
| Every 6 months                      | ● PSA blood test  
                                       ● Physical exam |
| Every 18 months                     | ● Prostate MRI                                                                         |
| Every 3 years                       | ● Prostate biopsy                                                                         |

Emotional Effects of Active Surveillance

Men who choose active surveillance may feel nervous at some point. These feelings may come about before your appointments, after having a test done, or when your test results show something new. You may worry that your cancer is growing without you knowing. However, it’s important to remember that this is unlikely to happen. Your healthcare team will be looking for important changes to your prostate and will be monitoring your cancer closely.

Help is available for you at any time. If you would like counseling, your healthcare provider can give you a referral to see a social worker, psychiatrist, or counselor.

Your family and friends may not understand why you’re not receiving treatment for prostate cancer. You can explain to them that you have a slow-growing type
of cancer that doesn’t need to be treated with more traditional forms of cancer treatment, such as surgery. Also, it’s important to explain to them that active surveillance is a form of treatment and has been shown to be very effective to manage prostate cancers like yours.

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.