PATIENT & CAREGIVER EDUCATION

Active Surveillance for Prostate Cancer

This information explains what active surveillance is and how it can be used to treat prostate cancer.

Not all prostate cancers are the same. Some may grow quickly. Others grow slowly and are less likely to metastasize (spread) to other parts of your body. This kind of prostate cancer is low risk. If you have a prostate cancer that grows slowly, your healthcare provider 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.

This treatment helps people with slow-growing prostate cancer avoid likely side effects of surgery and radiation therapy. These side effects can include:

- Urinary incontinence, which is trouble holding in your urine pee.
- Rectal bleeding.
- Erectile dysfunction (ED) which is trouble getting or keeping an erection.

If active surveillance is the right choice for you, your urologist may refer you to the active surveillance program.

During active surveillance, your care team will monitor your prostate cancer closely. Your care team will include a urologist or an advanced practice provider (APP). Your APP will be a nurse practitioner (NP) or physician assistant (PA).

They'll have advanced education and training in prostate cancer. They will work with your urologist.

As part of active surveillance, you'll have tests every few months to look for any changes in your prostate. For more information about the schedule for testing, see the section called "Active surveillance schedule."

Your care team may notice changes in your prostate or tumor at any time during surveillance. If the cancer progresses and develops more aggressive features, they may recommend stopping active surveillance. You may be referred to consider active treatment with surgery or radiation therapy.

When to choose active surveillance

Your healthcare provider may recommend active surveillance if you have:

- A small tumor that's only in your prostate.
- Cancer that grows slowly.
- A low risk that the cancer will grow or spread.
- A tumor that is not a threat to your life.

You may also have genetic testing. Your care team will use the results from these tests to see if active surveillance is the right treatment for you.

What to expect during active surveillance

During active surveillance, you'll have tests every few months to look for any changes in your prostate. You'll also have regular follow-up visits with your active surveillance APP. They may suggest genetic or genomic testing. Genetic testing is a test to look at your genes. Genomic testing is a test to look at markers that make up a tumor. Your care team will use the results from these tests to monitor your cancer.

There are 4 parts to active surveillance monitoring:

- Prostate-specific antigen (PSA) blood testing

- Prostate magnetic resonance imaging (MRI)
- A prostate biopsy
- A digital rectal exam (DRE)

Active surveillance schedule

Here is an example of an active surveillance schedule.

Appointment type	When	What to expect
Welcome visit	When you first start active surveillance at MSK	This is your first visit in the program. You'll meet with your advanced practice provider (APP) and learn about the program.
PSA blood test and APP visit	Every 6 Months*	Get a PSA blood test. Visit with your APP to talk about your results and health.
Prostate MRI	Every 18 Months**	Get a prostate MRI.
Prostate biopsy	Every 3 Years	Get a prostate biopsy.

**If your PSA is higher than your earlier PSA results, you may need to repeat the test in 6 to 8 weeks.*

***Your PSA results may change over time, or your MRI result may look unusual. If so, we may talk with you about having your next tests earlier. We may move up the dates for your MRI, your surveillance biopsy, or both.*

Active surveillance treatments

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 take pictures of the inside of your body. It's used to see the type, size, and location of tumors.

A prostate MRI gives the best picture of your entire prostate. It can help your healthcare provider see areas of the gland that could be cancer and may need to be biopsied.

Your MRI may also show some changes to your prostate over time. This is normal. Your healthcare provider will look for any major changes during your routine surveillance MRI. Depending on your results, they may ask you to have an early prostate biopsy.

Prostate-specific antigen (PSA) blood test

You'll have regular PSA blood testing done. PSA is a normal protein made by your prostate gland. PSA blood tests are done to check your levels to see if your cancer is growing or changing.

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.

Digital rectal exam (DRE)

You will also have a digital rectal exam (DRE) during your regular surveillance visits. Your healthcare provider will insert a gloved finger into your rectum (the bottom section of your colon). They will examine the end of your prostate for any nodules. These are growths of tissue that are not normal and could be cancer.

Your healthcare provider will compare these results to your earlier DREs to look for any changes. DRE is a useful tool for deciding the next steps in active surveillance.

Telemedicine visits

You'll have a visit with your APP every 6 months. They may be telemedicine and in person visits. Telemedicine visits connect you to your healthcare provider through your computer or smart device (smartphone or tablet). To learn more about telemedicine visits at MSK, read *Telemedicine Visits at MSK* (www.mskcc.org/pe/telemedicine_visits_msk).

Local PSA testing

MSK has locations in New York and New Jersey. You can have your PSA blood tests every 6 months at a *Our Locations* (www.mskcc.org/locations) that's easiest for you. To schedule your next PSA test at an MSK regional site, talk with your care coordinator or office coordinator.

Managing your feelings

People who choose active surveillance may feel nervous at some point. Often, you have these feelings before your appointments, after a test, or when your test results show something new.

We understand you may be worried about living with cancer. Maybe you're afraid you will not know if the cancer is growing. It's important to remember this is not likely. Your care team will be looking for important changes to your prostate and will be monitoring you closely.

MSK is here to help 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 think you're not getting treatment and do not understand why. You can tell them you have a kind of cancer that grows slowly. It does not need the usual kinds of cancer treatment, such as surgery. It's also important to explain that active surveillance is a form of treatment. Research shows it's very good for managing the kind of prostate cancer you have.

Support services

During active surveillance, you may be referred to one or more programs. These programs can help you manage your symptoms, and the emotional and financial impact of cancer treatment. These programs include:

- *Male Sexual & Reproductive Medicine Program* (www.mskcc.org/cancer-care/diagnosis-treatment/symptom-management/sexual-health-fertility/health/male-medicine)
- *Memorial Sloan Kettering Counseling Center* (www.mskcc.org/locations/directory/msk-counseling)
- *Cancer Patient Financial Assistance Programs* (www.mskcc.org/insurance-assistance/assistance)

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

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

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