A pilot randomised controlled trial of a multimodal supportive care (ThriverCare) intervention for managing unmet supportive care needs in men with metastatic prostate cancer on hormonal treatment and their partner/caregivers

Paterson, Catherine; Primeau, Charlotte; Nabi, Ghulam

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Contents

What is the prostate? ......................................................................................... 3
Facts and figures .............................................................................................. 4
How can I help myself? ................................................................................. 6
Who can help? ................................................................................................. 8
Lifestyle and Nutrition ..................................................................................... 10
Implementing a Plan for Success ................................................................. 11
Why is a healthy lifestyle important? ............................................................... 17
How will prostate cancer affect my sex life? ................................................. 21
What can I do to help myself if I have urinary symptoms? ......................... 29
What can I do to help myself if I have bowel symptoms? ............................. 32
How will hormone therapy affect me? .......................................................... 33
Further support and information .................................................................... 35
What is the prostate?

Only men have a prostate gland. The prostate is usually the size and shape of a walnut and naturally grows bigger as you get older. The normal size of a prostate is around 40g. It sits underneath the bladder and surrounds the urethra – the tube men urinate and ejaculate through.

It’s main job is to help make semen – the fluid that carries sperm.
Facts and figures

Below are some of the very basic facts and figures about prostate cancer.

Across the UK

- Prostate cancer is the most common cancer in men.
- Over 47,000 men are diagnosed with prostate cancer every year – that's 130 men every day.
- Every hour one man dies from prostate cancer – that's more than 10,800 men every year.
- 1 in 8 men will get prostate cancer in their lifetime.
- Over 330,000 men are living with and after prostate cancer.

In Scotland

- More than 3,000 men are diagnosed with prostate cancer every year in Scotland.
- More than 850 men die from prostate cancer every year in Scotland.

In England

- Almost 40,000 men are diagnosed with prostate cancer every year in England.
- More than 9,500 men die from prostate cancer every year in England.
In Wales

- More than 2,500 men are diagnosed with prostate cancer every year in Wales.
- More than 600 men die every year from prostate cancer in Wales.

In Northern Ireland

- More than 1,000 men are diagnosed with prostate cancer every year in Northern Ireland.
- More than 250 men die every year from prostate cancer in Northern Ireland.
How can I help myself?

Everyone has their own way of dealing with prostate cancer, but you may find some of the following suggestions helpful.

**Look into your treatment options**
Find out about the different types of treatment available to you. Bring a list of questions to your doctor or nurse. And ask about any side effects so you know what to expect and how to manage them. This will help you decide what’s right for you.

“*Remember, your Prostate Cancer Care Team are here to help and support you.*”

**Talk to someone**
Unload what’s going on in your head – find someone you can talk to. It could be someone close, or someone trained to listen, like a counsellor or your medical team. Your GP, nurse or other health professionals involved in your care should be able to answer any questions or concerns you might have.

**Set yourself some goals**
Set yourself goals and things to look forward to – even if they’re just for the next few weeks or months. It might be doing more exercise, gardening or getting ready for a holiday.

**Look after yourself**
Take time out to look after yourself. When you feel up to it, learn some techniques to manage stress and to relax – like listening to music or breathing exercises.
Eat a healthy, balanced diet
Eating well is good for your general health and lowers your risk of other health problems. There is also some evidence that certain foods may slow down the growth of prostate cancer or lower the risk of it coming back after treatment.

Be as active as you can
Keeping active can improve your physical strength and fitness, and can lift your mood. Research shows that physical activity can help to slow down the growth of prostate cancer. It can also help you stay a healthy weight, which may be important for lowering your risk of advanced prostate cancer. Even if you don’t feel able to do a lot of physical activity, a small amount will still help – take things at your own pace and don’t overdo it.
Who can help?

**Your Specialist Prostate Cancer Nurses**
Your Specialist Nurses can answer your questions and explain your diagnosis and treatment options. They’ve got time to listen to any concerns you or those close to you have in confidence.

**Prostate Cancer Specialist Nurse Team, Ninewells Hospital:**
01382 660111, extension 35138.

**Your medical team**
It could be useful to speak to your nurse, doctor, GP or anyone in your medical team. They can explain your diagnosis, treatment and side effects, listen to your concerns, and put you in touch with others who can help.

**Trained counsellors**
Counsellors are trained to listen and can help you to find your own ways to deal with things. Many hospitals have counsellors or psychologists who specialise in helping people with cancer. Your GP may also be able to refer you to a counsellor, or you can see a private counsellor. To find out more, contact the British association for Counselling & Psychotherapy.

http://www.bacp.co.uk/

**Local support groups**
You have local support groups both in Dundee and Perth, where men get together to share their experiences – you can ask questions, offload worries and know that someone understands what you’re going through. Some groups have been set up by local health
professionals, others by men themselves. Many also welcome partners, friends and relatives.

**Online community**
Prostate Cancer UK online community is a place where you can talk about whatever's on your mind – your questions, your ups and your downs. Anyone can ask a question or share an experience. It’s a place to deal with prostate cancer together.

http://community.prostatecanceruk.org/

**Spiritual support**
You might begin to think more about spiritual beliefs as a result of having prostate cancer. It’s important that you get spiritual support if you need it. This could be from your friends or family, or from your religious leader or faith community.
Lifestyle and Nutrition

Studies have shown that lifestyle — especially nutrition and exercise — has a significant influence in prostate cancer prevention and treatment.

Treatment options for prostate cancer are more effective than ever before. Yet, for many men, the diagnosis and treatment of cancer brings to their attention the need to change their diet and exercise behaviors. Men are beginning to realise that a healthy diet and regular exercise can be an important step toward preventing other diseases that commonly occur with aging, including heart disease and diabetes.

Exciting new data suggest that this same approach may also slow prostate cancer growth.

You may have had prostate cancer, but now you are in charge of your life, adopting new healthy habits and enjoying each day to its fullest. As a prostate cancer thriver, you can use the latest knowledge about nutrition and exercise to improve your overall health and quality of life. Your diagnosis of prostate cancer can be the beginning of a healthier lifestyle.
Implementing a Plan for Success

It is critical to focus on the benefits of a healthy diet and regular exercise. We describe how a healthy diet and regular physical activity may help you manage the effects of prostate cancer and its treatment.

1 Making a commitment to change is a first step in successful thrivership
2 Effective change can only be accomplished in steps
3 Learn from mistakes made over time and use the gains to move forward
4 Reduce stress: live a balanced life and take care of yourself
5 Control your environment: plan ahead to eat healthy and minimize stress
6 Monitor your action: track your behaviours to help chart your progress
7 Establish a support system: maintain healthy relationships with people who understand what you are going through

We don’t recommend any set diet or exercise programme. Instead, we suggest ways to improve your overall health, including some changes that might help with your prostate cancer.

1 Lose body fat: eat fewer calories per day than you burn
2 Maintain muscle mass: increase protein intake and exercise
3 Exercise every day: combine cardio-fitness and weight lifting
4 Eat fruits and vegetables: recommended nine servings a day
Building Strong Muscles
Increased protein intake at the upper end of the range recommended by the Institute of Medicine (10% to 35% of total calories) has been shown, in several clinical studies, to reduce hunger and improve lean body mass during weight loss. Exercising for durations of approximately one hour each day is an excellent strategy for weight maintenance, while progressive resistance training has been shown to build muscle, increase resting metabolism, improve glucose tolerance, increase strength, muscle function, and aerobic fitness, contribute to increased bone density, and improve quality of life.

Note also that maintaining muscle mass can have a positive impact on metabolism. A pound of muscle burns 14 calories for every 3 calories burned by a pound of fat. Thus, the number of calories burned per day is at least in part determined by the ratio of muscle to fat.

Avoiding the muscle loss common in aging, inactivity, and hormonal therapies and/or gaining muscle through increased protein intake and exercise can help you achieve and maintain a healthy body weight, giving you more energy and an ability to enjoy active sports more fully.

Restoring a Healthful Caloric Balance
Concentrating on fruits and vegetables can pay dividends immediately. The average vegetable serving is only 50 calories and the average fruit serving is only 70 calories, while the average serving of refined carbohydrates such as potatoes, rice, pasta, bread, bagels, or cakes is more than 200 calories. Considering that you have to run 3 miles in 30 minutes to burn off the calories in a medium potato and bicycle 8 miles in 30 minutes to burn off the calories in a donut,
minimizing your caloric intake from these types of refined carbohydrates can help you maximize the effects of regular exercise.

1 Avoiding muscle loss and/or gaining muscle through increased protein intake and exercise can help in achieving and maintaining a healthy body weight.
2 Increase intake of fruits and vegetables and minimize caloric intake from refined carbohydrates.

Adopting a Healthy Approach
It is a lot easier than you think to incorporate good nutrition and exercise into your everyday routine.

The key is to recognise that implementing dietary changes does not mean giving up things you love and that exercising does not mean spending additional time that you don’t have. The key is to see your life in a new way — with a new set of lifestyle changes all designed to turn you from a prostate cancer survivor into a prostate cancer thriver.

Lose the body fat
Losing fat is a simple equation: eat fewer calories per day than you burn and increase your activity levels. This can be done by changing your dietary pattern away from high fat foods, sweets, fast foods, and savory snacks and eating more fruits and vegetables, low-fat proteins from poultry, fish, and seafood, and fewer refined carbohydrates.
Here are some practical examples of places you can cut calories:

- **replace** high-fat red meats for fish and white meat (turkey or chicken)
- **replace** rice, pasta, potato, and breads for fruits and vegetables
- **replace** ice creams, cakes, pastries for mixed berries and fruits
- **replace** cheese and full-fat dairy products for low-fat dairy and soy products
- **replace** soft drinks for water.

**Maintain muscle mass**

In order to maintain muscle mass as you age, it is important to take in adequate amounts of protein and to exercise muscles adequately to maintain them. As you age, the body’s metabolism slows down due in large part to the decrease in muscle mass that is seen with inactivity. It is harder to build muscle as you age and it breaks down more quickly with inactivity than in younger individuals. However, it is possible to build and maintain muscle mass well into your 90s by simply eating adequate protein and doing muscle building exercises.

Also, building muscle mass is one of the most effective ways to change your metabolism: build 10 extra pounds of muscle, and you will burn an extra 140 calories per day. However, to maintain that muscle you need to do more than simply provide the extra 140 calories per 10 pounds; you must also supply the right amount of the right kinds of protein to nourish the muscles.

Your lean body mass determines how much protein you need each day. In fact, it’s about twice what was recommended by government advisory groups until recently, when the Institute of Medicine broadened its recommendation to 10% to 35% of calorie intake. It
takes about 1 gram of protein per pound of lean body mass or 29% of resting energy expenditure, which is the number of calories you burn at rest to build and maintain muscle.

For example, a typical man with 150 pounds of lean body mass will burn 2100 calories at rest per day and will need about 150 grams of protein per day.

Here is a list of some low-fat, high protein choices you can make:

- 7 egg whites: 25 g protein and 115 calories
- Chicken breast (4 oz): 25 g protein and 140 calories
- Ocean-caught fish (4 oz): 25 g protein and 140 calories
- Canned tuna in water (3.5 oz): 25 g protein and 110 calories

**Exercise every day**

Regular exercise will help you lose fat, build muscle, and improve your outlook overall. A combination of cardio-fitness and weight lifting will not only help to round out the benefits, but the variety will help make it more interesting. This is key to sticking to a regular routine. Choose an exercise you like and/or one that you can do with friends to make it more enjoyable. For example, walk 30 minutes every day at a comfortable pace and lift weights three times each week, alternating different body parts and allowing a day of rest between weight-lifting days.
If you work on your chest muscles and triceps one day, switch to your back muscles and biceps on the next, followed by leg muscles and shoulders on the third day.

Most important, obtain professional instruction on how to perform exercises for each of these muscle groups and consult with your doctor before starting the exercise program to be sure it is safe for you. A certified fitness instructor, exercise physiologist, or physical therapist can provide exercise instruction and ensure that you are maximizing the benefit from your workouts.

**Ask you Nurse/Doctor to refer MOVE MORE Program, to enable you to have your own personalised programme.**

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**Eat fruits and vegetables**

We recommend eating 9 servings of fruits and vegetables every day, equivalent to about one cup or 100 grams per serving. Why is this important? A typical serving of vegetables has about 50 calories and a typical serving of fruit has about 70 calories, making them some of the least calorie-dense food ounce per ounce. So by simply increasing the amount of fruits and vegetables you eat each day, you will be decreasing the number of calories per bite of food even while packing in high levels of nutrients. Also, fruits and vegetables are rich in fibre, so five servings of fruit and vegetables can easily get you to the recommended 25 grams of fibre per day.
Why is a healthy lifestyle important?

A healthy lifestyle can give you more control over your health and help you to improve it. Lots of things can affect your health, including:
- body weight
- diet
- physical activity
- alcohol
- smoking.

Alcohol
We don’t know if alcohol has any specific effect on men with prostate cancer. But we do know that drinking too much alcohol can make you put on weight and causes health problems such as heart disease and some other cancers. The government suggests that men should not regularly drink more than three to four units of alcohol a day.

How many units of alcohol are in a drink?
- A pint of lager, beer or cider contains 2-3 units.
- A 175ml glass of wine contains about 2 units.
- A 25ml measure of 40 per cent single spirit with mixer contains 1 unit.

If you have urinary problems after treatment, try to drink less alcohol. Alcohol can irritate the bladder and make urinary problems worse.

Smoking
Smoking increases the risk of health problems such as heart disease, stroke and some other cancers. It may also be harmful for men with prostate cancer. Some studies suggest that smoking may increase the chance that prostate cancer will grow and spread to other parts of
the body (advanced prostate cancer). The more you smoke, the greater the risk. But if you stop smoking, your risk should start to drop – and after 10 years it could be as low as men who have never smoked.

Stopping smoking can also help to reduce the side effects of treatment for prostate cancer. For example, you may be less likely to get certain urinary problems after radiotherapy if you don’t smoke. Smoking also increases your risk of bone thinning. If you’re having hormone therapy for your prostate cancer you’re already at risk of bone thinning, but stopping smoking will help reduce your overall risk.

Speak to your healthcare team about Smoking Cessation service.

Heart disease and diabetes
Hormone therapy may increase your risk of heart disease and diabetes. A healthy lifestyle, including a healthy diet and regular physical activity, can help reduce your risk of heart disease and diabetes.
Bone thinning

Long-term hormone therapy can cause your bones to gradually get thinner and weaker. Severe bone thinning can lead to a condition called osteoporosis, which increases your risk of broken bones (fractures). A number of lifestyle changes may help to reduce your risk of bone thinning.

Calcium and vitamin D are important for strong bones. You can get vitamin D from eating oily fish, such as salmon, mackerel and sardines, or foods with added vitamin D. But most of your vitamin D is made inside the body when your skin is exposed to sunlight. You may need to take calcium and vitamin D supplements to help reduce your risk of bone thinning.

Drinking lots of alcohol can increase your risk of osteoporosis, so try not to drink more than the recommended amount. Smoking can also increase the risk of bone thinning.

Hot flushes

Hot flushes are a common side effect of hormone therapy. Staying a healthy weight may help you manage hot flushes. Try to cut down on spicy foods, alcohol and drinks that contain caffeine, such as tea and coffee. Some men use herbal remedies, such as sage tea or supplements containing black cohosh, to help manage their hot flushes. But there is no scientific evidence that these are effective and
some, including black cohosh, may be harmful. Speak to your doctor before taking any herbal remedies.

**Extreme tiredness (fatigue)**
Some treatments for prostate cancer, including hormone therapy, radiotherapy and chemotherapy, can cause extreme tiredness. Light to moderate exercise, such as walking or swimming, can make you feel more awake. And doing this type of exercise along with strength training, such as lifting light weights, may be even more effective.

If your treatment is making you feel tired, you may find it difficult to be active. Try to plan activities at times when you usually have more energy. If you feel particularly tired, just do gentle exercise for a short time and take lots of breaks. You can even exercise from your chair or bed – for example, use a resistance band to help you lift and stretch your arms and legs.
How will prostate cancer affect my sex life?
Prostate cancer can affect your sex life in three overlapping ways - your mind, body and relationships. Finding out you have cancer can make you feel down or anxious, changing your feelings about sex. Treatment can damage the nerves and blood supply needed for erections. Hormone therapy can affect your desire for sex. Coping with cancer can change your close relationships, or your thoughts about starting one.

Some common worries

- You can’t pass on cancer through sexual activity.
- Having sex will not affect your cancer or the success of your treatment.
- Having sex has no effect on the chances of your cancer coming back.
- Erections are still safe even if you have a catheter in.
What causes erection problems?
When you’re sexually aroused your brain sends signals to the nerves in your penis. The nerves increase the blood flow to your penis, making it stiff and giving you an erection. Anything that interferes with your nerves, blood supply or your sexual desire (libido) can make it difficult to get or keep an erection. You may hear this called erectile dysfunction or impotence. Many men get problems with their erections and this is more likely to happen as men get older.

Treatments for prostate cancer
Some treatments for prostate cancer can damage the nerves and blood vessels that are needed for an erection. Treatments that can have this effect include surgery, external beam radiotherapy, brachytherapy, high intensity focused ultrasound and cryotherapy.

All types of hormone therapy can cause erection problems. Having less interest in sex can also play a part.

Treatments for erection problems
Many of the treatments for erection problems work by improving the flow of blood to the penis. There are a number of treatments available.

Tablets
A group of drugs called phosphodiesterase type 5 (PDE5) inhibitors can help men get erections. These include:

- sildenafil (generic sildenafil or Viagra®)
- tadalafil (Cialis®)
- vardenafil (Levitra®)
- avanafil (Spedra®)
PDE5 tablets don’t cause spontaneous erections - they only work if you are sexually aroused. They normally take 30 minutes to an hour before they start to work.

Sildenafil, vardenafil and avanafil are taken when needed and will work for four to six hours. This means you’ll be able to get an erection if you’re sexually aroused in that time.

Tadalafil can work for up to 36 hours, so it allows you to have more spontaneous sexual activity. Your doctor may suggest you take a low-dose tablet (5mg) every day.

**Don’t take PDE5 tablets with nitrates:** Nitrates are usually used to treat heart problems and are used in some recreational drugs (called poppers). If you have a heart problem or you’re taking nitrates discuss other ways to treat your erection problems with your doctor or specialist.

**Injections**

Erection problems can also be treated with a drug called alprostadil (Caverject® or Viridal Duo®) injected into the side of your penis. An injection may sound alarming but many men find it isn’t that bad and doesn’t hurt. The first time you use the drug a nurse or doctor in the clinic will show you how to inject into your penis with a very fine needle.

The drug causes the penis to fill with blood and you’ll get an erection within 5 to 10 minutes. The erection will normally last for 30 to 40 minutes.
**Pellets or cream**
The drug alprostadil is also available as a small pellet, called MUSE®, and as a cream called Vitaros®. These may not work as well as the injections but are a good alternative if you don’t like the idea of an injection. You use an applicator to insert the pellet into the opening or ‘eye’ of the penis.

You or your partner can then massage your penis to help absorb the drug. You’ll get an erection within 5 to 10 minutes, which will last between 30 and 60 minutes.

The cream may take a little longer to work. The cream is put onto the tip and ‘eye’ of the penis and gently rubbed in.

**Vacuum pump**
You use a pump and a plastic cylinder to create a vacuum, which makes blood flow into your penis to make it hard. You then slip a constriction ring from the end of the cylinder onto the base of your penis. This stops most of the blood escaping when you remove the vacuum pump. You shouldn't wear the ring for longer than 30 minutes at a time.

The vacuum pump may help men get an erection hard enough for penetration. It may also help maintain the length and thickness of the penis if used daily within four to eight weeks after surgery.

**Implant**
You have an operation to put an implant inside your penis. Implants are usually only recommended if other treatments haven’t worked. There are two main types:
- Semi-rigid rods that keep your penis fairly firm all the time but allow it to be bent down when you don’t want an erection.

- An inflatable implant in your penis and a pump in your scrotum. When you squeeze the pump the implant fills with fluid (saline) to make the penis hard. Your erection will last for as long as the implant is inflated.

**Sex therapy**
Because getting an erection also relies on your thoughts and feelings, tackling any worries or relationship issues as well as having medical treatment for erection problems, often works well.

**Getting treatment and support**
Speak to your GP or doctor or nurse at the hospital. Men with prostate cancer can get free medical treatment for erection problems or other sexual problems on the NHS. Your GP or doctor or nurse at the hospital can prescribe treatment if you want help getting erections for masturbation or sex.

**Talking about sex**
It can be tricky talking about sex, but talking to your doctor or nurse will mean you can get treatment and support. It can also help you feel better and more in control.

**Changes in penis size**
Some men find that their penis is shorter after surgery (radical prostatectomy). This happens because of changes to the tissue inside the penis. Other treatment such as hormone therapy with radiotherapy may also cause changes to the size of your penis.
Encouraging blood flow to the penis after surgery may improve erections and prevent your penis becoming smaller. In particular, using a vacuum pump on its own or with PDE5 tablets may help maintain your penis size and improve erections.

**Changes to orgasm and ejaculation**

After prostate cancer treatment you will still have feeling in your penis and you should still be able to have an orgasm, but this may feel different from before.

After surgery you will no longer ejaculate when you orgasm, as the prostate and seminal vesicles, which make some of the fluid in the semen, are removed during the operation. Instead you may have a 'dry orgasm' where you feel the sensation of orgasm but don't ejaculate any semen. Occasionally, you might release a small amount of liquid from the tip of your penis during orgasm, which may be fluid from glands lining the urethra.

If you've had other treatments, you may produce less semen during and after treatment. Some men on hormone therapy say their orgasms feel less intense.

If you've had surgery for an enlarged prostate called a called TURP (transurethral resection of the prostate) or radiotherapy you may get retrograde ejaculation. This is when you orgasm and the semen doesn't come out straightaway, but is passed out of the body when you next urinate. It isn't harmful and shouldn't affect your enjoyment of sex but it may feel quite different to the orgasms you're used to.

Some men leak urine when they orgasm, or feel pain. Others find they don't last as long during sex and reach orgasm quite quickly.
Your thoughts and feelings
If your ability to get erections and your experience of sex have changed then this can have a big impact on you. You may feel worried, unsatisfied, angry and as if you've lost a part of yourself. But there are ways to tackle these issues and find solutions that work for you (see the section on help).

Some couples find it useful to see a relationship counsellor. Help is available through Relate:

https://www.relate.org.uk/

Sex therapy is available on the NHS or privately.
Sex when you're single

Being sexually active and feeling attractive can be just as important if you are a single man. All the treatments described here are available to you if you're single - whether you want to be able to masturbate, have sex, or want to start a new relationship.

Some men worry that having problems with erections will affect their chances of having a new relationship. Fear of rejection is natural, and everyone has their own hang-ups whether they have had cancer or not. If you're single, you may want time to come to terms with any changes prostate cancer has caused for you, before you start having sex or dating.

Try talking over your worries with someone you feel comfortable with, such as a friend. Counselling or sex therapy may also help if you would prefer to talk to someone you don't know.
What can I do to help myself if I have urinary symptoms?

Sometimes men can experience the following symptoms, before, during or after treatment, including:

- bladder irritation
- needing to urinate more often (urinary frequency)
- a sudden urge to urinate (urinary urgency)
- difficulty urinating
- Some men can also leak urine

**Lifestyle changes**

Urinary problems can affect your self-esteem and independence, as well as your work, social and sex life.

Making some changes to your lifestyle can help, and there are some practical steps that can make things easier.

- Try to drink plenty of fluids, but cut down on fizzy drinks, alcohol, tea and coffee as these may irritate the bladder
- Do regular pelvic floor muscle exercises can help strengthen the muscles that control when you urinate.
- Try to stay a healthy weight. Being overweight can put pressure on your bladder and pelvic floor muscles.
- If you smoke, try to stop. Smoking can cause coughing which puts pressure on your pelvic floor muscles. See smoking
cessation service for more information about stopping smoking

- Plan ahead when you go out. For example, find out where there are public toilets before leaving home.

- Pack a bag with extra pads, underwear and wet wipes. Some men also find it useful to carry a screw-top container in case they can’t find a toilet.

- Get an Urgent Toilet Card to help make it easier to ask for urgent access to a toilet.

- Disability Rights UK runs a National Key Scheme for anyone who needs access to locked public toilets across the UK because of a disability or health condition.

- If you often need to use the toilet at night, leave a light on in case you’re in a hurry, or keep a container near your bed.

- Drink plenty of fluids (1.5-2 litres, or 3-4 pints a day), but try to avoid fizzy drinks, drinks containing caffeine – such as tea,
coffee and cola – and alcohol, as these can irritate the bladder.

- Some men find that drinking cranberry juice helps. But you should avoid cranberry juice if you’re taking warfarin to thin your blood.
- Drugs called anti-cholinergics can help to reduce frequency, urgency and leaks.
- You may also need to urinate more often at night (nocturia). If this happens, it might help to drink less in the two hours before you go to bed.

**Urine retention**

Some men can still urinate a little, but can’t empty their bladder fully – this is known as urine retention. The first signs often include:

- leaking urine at night
- feeling that your abdomen (stomach area) is swollen
- feeling that you’re not emptying your bladder fully
- a weak flow when you urinate.

Tell your doctor or nurse if you get any of these symptoms. Urine retention is usually painless, but the pressure of the urine can cause the bladder muscles to slowly stretch and become weaker. Treatments for chronic urine retention include: a catheter to drain urine from the bladder, drugs (alpha blockers or 5-alpha-reductase inhibitors), surgery to widen the urethra or the opening of the bladder.
What can I do to help myself if I have bowel symptoms?

Some prostate cancer treatments can cause bowel symptoms in men (in particular radiotherapy). Such symptoms can include:

- loose and watery bowel movements (diarrhoea)
- passing more wind than usual
- needing to go to the toilet more often, or having to rush to the toilet
- feeling an urge to have a bowel movement, but then not being able to go
- a feeling that your bowels haven’t emptied properly
- pain in the stomach area (abdomen) or back passage bleeding from the back passage – this is rare.

If you are experiencing new bowel symptoms it is important for you to tell your doctor or nurse. There are a number of practical life styles changes that can help if you are experiencing bowel symptoms:

- Drink plenty of liquid up to 1.5 to 2 litres a day to replace lost fluid.
- Avoid coffee and citrus fruits (if you have loose stool)
- Skin care at back passage: use unscented baby wipes instead of toilet paper to wipe yourself after you’ve been to the toilet, advice to have a warm bath to help soothe pain and help with healing, pat the area dry with a soft towel after a shower or bath – don’t rub.
- Applying Vaseline around the back passage can help.
- Avoid wearing tight trousers or underwear. Cotton underwear will help to keep the area ventilated.
- Advice on gentle exercise (if able, brisk walking for at least 30 minutes, three times per week), is conducive to a more normal bowel routine.
- Eat food rich in fibre such as: fruit, vegetables, nuts, seeds, pulses, and wholemeal bread (to avoid constipation).

**How will hormone therapy affect me?**

Hot flushes are a common side effect of hormone therapy. They can be similar to the hot flushes women get when they're going through the menopause. They may happen suddenly without warning or they may be triggered by stress, a hot drink or a change in the temperature around you.

Hot flushes can vary from a few seconds of feeling overheated to a few hours of sweating that can stop you from sleeping or cause discomfort. Some men may not be worried by them, but others find them very disruptive and difficult to deal with. If your hot flushes are affecting your everyday life, speak to your doctor or nurse.

**Breast swelling and tenderness**

Hormone therapy may cause swelling (gynaecomastia) and tenderness in the chest area. The amount of swelling can vary from a small amount of swelling to a more noticeably enlarged breast. Tenderness can affect one or both sides of the chest and can range from mild sensitivity to ongoing pain.

Breast swelling and tenderness are more common if you take anti-androgen tablets such as bicalutamide on their own. If you take oestrogen tablets, you may also get breast swelling.
Breast swelling and tenderness can make some men feel uncomfortable or embarrassed about their bodies. But there are treatments available which can help prevent or reduce these side effects.

These include:
- treating the breast area with a single dose of radiotherapy
- tablets called tamoxifen
- surgery to remove some of the breast tissue.

**Risk of heart disease and diabetes**
Hormone therapy may increase your risk of heart disease and diabetes. You may be able to help reduce your risk by:
- eating a healthy diet
- being physically active
- limiting the amount of salt you eat
- avoiding smoking
- cutting down on alcohol.

**Memory and Concentration**
Testosterone may be linked to men's memory and concentration. Some studies have suggested that hormone therapy could affect this. But we don't know for sure whether any changes are caused by the hormone therapy or by something else. For example, feeling tired, stressed or anxious can all affect your memory or ability to concentrate. And these problems can happen as you get older.

Whatever the cause, you may find problems with memory or concentration very frustrating. There are things you can do which might help.
Further support and information

**Prostate Cancer Specialist Nurses**
NHS Tayside
Ninewells
Dundee
Telephone: 01382 660111, Extension 35138

**Prostate Cancer UK**
http://prostatecanceruk.org/get-support/our-specialist-nurses
Support Nurses
Telephone: 0800 074 8383

**Healthy Working Lives, Fit for Work**
Support for returning to work after Cancer (including self-employed advice)
Telephone: 0800 019 2211

**Move More Programme (Macmillan Cancer Support)**
Macmillan Development Office
Telephone: 01382 432407

**Macmillan Cancer Support**
www.macmillan.org.uk
Telephone: 0808 808 0000

**Sexual Advice Association**
www.sda.uk.net
Telephone: 020 7486 7262
QUIT (support to stop smoking)
www.quit.org.uk
Telephone: 0800 00 22 00

Mind (information to support psychological well-being, issue such as anxiety or depression)
www.mind.org.uk
Telephone: 0300 123 3393

Relate (information, advice on relationships and sex therapy)
www.relate.org.uk
Telephone: 0300 100 1234

Samaritans (non-judgemental emotional support 24 hours per day)
www.samaritans.org.uk
Helpline: 0845 790 9090

Maggie’s Centre Dundee
https://www.maggiescentres.org/our-centres/maggies-dundee/
Telephone: 01382 632999

NHS 24
www.nhs24.com
Telephone: 08454 242424

Authors:
Dr Catherine Paterson, Senior Prostate Cancer Specialist and Researcher
Dr Charlotte Primeau, Research Assistant
Professor Ghulam Nabi, Urological Surgeon and Academic Head of Division