

eceive external radiation before Preparation, which includes IT (small gold markers) into xible linear fiducial markers the exact location of the

coverage of the prostat

^{tients} have for the free and all patients

lation are easily

lg normal activities

nd/or recreation).

symptoms upon

ms may include

Less than 10%

ng, hesitancy,

UNDERSTANDING PROSTATE CANCER OPTIONS

RADIATION ONCOLOCY



with a catheter te after waking ter the implant procedure, then resolve slowly. ^{2 ulptoms tend} to peak from 2-4 weeks with most patients urinating at pretreatment levels

Chronic urinary irritation can occur in up to 10-15% of patients. Urinary incontinence is uncommon. Up to 5% of patients can require placement of a catheter after the initial procedure, with less than 2% requiring it for longer periods (6-12 months).

Previously, rectal damage was rare and has been further reduced using SpaceOAR® hydrogel.

Of those patients with no erectile dysfunction pretreatment, impotence will occur in approximately 30%. Typically, 75% of the effected patients respond to oral medications such as Viagra®, Levitra® or Cialis®.



IMRT

IMRT allows higher external beam radiation doses to be delivered safely; higher than what was previously possible with daily treatment.

Randomized trials have shown that higher doses to the prostate are beneficial, demonstrating improved outcomes. Studies have also confirmed that patients treated with IMRT experience fewer side effects than with older techniques, despite the higher doses. IMRT for the prostate is always done with image guidance.

