



CANCER*care*[®]

Help and Hope

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Emotional Issues and Prostate Cancer

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Psychosocial Issues and Prostate Cancer



- Identify and understand what emotions men with prostate cancer, their caregivers and families, may be feeling.
- Examine why understanding these emotions is important and what underlies them.
- Discuss ways that may help a person with prostate cancer and his family/caregiver deal with those emotions.

Naming Emotions & Feelings



Depression

Anxiety

Sadness

Loss

Fear

Stigmatization

Embarrassment/Shame

Anger

Disappointment

Failure

Relief

Hope

Men, Masculinity and “Male-ness”



- Society has different expectations of men and women.
- Society and culture help determine expectations about the roles and emotions men and women have.
- What does society expect of men?
- What does society expect of men diagnosed with prostate cancer?

“The Man Box”



Strong	Rugged
Tough	Scares people
Hard	Never show weakness
Intimidating	Breadwinner
In Control	Macho
Respected	Big
Athletic	Answers to no one
Muscular	Player
Powerful	Rich
Intimidating	Highly sexual

Images of Men in Society



What does a cancer diagnosis mean for men in practical terms?



- Visits to the doctor
- Taking orders from a doctor
- Undergoing treatment--surgery, radiation, chemo, hormone
- Having genital area examined, treated
- Frequently being asked how he is feeling
- Disruption of work
- Disruption of daily routine
- Being called a cancer patient
- Receiving sympathy
- Being the cause of concern or worry by loved ones
- Being unable to maintain normal sexual function
- Worry and embarrassment about incontinence

Depression and Anxiety



- CancerCare and USToo survey on depression and anxiety in men with prostate cancer (approx. 500 respondents).
- 78% said they had experienced symptoms that are hallmarks of depression and anxiety.
- TK 88% acknowledge that they experienced symptoms of depression and anxiety.
- Only 36% very confident they could accurately identify symptoms of depression.
- 41% had support from health care professionals to help manage symptoms

Symptoms of Depression



- Sadness, tearfulness, emptiness or hopelessness
- Loss of interest or pleasure in most or all normal activities, such as sex, hobbies or sports
- Angry outbursts, irritability, frustration over small matters
- Sleep disturbances--insomnia or sleeping too much
- Tiredness, lack of energy, even small tasks take extra effort
- Reduced appetite and weight loss, or increased cravings for food and weight gain
- Anxiety, agitation or restlessness
- Slowed thinking, speaking or body movements
- Feelings of worthlessness or guilt, self-blame
- Trouble thinking, concentrating, making decisions and/or remembering things
- Frequent or recurrent thoughts of death, suicidal thoughts, suicide attempts

Anxiety



A general term for response to stress that causes nervousness, fear, apprehension and worrying. Anxiety, or worry, is a normal reaction to stressful situations. Anxiety is not a disease or illness, but in some cases, it becomes excessive and can cause sufferers to dread everyday situations. Anxiety is considered a problem when symptoms interfere with the ability to sleep or otherwise function.

Cognitive Behavioral Therapy (CBT), short acting anti-anxiety medications may be helpful.

Sex and Intimacy



- Intimacy and Sex are not the same thing.
- Intercourse and orgasm are not the only important parts of sexual relations, and may not be the most important parts to your partner.
- Intimacy, on the other hand, is always important.
- Not all urologists or oncologists address sexual functioning during or after cancer treatment--It's important to find one who will.
- Men benefit from having their spouse/partner go to appointments with them—this creates intimacy.

There is Treatment for Erectile Dysfunction



- Level 1: Oral medicines such as Viagra, Levitra, Cialis, and Stendra. 75% of patients with ED use these meds. They are effective, but not forever, and often have side effects, of headache, nasal congestion, and back pain.
- Level 2: Injections into the penis to dilate blood vessels.
- Level 3: Surgical insertion of a penile prosthesis and pump to cause an erection.
- Important to find a reputable sexual medicine specialist.

Anxiety and Intimacy



“ The men who experience high levels of “cancer-specific anxiety” after surgery for prostate cancer are likely to benefit from counseling that addresses their worries and improves their quality of life.” Psycho-Oncology

“What is interesting from the sexual health standpoint is we observed that anxiety was not linked to poor erectile function per se but was linked to low levels of sexual satisfaction,” stated Alexander Parker, PhD, senior investigator and associate professor of epidemiology and urology.

ED, Incontinence, Reduced or Loss of Ejaculate, Loss of Sex
Role

Anxiety and Intimacy



“

A Spouse on Intimacy



“When cancer enters your life, something shifts. We were awakened to the importance of honest communication and deep sharing of hopes, dreams, needs and values. The cancer journey and all that came with it has brought us even closer together.”

Kathie Houchens, leader of a support group for the wives, partner and caregivers of prostate cancer patients in Columbus, Ohio, writing in Prostatepedia, September 2016, Vol. 2, No. 1.

Things You Can Do:



- Tell your doctor about your concerns.
- Reach out to others--don't try to do everything alone.
- Assess for depression, anxiety and physical pain and get treatment.
- Find a counselor, social worker, psychotherapist or psychiatrist as needed (your doctor may refer you).
- Share your feelings with your spouse, partner, family--become a team, if possible.
- Join a support group, either face-to-face and/or online.
- Identify those who will listen, help or offer comfort, and give those who offer help specific tasks.

Things You Can Do:



- Write a personal mission statement.
- Identify goals--long and short term.
- Create strategic plan of action: things you will do to accomplish your mission statement.
- Make a list of the people in your life, what you would like from them, what you think they can realistically do, what you could ask for.
- Write a list of you concerns, hopes, fears--identify them, see what action you can take to deal with them.
- Get involved with something that takes you away from thinking about your own situation, like volunteering to help others, being a mentor to another man diagnosed with cancer, helping children learn to read, helping the needy.

Cognitive Behavioral Therapy



- Behavioral therapy pays close attention to the relationship between our problems, our behavior and our thoughts.
- Short-term, goal-oriented psychotherapy treatment that takes a hands-on, practical approach to problem-solving. Its goal is to change patterns of thinking or behavior that are behind people's difficulties, and so change the way they feel. CBT works by changing people's attitudes and their behavior by focusing on the thoughts, images, beliefs and attitudes that are held (a person's *cognitive processes*) and how these processes relate to the way a person behaves, as a way of dealing with emotional problems.

- Caregivers feel many of the same emotions that people with cancer do, such as worry, anxiety, depression, anger, fear, and a change of their role in the family.
- Studies of psychological distress in both patients and their informal caregivers [all cancer types, not just prostate](predominantly spouses or partners) found that the psychological distress of patients and their informal caregivers generally was parallel over time, although when the patient received treatment, caregivers experienced more distress than the patient (Hodges et al., 2005).
- Helping family members to manage their distress may have a beneficial effect on the distress level of patients.(Segrin et al., 2005, 2007)

Living Your Life with--or after-- Prostate Cancer



- Cancer may be a part of your life, but you are a person dealing with cancer, you don't have to think of yourself as a cancer patient.
- Do as many of the usual things that you've always liked to do.
- “My life is a quilt, and one of those patches is cancer. It's never not there, it just doesn't hurt anymore.”
--a cancer survivor.

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