

Cancer Facts for Men

Men, in general, are notorious for not accessing and making use of the health care system. As a result, men generally experience poorer health and higher mortality rates than women. If we read this finding in the context of current statistics on preventable illnesses (e.g., cancer) it becomes clear that more needs to be done for and by men. According to the World Health Organisation, cancer is the leading cause of death worldwide and more than 30% of cancer deaths can be prevented if detected early. According to the National Cancer Registry of South Africa, 1 in 5 men are affected by cancer (Maqoqi et al, 2004). As such, various initiatives (see www.cansa.org.za) are taking place throughout the month of June to raise awareness among men in South Africa. It is important that men in general become more aware of their risks and begin taking active control of their health, irrespective of their beliefs and anxieties. The remainder of this article will attempt to do just that and provide you with specific information and practical advice so that you can take action where necessary.

PROSTATE CANCER

What are the Signs and Symptoms?

If the cancer is caught at its earliest stages, most men will not experience any symptoms. Some men, however, will experience symptoms that might indicate the presence of prostate cancer, including:

- A need to urinate frequently, especially at night;
- Difficulty starting urination or holding back urine;
- Weak or interrupted flow of urine;
- Painful or burning urination;
- Difficulty in having an erection;
- Painful ejaculation;
- Blood in urine or semen; or
- Frequent pain or stiffness in the lower back, hips, or upper thighs.

Who is at risk?

Prostate cancer is uncommon in men younger than 45 years of age, but becomes more common with advancing age. The average age at the time of diagnosis is 70 years. However, many men never know they have prostate cancer. According to autopsy studies done on Chinese, German, Israeli, Jamaican, Swedish and Ugandan men who died of other causes, it was found that 30% of men in their 50's and 80% of men in their 70's had prostate cancer. According to the National Cancer Registry (Maqoqi et al, 2004), 1 in 24 men were diagnosed with prostate cancer. Having one or more close relatives with prostate cancer increases a man's risk of getting this disease, as does eating a diet high in animal fat.

How is Prostate Cancer Detected?

Prostate cancer can usually be detected in its early stages by having a prostate-specific antigen (PSA) blood test and a digital-rectal exam (DRE). A PSA and DRE should be performed every year starting when you are 50.

If considered high risk (e.g., have a close relative who had prostate cancer) then you should start having these yearly tests at age 40. It is also easy for a man to conduct a prostate self-exam:

- Insert your clean index finger into the rectum (ensure that your nails are short and clean and use lube for increased comfort);
- Once inserted, move your finger towards the front of the body to behind the penis;
- Feel with the tip of your finger for a walnut-sized organ at the base of your bladder;
- Its texture and firmness should be similar to that of the flesh between your thumb and the rest of your hand when you make a tight fist.
If you feel anything that is as firm as your knuckle then consult with your doctor as soon as possible.

TESTICULAR CANCER

What are the Signs and Symptoms?

Symptoms may include one or more of the following:

- A lump in one testis or a hardening of one or both of the testicles.
- Abnormal sensitivity e.g. numbness or pain.
- Decrease in libido.
- Sexual withdrawal.
- Build-up of fluid in the scrotum
- Dull ache in the lower abdomen or groin.
- A significant increase or decrease in the size of one testis. A testicle with a tumor may be severely enlarged (as much as 3 times the original size). Simultaneously the other testicle may be shrunken in size due to the fact that the tumor is taking the majority of the blood supply.
- Blood in semen.
- Generally weak and tired (malaise).
- A testicle mass can be palpated and may be an early sign. Because of the success rate of testicular cancer, early detection is vital.

Who is at risk?

Most testicular cancers occur in men between the ages of 15 and 40. White men appear to be at greater risk than other races. There is some evidence that men infected with HIV are also at greater risk. One risk factor for testicular cancer is undescended testicles (where one or both testicles remain in the abdominal cavity rather than descending into the scrotum). Other pre-existing conditions (such as fertility problems or a rare complication of mumps called orchitis – painful swelling of the testicles) have also been noted as possible risk factors. Having one or more close relatives with testicular cancer increases a man's risk of getting this disease.

How is Testicular Cancer Detected?

Diagnostic and treatment delay may have an impact on overall survival. The best chance of decreasing mortality is early detection.

About 90% of testicular cancer begins with a lump on a testicle that is often painless but can be uncomfortable. In most cases, men may notice testicular swelling or enlargement, or have a sensation of heaviness or aching in the lower abdomen or scrotum. Any of these signs should be investigated as soon as possible.

Performing a monthly testicular self-examination is easy:

- A testicular self-examination is best performed after a warm bath or shower;
- Examine one testicle at a time. Use both hands to gently roll each testicle (with slight pressure) between your fingers. Place your thumbs over the top of your testicle, with the index and middle fingers of each hand behind the testicle, and then roll it between your fingers;
- You may feel soft tube-like/rope-like structures which are slightly tender to pressure – this is normal. Remember that one testicle (usually the right one) is slightly larger than the other for most guys; and
- Feel for any lumps or bumps along the front or sides. Lumps may be as small as a grain of rice or a pea.

If you notice any swelling, lumps or changes in the size or colour of a testicle, or if you have any pain or achy areas in your groin, let your doctor know right away. Sometimes, lumps or swelling may not be cancer related, but it should be checked anyway. Testicular cancer is almost always curable if it is caught and treated early.

ANAL CANCER

What are the Signs and Symptoms?

The symptoms of anal cancer are not unique and share symptoms with other conditions, such as hemorrhoids. Although anal cancer is relatively simple to diagnose, there is often a delay in diagnosis because of a misdiagnosis.

Symptoms of anal cancer include:

- Lumps or bumps located near the anus;
- Anal bleeding or bleeding during bowel movements;
- Anal discharge;
- Pain in or around the anus;
- Itchy sensation around or inside the anus; and
- Change in bowel habits, such as constipation, diarrhea and the thinning of the stools

Who is at Risk?

Anal cancer appears to be increasing (especially among gay men), with most cases being associated with a pre-existing infection with the human papilloma virus (HPV). While HPV infection seems to be important in the development of anal cancer, the vast majority of people with HPV infections do not get anal cancer. Most people know that smoking is the main cause of lung cancer. But few realize that the cancer-causing chemicals in tobacco smoke can travel from the lungs to the rest of the body.

Many studies have noted an increased rate of anal cancer in smokers, and the effect of smoking is especially important in people with other risk factors for anal cancer. Other associated risk factors include being over the age of 50, having a high number of lifetime sexual partners, pre-existing genital warts, pre-existing fistulas (an abnormal opening in the anus), practice of receptive anal intercourse, frequent anal redness, swelling and soreness, and infection with human immunodeficiency virus (HIV). Most cases of anal cancer are reported by men between the ages of 50 and 80.

How is Anal Cancer Detected?

Finding anal cancer early depends on the location and type of cancer. A digital-rectal examination (DRE) will find some cases of anal cancer early, and this should be performed each year on all men over the age of 50 to look for prostate cancer (as the prostate gland is next to the rectum). Alternatively, you should request an 'anal Pap smear', which involves the collecting of cells off the lining of your anus via a swab. These cells are then examined microscopically for any irregularities. It is highly recommended that HIV-positive men and men who have sex with men should perform this test regularly.

MALE BREAST CANCER

What are the Signs and Symptoms?

- The most common sign of breast cancer for both men and women is a lump or thickening in the breast. Often the lump is painless.
- Other male breast cancer symptoms include:
 - Skin dimpling or puckering;
 - Development of a new retraction or indentation of the nipple;
 - Changes in the nipple or breast skin, such as scaling or redness;
 - Nipple discharge.

Who is at Risk?

Many men don't realize that they have breast tissue and that they can develop breast cancer. Until puberty, young boys and girls have a small amount of breast tissue consisting of a few ducts (tubular passages) located under and around the nipple. Unlike women, this breast tissue does not grow beyond puberty because of the production of male hormones. Like all cells in the body, a man's breast duct cells can undergo cancerous changes. Men at any age can develop male breast cancer at any age, but it is usually detected in men between the age of 60 and 70 years.

Having one or more close relatives with breast cancer increases a man's risk of getting this disease. Other possible risk factors include radiation exposure (e.g., chest x-rays during childhood), exposure to high levels of estrogen, liver disease, excessive use of alcohol and being overweight.

How is Breast Cancer Detected?

As is the case with female breast cancer, early detection is important. In the presence of any signs and risk factors as noted above, you should request a mammogram, sonogram and biopsy, if necessary, as soon as possible. You can also conduct monthly breast self-examinations:

- Run a warm bath or shower, apply soap to your chest area and work into a lather;
- Check your left breast texture by raising your left arm and with your right index, middle and ring fingers move your hand around the breast in small circular motions. Repeat this all over the breast;
- Check your nipple by gently squeezing it. Look for any discharge, puckering or retraction;
- Repeat above steps with your right breast; and
- Once complete, conduct a visual examination of both breasts in a mirror. Take note of any asymmetry and skin changes (e.g., rash, puckers or dimples).

If in doubt or suspicious of any bumps speak to your doctor as soon as possible.

WHAT CAUSES CANCER?

According to the World Health Organisation (2009):

‘Cancer arises from a single cell. The transformation from a normal cell into a tumour cell is a multistage process, typically a progression from a pre-cancerous lesion to malignant tumours. These changes are the result of the interaction between a person’s genetic factors and three categories of external agents, including:

- Physical carcinogens, such as ultraviolet and ionizing radiation;
- Chemical carcinogens, such as asbestos, components of tobacco smoke, aflatoxin (a food contaminant) and arsenic (a drinking water contaminant); and
- Biological carcinogens, such as infections from certain viruses (e.g., Hepatitis B, Human Papilloma Virus, and HIV), bacteria (e.g., Helicobacter Pylori) or parasites (e.g., Schistosomiasis).’

Other key risk factors involved in the development of cancer include (WHO, 2009):

- Ageing;
- Tobacco and alcohol use;
- Low fruit and vegetable intake;
- Being overweight or obese;
- Physical inactivity;
- Chronic infections (such as Hepatitis B and Human Papilloma Virus).

HOW IS CANCER TREATED?

The best defense against cancer is early detection – finding a cancer early before it has spread – gives you the best chance to do something about it. Once diagnosed, a suitable treatment plan or regime will be proposed, depending on the type of cancer, the site, the size of the tumour, and the cancer’s stage of progression. The treatment plan or regime may include any of the following:

- Surgery (surgically removing the cancerous growth);
- Chemotherapy (use of cytotoxic agents to destroy cancer cells);
- Radiotherapy (stream of high energy particles such as protons, neutrons or a radioactive source to destroy or damage cancer cells);
- Hormonal manipulation (use of hormones to alter the production or activity of cells);
- Biological therapy (treatment used to boost the body's natural defenses against cancer);
- Other (please refer to www.cansa.org.za for a more comprehensive list of treatments)

HOW CAN CANCER BE PREVENTED?

According to the World Health Organisation (2009), more than 30% of cancers can be prevented by modifying or avoiding key risk factors (see list above) and approximately one-third of cancers can be reduced if cases are detected and treated early.

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Date of Publication: 27 May 2009