

Prostate cancer and other prostate problems


Information for Black men



**PROSTATE
CANCER UK**

This leaflet is for Black men, including Black African and Black Caribbean men. Some of the information in this leaflet may also be relevant to trans women, male-assigned non-binary people, and intersex people with Black ethnicity. Your partner, family or friends might also find it helpful. We've made this leaflet because 1 in 4 Black men in the UK will get prostate cancer at some point in their lives.

We explain what the prostate is and describe the three most common prostate problems – prostate cancer, an enlarged prostate and prostatitis. We also explain what changes to look out for, what to do if you think you have a prostate problem and what might happen at the GP surgery.

 If you're worried about prostate cancer or other prostate problems, talk to your GP. You can also call our Specialist Nurses, in confidence, on 0800 074 8383, or chat to them online.

The following symbols appear throughout the booklet to guide you to sources of further information:



Our Specialist Nurses



Our publications



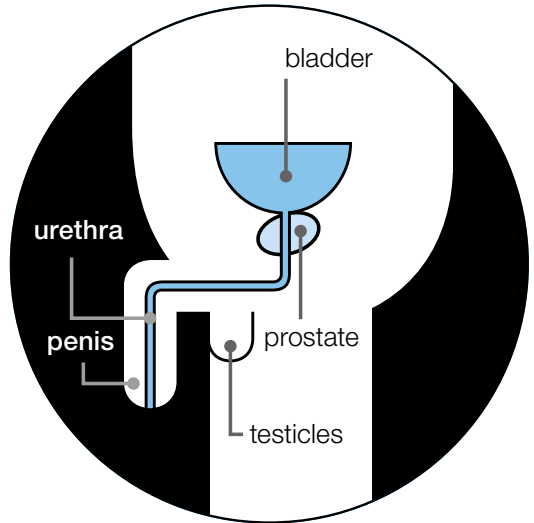
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Contents

| | |
|---|----|
| About this booklet | 2 |
| What is the prostate | 4 |
| Prostate cancer | 5 |
| Enlarged prostate | 10 |
| Prostatitis | 12 |
| What should I do next | 14 |
| What will happen at the GP surgery | 15 |
| Worried about going to your GP? | 19 |
| What happens if I'm referred | 19 |
| Where can I find out more | 21 |
| About us | 21 |
| Take this to your GP | 22 |
| Questions you could ask your GP or practice nurse | 23 |

What is the prostate?

The prostate is a gland. It is usually the size and shape of a walnut and grows bigger as you get older. It sits under the bladder and surrounds the urethra, which is the tube that carries urine (wee) out of the body. The prostate's main job is to help make semen – the fluid that carries sperm.



Who has a prostate?

The following people have a prostate:

- men
- trans women*
- non-binary people who were registered male at birth**
- some intersex people.

* A trans woman is someone who was registered male at birth and identifies as a woman. Trans women can develop prostate problems, even if they have taken hormones, or if they have had genital reconstructive surgery. The prostate is not removed during this surgery.

** A non-binary person does not identify as a man or a woman.

***An intersex person may have both male and female sexual characteristics and so might have a prostate.

Trans, non-binary or intersex?

The information in this booklet has been developed based on guidance and evidence in men. If you are a trans woman, non-binary registered male at birth or intersex, some of this information may still be relevant to you – but your experience may be slightly different. For more information visit prostatecanceruk.org/trans-women

What can go wrong?

The most common prostate problems are:

- prostate cancer – see below
- an enlarged prostate – see page 10
- prostatitis – see page 12.

Prostate cancer

Normally, the growth of all cells is carefully controlled in the body. As cells grow old and die, new cells take their place. Prostate cancer can develop when cells in the prostate start to grow in an uncontrolled way.

Can you prevent prostate cancer?

No one knows how to prevent prostate cancer. But being overweight may increase your risk of being diagnosed with prostate cancer that's aggressive (more likely to spread) or advanced (cancer that has spread outside the prostate). Eating healthily and keeping active can help you stay a healthy weight.



Read more in our leaflet, **Diet, physical activity and your risk of prostate cancer.**

As a Black man, what is my risk of prostate cancer?

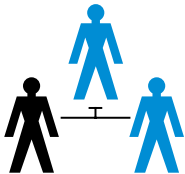


1 in 4 Black men will get prostate cancer in their lifetime*. Black men are more likely to get prostate cancer than other men, who have a 1 in 8 chance of getting prostate cancer. We don't know why, but it might be linked to genes.

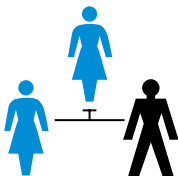
You may also be more likely to get prostate cancer if:

45+

You are aged 45 or over –
and your risk increases as you get older.



Your father or brother has had it –
particularly if they were under 60
when diagnosed.



**Your mother or sister has
had breast cancer.**

If you have mixed Black ethnicity, you're likely to be at higher risk of prostate cancer than a white man. But we don't know your exact risk because we don't have enough information on prostate cancer in men with mixed Black ethnicity. And we don't know whether it makes a difference if it's your mother or father who is Black.

* This statistic was worked out using information about men recorded as 'Black African', 'Black Caribbean' and 'Black other'.



**It's not easy for men to
talk about their health,
especially in my community.**

A personal experience

Does prostate cancer have any symptoms?

Most men with early prostate cancer don't have any symptoms.

One reason for this is the way the cancer grows. You'll usually only get early symptoms if the cancer grows near the tube you urinate through (the urethra) and presses against it, changing the way you urinate. But prostate cancer usually starts to grow in a different part of the prostate – usually the outer part. This means early prostate cancer often does not press on the urethra and cause symptoms.

If you do notice changes in the way you urinate, this is more likely to be a sign of an enlarged prostate (see page 10) or another health problem. But it's still a good idea to get it checked out.



Possible changes include:

- difficulty starting to urinate or emptying your bladder
- a weak flow when you urinate
- a feeling that your bladder hasn't emptied properly
- dribbling urine after you finish urinating
- needing to urinate more often than usual, especially at night
- a sudden need to urinate – you may sometimes leak urine before you get to the toilet.

If prostate cancer breaks out of the prostate (locally advanced prostate cancer) or spreads to other parts of the body (advanced prostate cancer), it can cause other symptoms, including:

- pain in the back, hips or pelvis
- problems getting or keeping an erection
- blood in the urine or semen
- unexplained weight loss.

All these symptoms are usually caused by other things that aren't prostate cancer. But it's still a good idea to get any symptoms checked out by your GP so they can find out what's causing them and make sure you get the right treatment, if you need it.

- You might find it helpful to tick any problems you have and take this booklet with you to your GP or nurse.

A personal story

Elvis was diagnosed with prostate cancer at 58

“As a Black man, I knew I was at higher risk. I also have a family history of prostate cancer and breast cancer, which increased my risk. When my result came back as prostate cancer, it really rocked my world. Luckily, the cancer was caught early and I was able to have surgery to remove my prostate. Now, I have regular blood tests to monitor my PSA levels.”

What treatments are there for prostate cancer?

There are several ways to treat or monitor prostate cancer, depending on how quickly the cancer is likely to grow and whether it has spread outside the prostate.

Some prostate cancers grow too slowly to cause any problems or affect how long you live. Because of this, many men with prostate cancer will never need treatment. They can have their cancer monitored with regular check-ups instead. If these check-ups show any signs the cancer may be growing, men will be offered treatment that aims to cure it.

But some prostate cancers grow quickly and are more likely to spread. This is more likely to cause problems and needs treatment to stop it spreading. So it's important to speak to your GP if you're at higher risk of prostate cancer (see page 6) or experience possible symptoms (see page 8).

Some treatments will aim to get rid of the cancer completely. If this isn't possible, there are treatments available that aim to keep it under control. For more information about prostate cancer and its treatments, visit our website at prostatecanceruk.org/treatments

Enlarged prostate

An enlarged prostate is an increase in the size of the prostate. It is **not** caused by cancer. You might also hear it called benign prostatic enlargement (BPE) or benign prostatic hyperplasia (BPH).

An enlarged prostate is very common in men over the age of about 50. As the prostate grows, it can press on the outside of the urethra (the tube you urinate through) and slow down or even stop the flow of urine.

Having an enlarged prostate does **not** increase your risk of getting prostate cancer. But it's possible to have an enlarged prostate and prostate cancer at the same time.

What are the symptoms?



Symptoms of an enlarged prostate include:

- a weak flow when you urinate
- a feeling that your bladder hasn't emptied properly
- difficulty starting to urinate
- dribbling urine after you finish urinating

- needing to urinate more often, especially at night
- a sudden need to urinate – you may sometimes leak urine before you get to the toilet.

You may not get all of these symptoms, and some men with an enlarged prostate don't get any symptoms at all. These symptoms can also be caused by other things, such as cold weather, anxiety, other health problems, your lifestyle, and some medicines. If you have any symptoms, visit your GP to find out what may be causing them.

Blood in your urine may be a symptom of an enlarged prostate. But this is rare and is usually caused by something else. Tell your doctor if you have blood in your urine.

What can help?

If you have an enlarged prostate, simple changes to your lifestyle can help – for example, drinking less alcohol, quitting smoking, caffeine, artificial sweeteners and fizzy drinks as these can irritate your bladder. If you're thinking of stopping smoking, there's lots of information and support available. Visit the NHS website for help on how to stop smoking at www.nhs.uk/smoking



If these changes don't help, your doctor may prescribe medicines or suggest surgery. Find out more in our booklet, **Enlarged prostate: A guide to diagnosis and treatment**.

A personal story

Ron was diagnosed with an enlarged prostate at 54

“I began to have urinary problems, so visited my GP. I was diagnosed with an enlarged prostate and began taking medicines to help my urine flow. My quality of life improved in all areas.”

Prostatitis

Prostatitis is the name given to a set of symptoms that are thought to be caused by an infection or by inflammation of the prostate or the surrounding area.

Prostatitis is **not** cancer. Prostatitis is a common condition. It can affect men of any age but it's most common in younger and middle-aged men, typically aged between 20 and 50. There are different types of prostatitis and we don't know very much about some types. This can make it difficult for doctors to know what causes it and how best to treat it. It can take some time to get a diagnosis, and you might need a number of tests.

What are the symptoms of prostatitis?

Prostatitis can cause a wide range of symptoms, which vary from man to man and will depend on the type of prostatitis you have.



Symptoms can include:

- discomfort, pain or aching in your testicles, the area between your testicles and back passage (perineum), or in the tip of your penis
- discomfort, pain or aching in your lower abdomen (stomach area), groin, inner thighs or back

- needing to urinate (wee) more often or urgently
- difficulty urinating or a feeling that your bladder hasn't emptied properly
- pain or stinging during or after urinating
- no desire for sex (lack of libido)
- less commonly, difficulty getting or keeping an erection (erectile dysfunction), pain or burning during and after ejaculation, and premature ejaculation.

In rare cases there can be blood in the semen. This can also be a sign that there is something else wrong, so always speak to your doctor if you have this symptom. In rare cases, prostatitis can cause a severe infection, called sepsis. If you have this infection you will have a high temperature and sweating. If this happens, you may need treatment in hospital.

What can help?

If you have prostatitis, there are things you can do to help yourself, such as getting plenty of rest, drinking lots of water and cutting down on fizzy drinks, alcohol and drinks that contain caffeine and stopping smoking as these can irritate the bladder. If you're thinking of stopping smoking, there's lots of information and support available. Visit the NHS website for help on how to stop smoking at www.nhs.uk/smoking

Your GP may discuss possible treatment options, including medicines.



Find out more in our booklet, **Prostatitis: A guide to infection and inflammation of the prostate.**

What should I do next?

If you're Black, have a prostate and you're over 45, speak to your GP about your risk of prostate cancer. Remember to tell them if anyone in your family has had prostate cancer or breast cancer.



If you notice any of the symptoms we talk about in this leaflet at any age, visit your GP. You can also call our Specialist Nurses or chat to them online.

What if I'm not registered with a GP?

You can ask your family or friends who live near you for details of their GP. Or you can find one near you on the following websites:

- www.nhs.uk in England
- www.nhsinform.scot in Scotland
- www.111.wales.nhs.uk in Wales
- www.nidirect.gov.uk in Northern Ireland.

You can also contact NHS 111 to get non-emergency medical help if you don't have a GP. Call 111 or visit www.111.nhs.uk

What if I don't have time to see a GP?

It's important to make time to see the GP if you're worried about your health. Some GP surgeries are now open in the evenings or weekends, so you should be able to see the GP or nurse at a time that is right for you. You can also ask for a phone appointment. Or you can contact NHS 111 or speak to your local pharmacist if you need medical help but it isn't an emergency.

What will happen at the GP surgery?

If you're worried about your risk of prostate cancer or any symptoms you're having, your GP will listen to your concerns and talk to you about them. If you are not sure how to explain your symptoms or concerns to your GP, there's a form on page 22 for you to fill in and show to your GP.

There are a few tests that your GP can do to find out if you have a prostate problem. There are advantages and disadvantages to having tests. Your GP will tell you more about these to help you decide whether to have tests.

Urine test

If you have symptoms, your GP might ask you for a urine sample to check for blood or an infection that could be causing your symptoms.

PSA blood test

This is a blood test that measures the amount of prostate specific antigen (PSA) in your blood. PSA is a protein produced by normal cells in the prostate and also by prostate cancer cells. It's normal to have a small amount of PSA in your blood, and the amount rises as you get older because your prostate gets bigger. A raised PSA level may suggest you have a problem with your prostate, but not necessarily cancer. A PSA test alone can't usually tell you what the problem is. But it can help your GP decide whether you need to be referred to a specialist for further tests.

Regular PSA blood tests

After some men have had their first PSA test they might want to have regular tests every few years, particularly if they are at higher risk of prostate cancer. Regular PSA tests could spot any changes in your PSA level, which might suggest you have prostate cancer. But we need more research to show how often you might need a test. You could discuss this with your GP or practice nurse, or call our Specialist Nurses.



Your right to a PSA blood test

There is no screening programme for prostate cancer in the UK. This means that you won't be invited to have a PSA test as part of a normal check-up. But you can ask your GP if you want to have a PSA test.

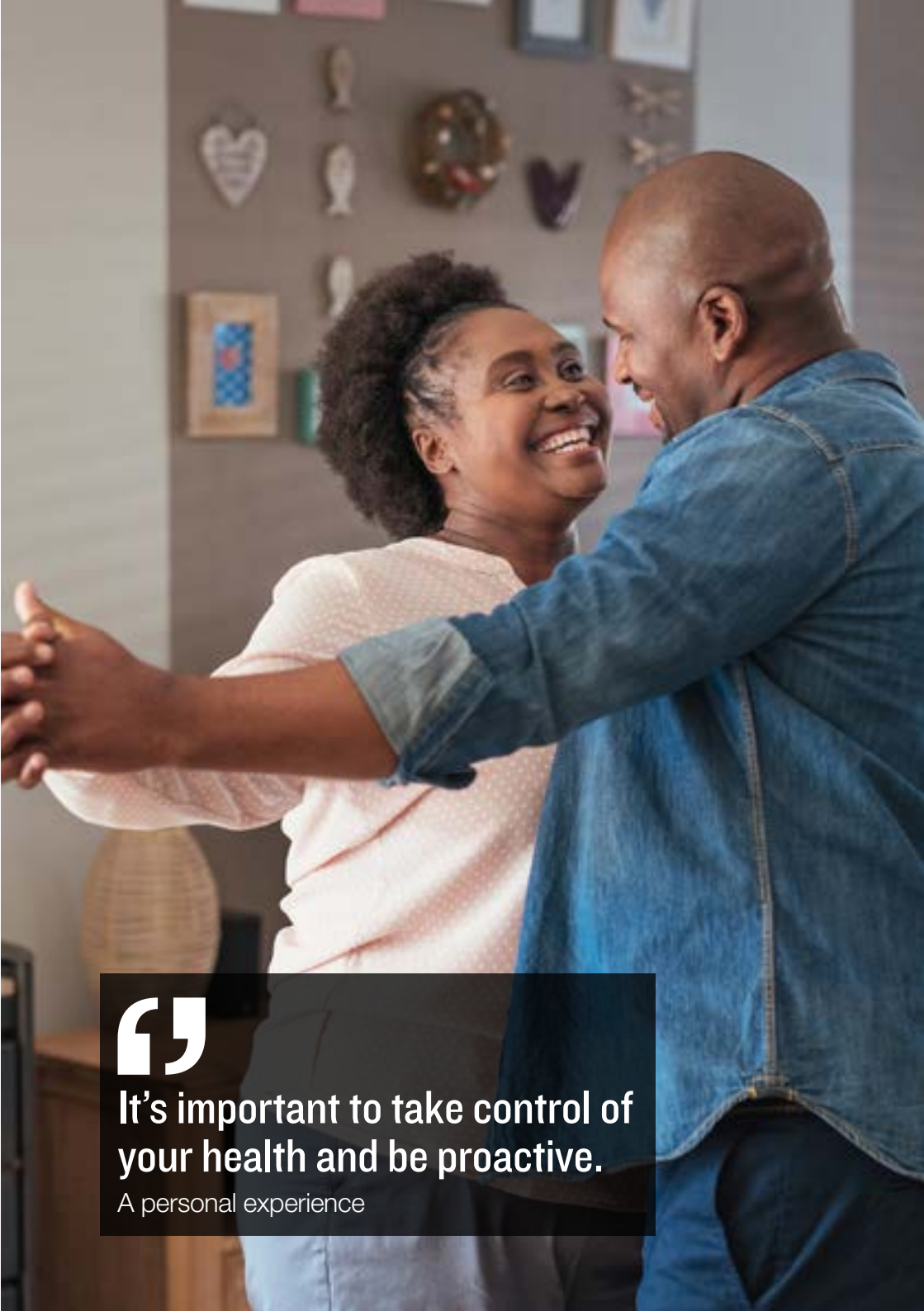
Even if you don't have any symptoms, you have the right to a PSA test if you're over 50 and you've thought carefully about the advantages and disadvantages with your GP or practice nurse.

However, if you are Black, and over the age of 45, we strongly recommend you talk to your GP about having a PSA test. This is because Black men are at higher risk of prostate cancer, and may get prostate cancer at a younger age.

If your GP refuses to give you a PSA test, you can ask to see another GP and discuss your risk of prostate cancer and about having a PSA test.



Read more in our booklet, **Understanding the PSA test: A guide for men concerned about prostate cancer.**



**It's important to take control of
your health and be proactive.**

A personal experience

Digital rectal examination (DRE)

If you decide to have a PSA test, your GP may also recommend a digital rectal examination (DRE). However you don't have to have a DRE. You can make the decision to have PSA test alone.

In a DRE, your GP feels your prostate through the wall of your back passage (rectum). If you have a DRE, the doctor will ask you to lie on your side on an examination table, with your knees brought up towards your chest. They'll slide a finger gently into your back passage. They'll wear gloves and put some gel on their finger to make it more comfortable.

Your prostate may feel:

- **normal** – a normal size for your age with a smooth surface
- **larger than expected for your age** – this could be a sign of an enlarged prostate
- **hard and lumpy** – this could be a sign of prostate cancer.

You may find the DRE slightly uncomfortable or embarrassing, but the test isn't usually painful and it doesn't take long. It can help your GP find out whether you might have a prostate problem and need to be referred to a specialist for further tests.

Some men find the idea of having a DRE upsetting. For example, if you've ever been sexually abused, you might feel very upset about having this test. There's no right or wrong way to feel about this, and it is your choice whether or not you have a DRE. If you do decide to have a DRE, explain your situation to your doctor as they can talk through the test with you and help to reassure you.

A personal story

Ally was diagnosed with prostate cancer at 59

“When I had the DRE I thought – for a few seconds of discomfort I can live with it. It’s something that I always say to guys – yeah, it is uncomfortable but if it could save your life, you can deal with it. Don’t die of embarrassment.”

Worried about going to your GP?

It’s natural to feel worried or embarrassed about having tests and check-ups. But don’t let that stop you going to your GP. Remember, the tests give your GP the best idea about whether you have a problem that needs treating. You can ask to see a male doctor or a female doctor when you make the appointment. Or take someone with you.

If you’re not sure what to say to your GP, there’s a form on page 22 for you to fill in and show to them. You can also talk things through with our Specialist Nurses, in confidence, on 0800 074 8383, or chat to them online.




What happens if I’m referred?

Your GP will talk to you about all your test results and what they might mean. If they think you may have a prostate problem, they may be able to discuss possible treatment options with you. Or, if your GP thinks you may need further tests, they may offer an appointment for you to see a specialist at the hospital (this is known as a referral). If they think you could have prostate cancer, you will usually see the specialist within two weeks.

 Read more in our fact sheet, **How prostate cancer is diagnosed**.

Waiting for test results or an appointment with a specialist can be a worrying time. But there are lots of places you can get support.

Call our Specialist Nurses

 You do not need a diagnosis to speak to our Specialist Nurses. You can call them, in confidence, on 0800 074 8383, or text NURSE to 70004 to ask for a call back. You can also email or chat to them online at **prostatecancer.org/get-support**

Visit our online community

Worried about symptoms or waiting for test results? Connect with others who understand what you're going through at **community.prostatecanceruk.org**

Join a support group

If you are diagnosed with prostate cancer or another prostate problem, a support group can be a fantastic source of information and support. Find a support group near you at **prostatecanceruk.org/get-support**

Tell us what you think

If you have any comments about our publications, you can email: **yourfeedback@prostatecanceruk.org**

Where can I find out more?

To find out more about your risk and having tests, read our booklet, *Know your prostate: A guide to common prostate problems*, or visit **prostatecanceruk.org**. We also have a range of other leaflets and booklets about prostate problems.

To order publications:

All our publications are free and available to order or download online. To order them:

- call us on 0800 074 8383
- visit our website at **prostatecanceruk.org/publications**

About us

Prostate Cancer UK has a simple ambition: to stop men dying from prostate cancer – by driving improvements in prevention, diagnosis, treatment and support.

At Prostate Cancer UK, we take great care to provide up-to-date, unbiased and accurate facts about prostate diseases. We hope these will add to the medical advice you have had and help you to make decisions. Our services are not intended to replace advice from your doctor.

References to sources of information used in the production of this leaflet and details of reviewers are available on our website, visit **prostatecanceruk.org/blackmen**

Take this to your GP

1 in 4 Black men in the UK will get prostate cancer at some point in their lives. If you're worried about your risk or have any symptoms, it may help to fill out this form and show it to your GP.



What are you worried about (please tick)?

- prostate cancer
- an enlarged prostate
- prostatitis
- I'm not sure

How old are you?

Black men over 45 have a higher risk of prostate cancer. And your risk increases as you get older.

Have any of your relatives had prostate cancer or breast cancer?

- Yes, my
 - No
 - I don't know
-

If your father or brother has had prostate cancer, you may be at higher risk of prostate cancer. Your risk may also be higher if your mother or sister has had breast cancer.

Have you noticed any of the symptoms or changes we talk about in this booklet?

- No, but I'm still worried about my risk of prostate cancer
 - Yes. My symptoms are:
-
-

Questions you could ask your GP or practice nurse



Am I at risk of prostate cancer?

What tests do you suggest and why?

What are the advantages and disadvantages of having a PSA blood test?

How soon will I get the results?

If I have a PSA blood test and my PSA level isn't raised, will I need more tests in the future?

If I have a PSA blood test and my PSA level is raised, what will happen?



**Speak to our
Specialist Nurses**

0800 074 8383*

prostatecanceruk.org



Patient Information Forum

f Like us on Facebook: Prostate Cancer UK

t Follow us on Twitter: @ProstateUK

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To be reviewed December 2024

**Call our Specialist Nurses from Monday to Friday 9am - 5pm,
Wednesday 10am - 5pm**

* Calls are recorded for training purposes only.

Confidentiality is maintained between callers and Prostate Cancer UK.

Prostate Cancer UK is a registered charity in England and Wales (1005541) and in Scotland (SC039332). Registered company number 02653887.

