

So why is bone health so important now

Paying attention to your bone health now will help reduce your risk of developing osteoporosis and suffering fractures later on in life. Simple lifestyle changes can make a significant difference so take the time to ask your medical team about which approach is best for you and what local support there might be.

Are all the treatments available where I live?

All the treatments are available locally but it is important that you discuss with your medical team which treatments will benefit you the most bearing in mind all treatments come with potential pit falls and side effects. Your prostate cancer or clinical nurse specialist is best placed to answer most of your questions but don't feel you are wasting time bringing up any concerns with your consultant or GP, they are all there for you!

PROSTaid are a local Charity run by prostate cancer patients, families, friends and urological professionals.

We will give you all the information you need to make your choice of treatment as well as the opportunity to put you in touch with other local men who have been successfully treated. We run five prostate cancer support groups that meet monthly.

We fund three dedicated PROSTaid prostate cancer specialist nurses in Leicester & Northampton

Contact our nurses: **0116 2588328**
Details of support groups
contact: **0116 2584490** or **0116 2888188**

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Having Hormone treatment for your prostate cancer?

Why bone health matters!



IT'S A MAN THING!



PROST
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IT'S A MAN THING!
getting the facts about prostate cancer

PROST
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Helping to Fight prostate cancer in
Leicestershire Rutland and Northamptonshire

Why bone health is important if you are having hormone therapy

Androgen Deprivation Therapy (ADT) is a very powerful way to control prostate cancer and is regularly prescribed for this indication. ADT may take the form of tablets, injections (either monthly, 3 monthly or 6 monthly) or possibly surgery to remove the testicles (although this is rarely done in modern practice). Unfortunately whilst ADT is highly effective at controlling prostate cancer it also accelerates normal bone density loss which all men experience as they age. As bone mineral density reduces the risk of a fracture increases highlighting that ADT-related bone health is an important health issue.

Why is bone health treated differently in prostate cancer

Whilst there is increasing evidence that men receiving ADT have a higher fracture risk, routine bone mineral density testing for men is not available in the NHS. If your doctor recommends a bone mineral density test this is commonly a Dual-energy X-ray absorptiometry (DEXA) scan which when used with a scoring system called FRAX can give an indication of the risk of a fracture over the next 10 years. If you are at an increased risk your doctor might recommend lifestyle changes, calcium and vitamin-D supplements or specific medications designed to reduce your fracture risk.

So what treatments are available for my bone health?

Lifestyle changes;

1. **Smoking and alcohol.** Smoking is consistently associated with bone density loss and increased fracture risk amongst older men with men smoking 20 or more cigarettes a day being at the highest risk. Higher than average alcohol consumption (more than 21 units a week) is also associated with a higher fracture risk so as a general rule all smoking and excessive alcohol consumption should be avoided.
2. **Exercise.** The increased fracture risk seen in men receiving ADT is likely to be a combination of the bone density loss but also lean muscle mass loss which is another common side effect of ADT. Low muscle mass can then lead to poor exercise tolerance and an increased risk of falling, therefore suffering a fracture. Weight bearing exercise such as walking, aerobics and resistance training are highly effective in increasing both bone mineral density and lean muscle mass. Ask your clinical nurse specialist how to access a local exercise class tailored to your needs.

Calcium and Vitamin D;

Calcium is required for optimum bone strength and vitamin D helps the body to absorb calcium from your diet. Unfortunately it is quite common for men with prostate cancer to have inadequate amounts of both calcium and vitamin D in their diets. You may wish to increase your intake of calcium rich foods as well as spending 10-15 minutes in the sun per day (beware of excessive sun exposure though and do not burn!) and increasing the amount of fatty fish and eggs in your diet. Your doctor may recommend supplementation with calcium and vitamin D tablets particularly if you have a slightly reduced bone density referred to as osteopenia.

Bisphosphonates

This group of medications are generally reserved for patients who have lost a significant amount of bone density (referred to as osteoporosis) and come in either oral or intravenous (IV) preparations. The most commonly used in prostate cancer is IV Zoledronic Acid (Zometa). Whilst this medication is very effective at reversing bone density loss and reducing the risk of a fracture it is required to be given on a day case unit and can rarely have some serious side effects. As a result your doctor may only recommend this if it is definitely required and after carefully weighing up the risks and benefits of such a treatment.

OK so what are the side effects of taking these treatments for my bone health?

Whilst all of these treatments are well tolerated, as with all drugs, there can be side effects. The most serious of these is a condition called osteonecrosis of the jaw. The symptoms may include jaw pain, swelling, numbness, loose teeth, gum infection, or slow healing after injury or surgery involving the gums. In view of this, dental hygiene is of vital importance and if you were to need a dental extraction, then treatment must be stopped one month before dental work and until any damage to the gum and jaw are fully healed. To assist with this there is a toothpaste called Duraphat 5000, which is available from your dentist on prescription

