



Testosterone, also known as an androgen, is the main fuel for prostate cancer. When a man is diagnosed with prostate cancer, reducing the amount of testosterone in the body is one proven therapy for treating it, which is known as androgen deprivation therapy (ADT).

ADT is an important treatment for men with advanced prostate cancer throughout many phases of their disease. Candidates for ADT include men who:

1. Have had prostate cancer progress outside of their prostate gland.
2. Are scheduled for certain radiation treatments and want to shrink the tumor and enhance effectiveness of radiation.
3. Have already had primary treatment (surgery and/or radiation) and the prostate cancer has returned.

### Treatment Considerations

Before starting any treatment, it is best to consult with your doctor about any medications you are taking, pre-existing medical conditions you have, and family health history.

Some ADTs include a warning about an increased risk of diabetes, heart disease, sudden cardiac death, and stroke. Your health history and family history of related conditions may influence the ADT you and your doctor select.

### Let your doctor know if you have any of the following:

- Heart disease (such as coronary artery disease, heart attack, heart failure, peripheral vascular disease, or irregular heartbeat)
- Diabetes
- Stroke
- High blood pressure
- High cholesterol
- High blood sugar
- Family history of sudden death
- Hypertension
- Chronic obstructive pulmonary disease (COPD)
- Unhealthy diet and lack of exercise (in yourself only)
- Cigarette smoking (in yourself only)

### Questions to Ask Your Doctor



Your doctor is your trusted health partner. Here are some questions to ask your doctor as you make important treatment decisions.

1. What is the goal of my treatment?
2. How will my risk factors, if any, impact my treatment?
3. What will my treatment schedule be?
4. What side effects can I expect? How will we work together to manage them?
5. What steps can I take to be active and healthy during and after treatment?
6. What is the risk that my cancer will progress or return following this treatment? What are my options if this happens?
7. Do you have resources or services for my spouse or partner?
8. How do I find support and resources to help pay for my cancer treatment?

**Cardiovascular disease is the second leading cause of death in prostate cancer patients\*.** Follow-up care with your primary care doctor and a cardiologist will help you manage risks and stay healthy while on ADT.

\*Journal of the American College of Cardiology Source Reference: Hendawi M "Heart Disease as a Major Cause of Death in Cancer Patients: An Epidemiologic Analysis of 6 Million Cancer Patients from the United States" ACC.19; 73(9 suppl 1): 1815; Presentation 1232-434.