

Welcome to iProstateCancer.com. I constructed this website to help prostate cancer patients and their families understand the treatment options available for prostate cancer. I want cancer patients to be well informed and have access to all options so they can make the best treatment choice.

I was 63 years old when I was diagnosed with prostate cancer (*PCa*). My father had Advanced *PCa* diagnosed (1980) when he was 69 years old. His treatment was Barbaric compared with the options available today. His experience motivated me To understand as much as possible about *PCa* prevention, detection and treatment.

When my Prostate Specific Antigen (PSA) increased (.75 ng/ml 2006 to 2007) I had a biopsy which confirmed early stage (Gleason 3-3) *PCa*. I thought I knew all the options; Surgery, Brachytherapy, Cyro, ADT/Chemo, HIFU, Proton RT, EB RT by IMRT.

I feel very fortunate to have consulted with doctors at Stanford Hospital who offered several surgical options nerve sparing, robotic, etc. The radiation oncologist answered all questions about every option I had researched and suggested I might want to include the CyberKnife/SBRT in my research. He said it was a treatment that he was offering in a clinical trail.

After a few days of research it was pretty clear that the CyberKnife offered the best chance of cure and lowest rate of side effects. The long term toxicity could not be proven until time passed. The physics and science has been well documented so the lack of actual long term data was not a major concern compared with the benefit of cure and low risk of side effects. All treatment options are a compromise of risk and benefit.

In my opinion the CyberKnife is the ultimate treatment for localized *PCa*. It has the lowest biological failure rate to date for of all options treating early stage localized *PCa*. And the toxicity rate is the lowest as measured by the side effects.

As it turned out the hardest part of this treatment option was dealing with the denial of treatment by my insurance company. I appealed the insurance company for 7 months. The appeal denial was covered by CBS/SF here is a link to that story.
<http://cbs5.com/investigates/CyberKnife.blue.shield.2.716740.html>

My appeal with the state of CA overturned the 7 month denial of my insurer. July 23, 2008 (approximately 2 months after the CBS story) the insurer added the CyberKnife to their policy for treating prostate cancer.

The CyberKnife has treated over 2500(as of Jan.19, 2009) patients with few biological failures reported for treatment of localized *PCa*. The longest treatment history (starting Dec. 2003) is from Stanford by Dr. Christopher King, 2008 study update, zero failures.

I was treated by Dr. King, and fourteen days post CK treatment there were minimal side effects. I am amazed by the improvements is radiation delivery and their impact on biological failure rate and reduction in side effects.

Advances in PCa awareness, prevention, early detection and treatment are marching along at a pretty slow pace.

Awareness (Doctors and Patients) is the first step to mitigating PCa's impact on ones quality of life.

Prevention is the ultimate goal wills all cancer. A lot of work is focused on vaccines and biological therapies to boost our immune system, etc. Progress is slow, federal funding and private funding are low relative to the magnitude of prostate cancer. We need to increase research for imaging to better define prostate cancer for early detection. Better markers are needed to determine if a treatment was successful.

Better PCa awareness has increased early detection along with advances better understanding of the role in family history of prostate cancer, PSA vs age, PSA velocity vs age, and meaning fPSA and EPSA.

For the PCa patient early detection increases the chance of cure for all treatment options but the risk and side effects from many have not changed. In my opinion, the CyberKnife/SBRT treats early stage PCa better than other option while maximizing the patient's quality of life and ease of treatment, in my opinion. I hope other option will be developed to offer patients more options for high cure rate and low toxicity.

Links to articles for all treatment options can be found in the "articles section"