MEN’S HEALTH:

Let us start this conversation!
Men’s Health Article Outline for Article on Prostate Cancer

I. Introduction:
   A. The information contained in this article expounds on the prevention, diagnosis, treatment, and cure of prostate cancer
   B. Informed decision

II. Prevention or Lowering the Risk of Prostate Cancer:
   A. Foods that can help to lower the risk of prostate cancer

III. Diagnosis of prostate cancer and questions that should be asked:
   A. Questions about medical terminology such as metastasis
   B. What are the short and long-term goals of possible prescribed therapies

IV. Brief explanation of treatments for prostate cancer:
   A. What are the options for treatment of prostate cancer?
   B. Become involved in your care

V. Get support during your treatment:
   A. Testimony from a Prostate cancer survivor

VI. Interview with an expert: Dr. Eduardo Henrique S. Ribeiro
Knowing about Prostate Health Care Can Be Beneficial to Men’s Health

I. Introduction

The health of minority males is impacted by the lack of information about prostate cancer and other conditions. Knowing about access to medical services and how to prevent conditions such as prostate cancer will be beneficial to all men, especially those at risk for this disease. The goal of this article is to enhance our understanding of the numerous factors (e.g., sociodemographic, community, societal, personal) influencing the health promoting behaviors of racial and ethnic minority males with prostate cancer, their life cycle, and the benefits of focusing on the development of culturally and linguistically appropriate health-promoting interventions designed to reduce health disparities among racially and ethnically diverse males age 18 and older.

Understanding basic information about prostate cancer helps men become aware of prostate cancer and the risks that the disease poses to their health. It is also important to become aware of prevention information, which can be essential in preventing prostate cancer and promoting general good health. This article emphasizes prevention, diagnosis, proper nutrition and a cure(s) for prostate cancer.

There is a lot of controversy surrounding the diagnosis and cure of prostate cancer. The effectiveness of diagnostic blood tests is part of this controversy. The reliability and validity of the PSA test, which is the number one medical indicator of prostate cancer, has been questioned by many. Researchers are certain that as men age, the chances of getting prostate cancer will increase. Prostate cancer can be an adenocarcinoma. The treatment for this type of cancer is generally the surgical removal of what is called the small prostate gland. Another way of treating the cancer in the prostate is by radiation. Detection of the gland’s problems is generally done by a simple test to find out the PSA levels in the blood. If the ratio is at a certain number, then doctors become concerned and order a ‘systemic biopsy’ for further diagnosis. Before getting your PSA blood level to screen for prostate cancer, it is important to have an informed decision. You first step before getting screened is to ask your doctor to review your best options.

The Massachusetts Prostate Cancer Screening Guidelines

The Massachusetts Department of Public Health provides information of important changes in the prostate cancer screening guidelines. These guidelines are adopted by the Massachusetts Health Quality Partners (MHQP), which reflect input from patients, primary care providers and specialists, health plan administrators, and others. The guidelines are consistent with those issued by American Cancer Society, the American Urological Association, the American College of Physicians, and the American Academy of Family Physicians. These groups and other experts recommend the use of shared decision making regarding prostate cancer screening.

Highlights of the MHQP-adopted guidelines:

- Massachusetts healthcare providers are encouraged to provide access to information on the potential harms and benefits of PSA screening for men who may be interested in PSA testing.
- PSA screening may be offered to men who express a clear preference for screening, after demonstrating an understanding of the harms and benefits (through a shared decision making process), and who have a life expectancy greater than 10 years.
- PSA testing may begin at age 50 and continue every other year through age 69, for average-risk men. For men at higher-than-average risk

What Is a PSA Blood Level?

It is important to note what a PSA blood level is. PSA stands for Prostate Specific Antigen. PSA’s medical definition is a blood test that measures the protein and glycoprotein that is produced in the prostate gland’s epithelial cells. The PSA blood test is used by doctors to monitor concentrations in the blood. If the ratio is at a certain number, then doctors become concerned and order a ‘systemic biopsy’ for further diagnosis.

II. Introduction

Knowing about Prostate Health Care Can Be Beneficial to Men’s Health

1. Online, sidebar: Top Cancer-Fighting eMDs, 6-4-2015

Town of Framingham
Housing Rehabilitation Assistance Program (HRAP)

The Town of Framingham, through the U. S. Department of Housing and Urban Development (HUD), has federal funds that provides assistance to property owners with low to moderate income for housing rehabilitation. The principal purpose of the program is to increase and create safety and sanitary housing in the Town of Framingham. Eligible properties are owner-occupied, one to four-family residential structures.

Examples of Eligible work:

- Emergency work: Building code deficiencies needing immediate repair such as failed heaters, plumbing & electric systems and roofs.
- Hazard abatement: Lead paint and asbestos abatement.
- Removal of architectural barriers: Installation of interior and exterior modifications for persons with physical disabilities.

Who Qualifies?

Town residents, who are low and moderate income home owners, or the owners of residential properties in Framingham with low and moderate income tenants.

Income limits are based on the number of persons living in a unit, as shown on the chart on the right. Staff will analyze income to determine if applicants have eligible income.

Funding is provided to a qualified Owner-Occupant, as a deferred no interest loan (max. $30,000), and recorded as a lien on the property. The loan is repaid upon sale or transfer of the property or if the low income owner is no longer a full-time resident there, or if there is a refinance of the property with cash taken out.

Reps NOT Eligible:

Additions or general remodeling
Landscaping

Work started before program participation
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screening may begin at age 40 or 45, depending on the risk.

• Men who are at higher-than-average risk for prostate cancer include African-American and black men — who are at a 50% higher risk — and people with a brother or father with prostate cancer.

II. Prevention or Lowering the Risk of Prostate Cancer

First step is to increase your physical activity. Be more active! Sedentary lifestyle can lower your immune system and does not help you to fight cancer. There are also any number of combinations of foods that are known to reduce the risk of prostate cancer. Hot dogs and over salted foods are not on that list. The American Cancer Society recommends that people eat a healthy balance of foods that contain plant proteins and that a healthy ratio is two-thirds plant protein to one-third animal protein.4

The WebMD slideshow referenced below strongly suggested eating foods such as salmon, baked potatoes, cooked or broiled zucchini, red onions, red peppers, squash, tomatoes, mushrooms, broccoli, cabbage, eggplant, sprouts, grapes, and nectarines to have a healthy diet. In addition to eating healthy food exercise contributes to preventing and reducing the risk of cancer.5

There is more and more research being done on food values, ingredients, and their effectiveness in the prevention and treatment of prostate cancer, some examples include drinking green tea.

Phytochemicals Have Become Essential Ingredients

Beans have been proven to contain phytochemicals, which are known to be a vital ingredient for the protection of cells from damage and have proven to be effective against tumor growth and the release of toxic cells to nearby cells.6 Phytochemicals are composed of chemical compounds that are known to trigger hearing, vision, smell, touch, and taste sensory responses; therefore, phytochemicals are responsible for this phenomenon and in technical terms this chemical response is called the organoleptic result. These organoleptic chemical results trigger responses like receptivity to odors in foods and sight of spoiled food.7

Genetics Contributes to Prostate Cancer Prevention

There has been more advanced research on how genetics affects tumor growth in men who develop prostate cancer. Understanding more about how prostate cancer develops and grows is the great challenge of scientific discovery for the present and the future. Knowing more about genetics can help physicians predict which men are more likely to develop prostate cancer and make effective predictions about gene changes.

Scientists can then develop newer and better drug therapies to resist the prostate cancer cells. Scientists will then be able to develop newer and better drugs that can alter the genetic changes before the cells become cancerous in the prostate.8

III. Diagnosis of Prostate Cancer and Questions That Should Be Asked

Since there are numerous inconsistencies in the diagnostic tools for prostate cancer, you should seek the advice of your primary care physician, oncologist or urologist.

You can always get professional answers to questions that you wish to ask about prostate cancer. Here is a list of some questions that you might ask your physician:

• What does the medical term metastasize mean and how can its definition be applied to my diagnosis of prostate cancer?
• What are the short-term and long-term goals of my prescribed treatment therapy?
• If treatment therapy for the cancer has already been begun, how am I responding to the therapy?
• Always ask your doctor if it is necessary to get a PSA test, as well as ask for an explanation of what it means and what are the projections of your treatment based on your PSA levels.9
IV. Explanation of Prostate Cancer Treatments

When there is a diagnosis of prostate cancer, you can choose from several options. The most important is to have prompt medical care. You can consult with your doctor and other cancer specialists, as well as research other sources of information and make inquiries with agencies that support the cure of prostate cancer.

- In the future, there will be many more options for treatment. Scientists, pharmaceutical companies, cancer organizations, doctors, and directors of non-profit organizations continue to research cancer diagnosis and treatment in search of a cure.
- The majority of doctors emphasize in their treatment of prostate cancer the same treatment that they generally suggest to their patients. If you want to find additional information about other treatments, including alternative treatments, you should consult with your primary care physician.
- It has been cited by research that the first treatment for prostate cancer will define how the progress is monitored and the cure rate.
- When you choose the correct treatment options, you and your family benefit. When there is a diagnosis of prostate cancer, you can undertake the treatment as if it were any other treatment. Always review with your doctor if this treatment or any other treatment listed in this magazine is for you.

The Paradox In Treating Prostate Cancer

It is important to note that if the cancer has spread, then surgery may not be an option recommended by your doctors. There may be other medical strategies to treat the area where the cancer has metastasized. Your doctor will inform you what is the best treatment for you. Sometimes a patient is recommended to wait without any further treatment is necessary. Your doctor may advise you of other treatments, which may be alternate options if the prostate cancer has or has not metastasized. 10

Prostate Cancer Treatment Resources

You can seek advice concerning treatments and technologies that are now used to treat cancer. These programs include:

- Comprehensive individualized plan for prostate cancer that includes the latest advances in prostate cancer, advanced technological innovations, the finest combination of oncological advice and services, and ways of reducing side effects. Strong emphasis is placed on developing inner-strength, mindfulness and body healing.
- Some programs offer advanced genomic testing, which tests tumors to find out the reasons for the tumor’s growth. Then the treatment is adjusted accordingly.
- Treatments are always individualized and are developed as a follow-up of the primary diagnosis.
- Rate of survival increases with these type of treatments, because the personal care that is given by the experts includes the patient’s personal needs, technological advances, chemotherapy and radiation treatment. Diet and exercise are also major factors in the treatment, cure, and eradication of this disease. 11

Get support during your treatment

Sr. Raul Molina is 68 years old and hails from Colombia. Sr. Molina has worked hard throughout his life in the USA, and has delivered newspapers in Framingham, MA for the past 16 years. He first approached The Latino Health Insurance Program, Inc. (LHIP) in 2010 when he was diagnosed with prostate cancer. His oncologist told him he would have died in one month without treatment, but thanks to LHIP and their support he enrolled in a health care plan, which covered his specialists and treatment and provided him with transportation to get his radiation therapies and accompanied him throughout this process. LHIP is a non-profit organization, which provides assistance to Massachusetts residents with access to medical and dental services, food and health literacy. LHIP also helped Mr. Molina to find a PCP, who speaks Spanish.

Q. Why is collaboration between a health care provider like yourself and a community-based organization like LHIP is it so important?

A. Generally our patients, who are predominantly Latinos, have low healthy literacy and limited English proficiency. They have a difficult time understanding why they need a particular procedure and how the process works. Matters are complicated by the fact that Latino men suffer from the “nud syndrome.” They are too embarrassed to ask questions so they nod, which signals to their PCP that they understand what she is saying, when in reality they have no idea. I need a partner like LHIP because our patients can benefit from Programs that LHIP provides such as its Stanford Chronic Disease Self-Management Program. It is valuable for them to be in a support group, which the CDSMP becomes, and know that they aren’t dealing with their illness alone.

Q. Please talk about men’s health issues such as prostate cancer among Latinos?

A. Most Latino men resist being screened and having procedures such as colonoscopies. They are products and unfortunately victims of their own macho culture, which frowns on having any procedure done “down there”. Additionally they stop taking their medications if they don’t feel any pain and don’t like the fact that they have to take medications for the rest of their lives to manage their chronic illness. Consequently, they don’t refill their prescriptions. 12

10 Online, Prostate Cancer Treatment – Over 15,000 men have been treated, www.ProstateFiction.com/Treatment, June, 2015.
11 Online, Prostate Cancer and Research Center, James M. Slater, MD, Loma Linda University Cancer Center, June, 2015.
12 Online, IBID, cancer.org/prostatecancer/overview.
13 IBID, online, Prostate Cancer Treatment – Over 15,000 men have been treated, June, 2015.
14 Online, Prostate Cancer diagnostics and treatments, Prostate Cancer Treatment, Innovative Prostate Cancer Treatments from Cancer Experts, Cancer Treatment Centers of America, June, 2013.
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Q. Why is it important for Latino men to get screened early?

A. Latino men are not used to our health care system and don’t understand the difference between routine, urgent and emergency care. Rather than schedule an appointment with their PCP if they have been experiencing lower back pain for an extended period they go to the ED. They go with unrealistic expectations and become frustrated when the hospital can’t provide a silver bullet to solve the problem.

Improved health literacy is the solution to these and other health related problems. Once they become health literate, Latino men will understand that their PCP is essentially their medical coordinator. They will understand why it is important to schedule regular exams with their PCPs even when they feel fine and the value of being screened early and regularly to identify and treat problems before they become symptomatic.

Works Cited

1. online, Slideshow: Top Cancer-Fighting Foods, WebMD, 6-4-2015.
2. online, Prostate Cancer — Alternative Cancer Treatments, Written by Webster Kehr, Independent Cancer Research Foundation, Inc., Last updated on April 9, 2015.
4. IBID, online, slideshow, WebMD, 6-4-.
5. IBID, online, slideshow, WebMD.
10. online, Prostate Cancer Treatment — Over 15,000 men have been treated, www.ProstateCancer.com/Treatment, June, 2015.
11. online, Proton Treatment & Research Center, Loma Linda University Cancer Center, James M. Slater, MD.
12. online, IBID, cancer.org/prostatecancer/overview, June, 2015.
13. IBID, online, Prostate Cancer Treatment — Over 15,000 men have been treated, June, 2015.
14. online, Prostate Cancer Treatment: Innovative Prostate Cancer Treatments from Cancer Experts, Prostate Cancer diagnostics and treatments, Cancer Treatment Centers of America, June, 2015.
15. online, the comprehensive cancer prevention and control network and the Massachusetts Department of Public Health: should you get the PSA test? August, 2017.
Acknowledgement

This article is dedicated to all the families, who suffer from the disease cancer and to our supporters and collaborators. Let us all work together to eliminate this disease in our communities and help us to spread the word about health education and prevention. Our partnerships with many community-based agencies, health care providers, and churches enable us to help members of our community to maximize their interactions with the health care system. If you want to know more about how to support our prevention efforts or how to refer a patient or client to our services, please call us at 508-875-1237. You can also learn more about our agency by logging in to our webpage www.lhiprogram.org.

We would like to thank the following institutions for underwriting the cost to produce and distribute Todo El Mundo free of charge to members of our community:

- Allegra Print & Imaging
- Ruiz Transportation Services
- Stop and Compare
- Peabody Resident Services
- Senior Whole Health
- Town of Framingham Housing Rehabilitation Assistance Program
- People’s United Bank
- Staples
- United Healthcare

The Latino Health Insurance Program, Inc. Framingham and Milford Diabetes Self-Management Education* Programs have been Recognized by the American Diabetes Association for Quality Self-Management Education and Support.

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