





The Gertrude and Louis Feil Cancer Center at South Nassau Communities Hospital (GLFCC-SNCH) is responding to the high occurrence of prostate cancer in American men.

We are a regional destination for cancer care and are proud to report high rates of survivorship among our prostate cancer patients. To support improved prostate patient outcomes, the GLFCC offers all

prostate cancer patients access to cutting edge technology, robotic radical prostatectomy, personalized medicine, clinical trials and supportive oncology services including palliative care, navigation services, support groups and survivorship care.

Prostate cancer

is the most common cancer in American men.¹

Within the primary service area of Oceanside, Rockville Centre, Long Beach, Freeport, and Baldwin, Nassau County has a rate of prostate cancer incidence higher than the national average.

The community support and collaboration of local urologists with our multi-disciplinary treatment team is integral to seamless patient transition to cancer treatment and care. With a total of 108 cases (72 newly diagnosed and 36 seen for disease progression or

recurrence) prostate cancer was one of the five most commonly treated cancer sites at the GLFCC in 2016, surpassed by breast, lung,

colorectal and GYN cancers. The majority of prostate cases treated at the GLFCC were among men diagnosed between ages 60-79 (67% in 2016). Additionally, in 2016, the majority of

prostate cancer cases treated at the GLFCC for both African American (80%) and white men (78%) were stage I and II cancer, indicating that the majority of men are receiving early detection and timely entry into treatment.

OUR IMPACT: SCREENING AND EARLY DETECTION

Early prostate cancer has no symptoms. With more advanced disease, men may experience changes in urinary flow.

Advanced prostate cancer often spreads to the bones, which can cause pain in the hips, spine, ribs or other areas. Like many malignancies, prostate cancer can be controlled when detected early.

Deciding how often and when to screen for prostate cancer is controversial. Our goal is to find and treat aggressive, potentially lethal prostate tumors while preventing needless worry and unnecessary treatments if someone's cancer is not life-threatening. Recent advances have helped meet these challenges.

U.S. men are expected to be diagnosed with prostate cancer in 2017, 10,060 of these men will be from New York.1

An estimated **161,360**

Prostate biopsies are now performed using MRI-based targeting, also known as fusion guided biopsy, using the UroNav Fusion Biopsy System™. Under the direction of Dr. M. Herman, MD, Director of Urology, this new technology has been integrated to examine patients in the biopsy procedure room, and has been shown to increase the accuracy of prostate biopsies by up to 30%.

In September, Dr. Herman educated the staff and the community through lectures entitled "New Developments in Prostate Cancer Screening: Avoiding Unnecessary Biopsies." These educational programs offered clarification on screening recommendations, diagnostic procedures and treatment options including the use of a new tool called the 4Kscore Test™ that has been used regularly at South Nassau for the last two years.

This test is a blood test that measures

the levels of four different prostate-derived proteins.
The values of these protein levels and other medical information obtained from your Urologist are used to calculate the chances of finding aggressive prostate cancer if a prostate biopsy were to be done, giving a

patient a personalized probability of finding aggressive disease in their prostate.

Evaluation comments from the attendees were positive and included "enlightened by the entire presentation."

Data continues to be gathered throughout the medical community to assess the benefits of early detection by screening as it relates to cure and cost effectiveness of treating prostate cancer. Different organizations have different guidelines about when and how to screen for prostate cancer.



The National Comprehensive Cancer Network (NCCN) recommends that men should have a thorough discussion with their healthcare provider about the pros and cons of testing for prostate cancer.

Testing is done through the prostate specific antigen (PSA) blood test and a digital rectal exam (DRE). The NCCN recommends that African American men and men with a family history begin prostate cancer screening in their 40s, while men with an average risk should begin screening in their 50s.

African American men have a **74% higher**

chance of developing
prostate cancer during their
lifetime and are more likely
to die from prostate cancer
than white men.1

information and screenings on prostate cancer. A total of 109 men from Freeport, Merrick, Oceanside, Franklin Square, East Meadow, Bellmore and Wantagh were screened. The participants ages ranged between 41 and 96, 79% of the group were Caucasian, African Americans comprised 5% of the group, Asian 6% and Hispanic 4%.

Six participants had a first degree relative with the disease and the most common complaint was "a change in urinary habit."

Eleven elevated PSA results were reported: all eleven were sent certified letters informing them of the results with recommendations to follow up with either their Primary Care

Physician or Urologist. Follow-up with these participants indicated that they all had done so. Two participants under the age of 75 were also sent certified "warning" letters because their results met the latest NCCN recommendation suggesting further evaluation for a PSA over 3 for patients in this age range.

During 2017, the Cancer Center held three events in the community, providing free

OUR FOUNDATION: CUTTING-EDGE TREATMENT

Men newly diagnosed with prostate cancer can be confident that by picking the Gertrude and Louis Feil Cancer Center for their treatment, they will receive holistic, multi-disciplinary, patient-centered care at a regional destination for comprehensive cancer care.

The GLFCC at South Nassau has been a strong advocate of a minimally invasive approach in the treatment of prostate cancer.

Numerous approaches are available for the treatment of prostate cancer, none of which have been universally adopted as being ideal for any one particular patient.

Included amongst these options would be surgery, radiation therapy, hormonal therapy and observation alone (no upfront treatment). Within the radiation therapy choices, external beam radiation therapy and prostate seed brachytherapy (prostate seed implantation) would be the most widely available and implemented therapies in the United States. One of the more important procedures offered at the Gertrude and Louis Feil Cancer Center is the Novalis™ TX Radiation Therapy System. This powerful IGRT technology can treat prostate cancer with incredible precision and control, but is most

importantly a completely non-invasive treatment with no pain or recovery time involved. Instead of lengthy treatment times, treatment sessions with the Novalis™ Tx last just minutes, not hours, often reducing overall treatment time from 8 to 9 weeks down to 1 week for select patients. Using sophisticated image guidance and tracking capability, the doctor is able to pinpoint the exact location and shape of the tumor and deliver a very high-dose of radiation to destroy the cancer cells.

One of the best ways
to detect **Prostate Cancer** early is through
screening, which is testing
to find a disease in people
with no symptoms.

The National Cancer
Data Base was
accessed for
comparison of South
Nassau's prostate
cancer patients to
those of other hospital
facilities in New York
State diagnosed
from 2010 to 2014.
The comparison
demonstrated that the
prostate cancer patient

mix was similar to that of patients at other New York hospitals with respect to stage, age, and race/ethnicity.

The major difference between South Nassau and other New York hospital prostate cancer patients was in the form of initial therapy utilized. Radiation therapy was utilized in 51% of the patients at South Nassau Communities Hospital during that period of time, versus 17% of the same patients at other New York institutions.



A similar difference was noted when South Nassau was compared to all hospitals in the United States: 52% versus 23% for external beam radiation, and 14% versus 6% for brachytherapy seed implantation.

The results demonstrate
that South Nassau
utilized radiation
therapy as a primary
treatment for prostate
cancer to a greater
degree than other
institutions in New York
or across the United
States, as would be
expected in a facility
with the expertise
and ability to provide this treatment
option to suitable patients diagnosed

with prostate cancer.

An estimated **26,730**U.S. men are expected to die from prostate cancer in 2017, **1,560** of these men will be from New York.¹

In addition, the outcomes for prostate cancer patients treated with radiation at South Nassau are better than, or equal to the national averages achieved at comparable institutions in the United States. This has been achieved through a dedicated team of medical professionals whose aim is to provide consistently superior outcomes in the treatment of prostate cancer with radiation therapy.

Genetic counseling and testing for certain genes that can cause

prostate cancer became available at the GLFCC in 2017. Men from families with prostate cancer, breast cancer or ovarian cancer can talk with their doctors about their

risk and our genetic counselor. After taking a detailed family history and having a talk about their risk for the disease, our certified genetic counselor, Megan Soucy, CGC can determine whether genetic testing is appropriate for them.

South Nassau has a Prostate Cancer Support Group for men with prostate cancer, their

families and caregivers.

Our group is here to provide laymen's information and help men newly diagnosed with prostate cancer find out about available treatments. Participants share their experiences and help others learn what to expect and realize that it's not just happening to them, but to other men as well.

For more information on the Gertrude and Louis Feil Cancer Center, the Prostate Cancer

The incidence rate of
Prostate cancer in New
York, at 145.2 cases
per 100,000 men,

is higher than the national average of 123.2 cases per 100,000.4 Program as well as other cancer services, please contact us at (516) 632-3350, (516) 632-3380 or online at **southnassau.org/cancer**.

The Prostate Cancer Support
Group is held on SNCH Main
Campus, the 4th Thursday of
every even month. The group
begins at 6:30 pm. All men and
their families are welcome to
attend—from men seeking
information to men newly
diagnosed with prostate cancer
to men who have finished
treatment. In addition, allied
health professionals will
sometimes present on relevant
prostate cancer information and
overall well-being.



^{1.} American Cancer Society, Cancer Facts & Figures 2017

^{2.} New York State Department of Health, Cancer Registry

Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute, 2017.
 National Cancer Database, Commission on Cancer, Benchmark Reports, Prostate Cancer, 2010-2014
 Prostate Cancer Early Detection, May 2017, National Comprehensive Cancer Network

















