

## **Prostate Cancer and Brachytherapy– A Woman’s Issue?**

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**INTRODUCTION:** This study provides a unique perspective on influences and concerns regarding the prostate cancer treatment decision-making process in a large number of female spouses/life partners of patients undergoing transperineal permanent prostate brachytherapy (PB).

**METHODS AND MATERIALS:** 3172 patients underwent PB between October 1997 and October 2002 at a single institution. In February 2002, 900 patients were randomly selected from this population and mailed an anonymous sixteen-item detailed questionnaire with a self addressed postage-paid envelope. The questionnaire addressed specific attitudes, perceptions, influences and effects associated with PB. The patients were instructed to give the questionnaire to their wife or female life partner to complete and return within three weeks. 415/900 (46.1%) surveys were completed and returned.

**RESULTS:** 94.4% of the respondents were white/Caucasian and 76.6% have been involved in the relationship for 31 or more years. Median age was 68.0 years old (range 39-82 years). 65.3% of the respondents reported the urologist as being the primary source of prostate cancer information followed by information from family or friends (13.3%). However, 68.5% made the decision to undergo PB based on their urologist’s recommendation. 85.2% felt that they were actively involved in the decision-making process and 94% were satisfied with PB as the treatment decision. Regarding relationship issues, 81.4% report prostate cancer had no effect on their relationship emotionally while 4.3% indicated a severe emotional effect. 33.2% felt their sexual relationship was not affected at all while 20.1% responded that prostate cancer severely affected their sexual relationship. Only 3% were concerned with the long-term effects of radiation while 71.5% were more concerned with cancer cure.

**CONCLUSION:** The results of this survey elucidate several factors that play a critical role in the prostate cancer treatment decision-making process. It is clear that the urologist is the key influence in informing patients and their partners about brachytherapy. Life-partners also play a valuable role, with evidence that decisions reflect a cooperative and interactive process between life partners. Finally, although previous studies have suggested a specific fear of radiation and its long term effects, the women surveyed were much more concerned with cancer recurrences and lifestyle issues than with long term effects of radiation.