A

- **Abnormal PSA**: higher-than-normal levels of PSA (a protein made by your prostate) in your blood test. This might suggest something is wrong with your prostate.
- **Active Surveillance (AS)**: a way to monitor low-risk prostate cancer closely without immediate treatment. Your doctor will check your PSA levels regularly, examine you, and sometimes take small tissue samples. Treatment only starts if the cancer shows signs of growing.
  This is different from Watchful Waiting, which involves less testing and is usually for older men or those with other health problems.
- **Advanced prostate cancer**: cancer that has grown beyond the prostate or has become more aggressive.
- **Anatomical pathology:** (see histopathology).
- **Androgen Deprivation Therapy (ADT)**: treatment that lowers testosterone (a male hormone) that helps many prostate cancers grow, also known as hormone therapy.
- **Androgen receptor inhibitors**: medicines that block testosterone from working (like Enzalutamide).
- **Anxiety**: feeling worried, nervous, or afraid – common during cancer diagnosis and treatment.

B

- **Prostate biopsy**: when your doctor takes tiny samples of prostate tissue with a needle to check for cancer cells.
- **Bladder training**: exercises to help you control your bladder.
- **Bone metastases**: when prostate cancer spreads to your bones.
- **Bone Scan**: a picture of your bones to check if cancer has spread there.
- **Bone-strengthening medications**: medicines (like bisphosphonates) that help protect bones weakened by cancer or treatment.
- **Brachytherapy:** a treatment where tiny radioactive seeds are placed directly inside your prostate to kill cancer cells.

C

- **Cancer staging**: describing how far your cancer has grown and whether it has spread.
- **Caregiver**: someone (often your partner or family member) who helps take care of you during treatment.
- **Castration-Resistant Prostate Cancer (CRPC)**: cancer that keeps growing after hormone therapy treatment.
- **Chemotherapy**: strong medicines that kill cancer cells.
- **Clinical trials**: research studies testing new treatments.
- **Clinical guidelines**: clinical guidelines are carefully put-together advice meant to help doctors and patients decide the best way to handle specific health

problems. They're based on the latest research, expert opinions, and real-life experience from the medical field.
- **Constipated**: being constipated means having difficulty passing stools (poop).
- **Continence**: is about having control over when and how you urinate or have bowel movements. It's an important quality of life factor after treatments for prostate cancer.
- **Counselling**: talking with a professional who helps you manage difficult feelings.
- **Cryotherapy**: a treatment that uses extremely cold temperatures to kill cancer cells in the prostate.
- **Cystoscopy**: a test where a thin camera tube looks inside your bladder and prostate area.

D

- **Depression**: feeling deeply sad or losing interest in things – common during cancer treatment.
- **Digital Rectal Exam (DRE):** when a doctor uses a gloved finger to feel your prostate through the rectum to check for anything unusual.
- **Dihydrotestosterone (DHT)**: a powerful form of testosterone that can make prostate cancer grow.

E

- **Emotional support**: help dealing with feelings like stress, fear, and sadness.
- **Erectile dysfunction (ED)**: trouble getting or keeping an erection.
- **Erection**: when the penis becomes firm for sexual activity.
- **External Beam Radiation Therapy (EBRT)**: radiation treatment that aims beams at your prostate from outside your body.

F

- **Family History**: having relatives who had prostate or other cancers that might increase your own risk.
- **Fatigue**: feeling extremely tired even after resting – common during cancer treatment.

G

- **Gleason grade group**: a system used to grade prostate cancer based on how the cancer cells look under a microscope. It helps doctors understand how aggressive the cancer is and how likely it is to grow and spread.
- **Gleason score**: a number system (from your biopsy) that shows how aggressive your cancer is.
- **GP**: stands for General Practitioner. A GP is a doctor who helps people with all kinds of health problems, from short-term issues like a cold to long-term conditions like diabetes. They also give advice on staying healthy and preventing illness. Most people see a GP first when they have a health concern.

H

- **High dose rate brachytherapy**: a type of radiation therapy for prostate cancer. It involves placing radioactive material directly into the prostate, delivering a higher dose of radiation than regular brachytherapy.
- **High-Intensity Focused Ultrasound (HIFU)**: a treatment for prostate cancer that uses sound waves to heat and destroy cancer cells in the prostate. It's a non-invasive method, meaning it doesn't require surgery.
- **Histopathology**: when doctors look at tissue samples under a microscope to check for disease.
- **Hormone therapy**: treatment to lower or block testosterone, which feeds prostate cancer.
- **Hot flushes**: sudden feelings of heat and sweating – a common side effect of hormone therapy.

I

- **Imaging tests**: different types of pictures (like MRI or PET scans) to see your prostate and surrounding areas.
- **Immunotherapy**: treatment that helps your own immune system fight cancer.
- **In remission**: "in remission" means that the signs and symptoms of a disease, like cancer, have gotten better or gone away. It doesn't always mean the disease is completely gone, but it means the illness is less active or under control.
- **Incontinence**: problems controlling your urine – common after prostate surgery or radiation.
- **Intervention**: anything a doctor or healthcare worker does to help someone feel better or deal with a health problem. It could be to stop an illness from happening, treat it, or help manage it.
- **Isolation**: feeling alone – often happens during long treatments or recovery.

J

- **Shared Decision-Making (DSM)**: working together with your healthcare team to choose the best treatment for you.

K

- **Knowledge gaps**: not fully understanding medical terms – it's always okay to ask questions.

L

- **Leakage**: accidentally leaking urine when you don't want to. This can happen when you cough, sneeze, laugh, or do physical activities.
- **Loss of identity:** feeling different about yourself because of changes to your body, sexual health, or role in life.
- **Low Dose Rate (LDR) / Permanent Seed Brachytherapy:** a type of radiation treatment used for prostate cancer. It involves placing small radioactive seeds directly into the prostate. These seeds deliver radiation over time to treat the cancer.
- **Lymph glands**: (also called lymph nodes). Small, bean-shaped filters that are part of your body's defence system.
- **Lymph node involvement**: when cancer has spread to nearby lymph glands.

M

- **MCRPC (Metastatic Castration-Resistant Prostate Cancer)**: prostate cancer that has spread and no longer responds to hormone therapy.
- **Mental health**: your emotional and psychological wellbeing.
- **Metastasis:** when cancer spreads from the prostate to other parts of the body, like bones or lungs.
- **MRI (Magnetic Resonance Imaging):** a special scan that uses magnets to take detailed pictures of your prostate.
- **Muse (intra-urethral suppository):** a treatment for erectile dysfunction, which can happen after prostate cancer treatments like surgery or radiation. It's a small tablet that is inserted into the urethra and contains a medicine called alprostadil, which helps improve blood flow to the penis, making it easier to get an erection.

N

- **Nadir PSA**: the lowest your PSA level gets after treatment – doctors use this to see if treatment worked well.

O

- **Oncologist**: a doctor who treats cancer using drugs, hormones, or radiation.
- **Overwhelmed**: feeling emotionally flooded or unable to cope – common during cancer treatment.

P

- **Palliative care**: special care focused on making you comfortable and relieving symptoms at any stage.
- **Peer support**: talking with others who have gone through prostate cancer.
- **Penile injection therapy**: a treatment for erectile dysfunction, which can happen after prostate cancer treatments like surgery or radiation. It involves injecting medication directly into the base or side of the penis to help increase blood flow and create an erection.
- **Prostate**: a small gland below your bladder that helps make fluid for semen.
- **Prostate cancer screening**: a way to check for signs of prostate cancer before symptoms appear. The goal is to find cancer early, when it's easier to treat.

  It usually involves:
    - a PSA test, which is a blood test that measures the level of PSA, a protein made by the prostate. High PSA levels can be a sign of prostate cancer, but they can also be caused by other things like an enlarged prostate or infection.
    - a prostate exam (finger up the bum) by a doctor to feel the prostate and check for lumps or anything that feels unusual.

- **Prostate exam:** also known as Digital Rectal Exam (DRE) is a quick test to see if the prostate is swollen or painful. During this test, the doctor will gently insert a gloved and lubricated finger up the bum to feel the prostate and check for lumps or anything that feels unusual.
- **PSA (Prostate-Specific Antigen)**: a protein made by your prostate that can be measured in blood tests. Rising levels might suggest cancer.
- **PSMA (Prostate-Specific Membrane Antigen)**: a protein found on prostate cancer cells that can be targeted in scans or treatments.

Q

- **Quality of Life (QoL)**: how you feel physically, emotionally, and socially during and after treatment.

R

- **Radical prostatectomy**: surgery to completely remove your prostate and some surrounding tissue.
- **Radioactive rods, seeds or pellets**: these are used in a treatment called brachytherapy which delivers focused radiation directly to the cancer.
- **Radiotherapy**: a treatment that uses strong radiation to kill or damage cancer cells in the prostate. It's often used to treat cancer that is only in the prostate or to shrink tumours before surgery. It can also help stop the cancer from coming back after surgery.
- **Reoccurrence or recurrent prostate cancer**: cancer that comes back after initial treatment.
- **Resilience**: your ability to cope and recover from tough times.

S

- **Seminal vesicle involvement**: when cancer spreads to nearby glands that help produce semen.
- **Social/support worker (oncology)**: a professional who helps with emotional, financial, and practical issues during your cancer journey.
- **Specialist nurse**: a specialist nurse is a nurse who has had extra training to become an expert in one area of health. They focus on a certain illness, type of treatment, or group of patients, and they often help guide the care people receive.
- **Stage**: the stage of cancer shows how much the cancer has spread in the body. It helps doctors know how serious the cancer is and decide the best treatment.
- **Steroids**: medications sometimes used to reduce side effects or make other treatments work better.
- **Support groups**: places where patients can share experiences and get help from others going through similar situations.
- **Survivorship**: life after treatment – includes follow-up care and managing long-term effects.
- **Systemic therapy**: treatments that affect your whole body, like hormone therapy or chemotherapy.

T

- **Targeted therapy**: treatment that focuses on specific cancer cells while causing less harm to normal cells.
- **Testosterone**: the main male hormone that can make prostate cancer grow.
- **Testosterone suppression**: lowering testosterone levels as part of prostate cancer treatment.
- **TRUS (Transrectal Ultrasound)**: using sound waves through the rectum to create pictures of your prostate.
- **Tumour marker**: a substance in your body (like PSA) that can show if cancer is active.

- **TURP (Transurethral Resection of the prostate):** TURP is a surgery to help men who have trouble urinating because their prostate is too large. This often happens due to a non-cancerous growth called benign prostate enlargement (BPE).

  In men with prostate cancer, TURP is not used to treat the cancer itself but to make it easier to pee when the enlarged prostate is blocking the flow. It can help with symptoms like trouble starting to pee, a weak stream, needing to pee often (especially at night), and not being able to fully empty the bladder.

U

- **Ultrasound:** a test that uses sound waves to take pictures of the prostate.
- **Uncertainty**: not knowing what will happen – common when waiting for diagnosis or test results.
- **Urethral stricture**: a narrowing of the tube that carries urine out of your body – sometimes happens after treatment.
- **Urinary control:** urinary control means being able to control when you urinate. It's the ability to hold urine in your bladder until you're ready to go to the bathroom and to release it in a controlled way.
- **Urinary function:** is how well your bladder works to hold and release urine. It means being able to hold urine until you're ready to use the bathroom and then emptying your bladder in a controlled way.
- **Urologist**: a doctor who specialises in treating urinary and male reproductive problems, including prostate cancer.

V

- **Vacuum device:** a tool used to help men with erectile dysfunction (ED), which can be a side effect of prostate cancer treatments. It's a non-invasive method that helps create an erection by improving blood flow to the penis.
- **Vascular invasion**: when cancer gets into blood vessels, which might mean it's more aggressive.

W

- **Watchful Waiting (WW)**: a monitoring approach – usually for older men or those with other health problems. Treatment only starts if symptoms appear. *Different from Active Surveillance, which involves more regular testing. Also called "Observation."*
- **Whole-body imaging**: scans that check your entire body for signs of cancer.
- **Worry**: feeling concerned or uneasy – normal throughout your cancer journey.