What exactly is the prostate gland? It is a donut shaped gland that weighs about an ounce and is about the size of a walnut. It is located below the bladder and just in front of the rectum. The prostate wraps around the urethra which is the tube that allows urine to flow from the bladder to the penis.

The prostate helps to regulate the urine flow, it adds a slightly alkaline, milky white fluid to the semen. It mixes prostate fluid with fluid from the seminal vesicles and sperm from the testicles to form semen.

The prostate gland contains both glandular and muscular tissue. The glandular portion helps to prevent urinary infections, helps with maintaining the proper consistency of semen, helps to keep the sperm healthy, removes toxins, and is sensitive to hormones such as testosterone, DHT and estrogen.

The muscular portion helps with mixing different fluids to get the correct balance to help with keeping the sperm healthy. The “two valves” or sphincters one at the top and one at the bottom of the gland regulates the flow of urine. It also regulates the flow of semen during ejaculation.

The prostate’s unique tissue structure makes it sensitive to hormone levels. It appears that this is probably one of the main mechanisms that leads to an enlargement of the prostate as men age.

Prostate cancer is the number two leading cause of death in American men.

Some Statistics About The Prostate

Benign prostatic hyperplasia (BPH) or commonly known as enlarged prostate is the most common disorder of the prostate. As a matter of fact it is the most common disorder made by urologists for men in the age group 45-74. It is estimated that 50% of men in their 50’s and 80% of men in their 80’s show signs of BPH. According to the National Institutes of Health (NIH), BPH affects more than half the men in their 60’s and as many as 90% in their 70’s and 80’s.

About 1 man in 6 will be diagnosed with prostate cancer during his lifetime. Nearly 2/3 of prostate cancers are diagnosed in men aged 65 and older and it is rare before age 40. Prostate cancer can be a serious disease, but most men diagnosed with prostate cancer do not die from the cancer, but other health issues. In fact, more than 2.5 million men in the U.S. with prostate cancer diagnosis are still alive way after their original diagnosis of prostate cancer. Most prostate cancers are “slow growing”.

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SYMPTOMS OF BPH
Here are some of the more common symptoms of BPH or enlarged prostate:
1. Increased frequency during nighttime hours
2. Excessive urinary dribbling
3. Difficulty to begin urination or need to apply more pressure to begin urination
4. Sudden urge to urinate
5. Intermittent stopping and starting while urinating
6. Feeling of incomplete voiding of urine
7. Less ejaculate is produced and appears a bit clearer
8. Fewer hard erections and some difficulty maintaining the erection

Some more severe symptoms:
1. Painful or minimal urination
2. Loss of sleep at night due to urges to urinate
3. Painful or minimal semen during ejaculation
4. Uncontrollable frequency, urgency and dribbling

All of these symptoms can lead to a loss of bladder function, backflow could lead to bladder or kidney infections or eventual kidney failure.

CAUSES OF BPH
Most urologists will tell you that BPH is just a normal part of the aging process in men. This is a true observation in most Western cultures. However, there are some Asian rural cultures that have virtually no BPH. So, this is merely an observation, but does not explain the actual causes of BPH. The causes can be numerous, often having to do with our Western diet and lifestyle. We will cover some of the major suspected factors.

Increased levels of DHT:
There is a hormone produced by the prostate called dihydrotestosterone or DHT. This particular hormone can promote prostate cell growth and cause cellular changes called dysplasia. Over time these changes lead to prostate enlargement. Often the body will produce more DHT from testosterone if there is excessive activity of an enzyme called 5-alpha reductase. Excessive DHT can also be a cause of male pattern baldness. A low progesterone level, omega 3 deficiency and zinc deficiency may lead to increased activity of this enzyme resulting in increased DHT.

Andropause/ Increased Estrogen:
Estrogen is chiefly responsible for inhibiting the elimination of DHT from the prostate gland. Therefore, in conditions that promote estrogen dominance in men, which is andropause, the increased estrogen levels allow DHT to have prolonged stimulus to the prostate. As discussed in our previous newsletter, proper adrenal function, mental stress reduction, proper blood sugar control, proper liver, gall bladder and intestinal balance are absolutely necessary.

Xenoestrogens/Toxins:
These are products that are often synthetic but, some also naturally occur in nature. However, the majority come from synthetic sources. Xenoestrogens mimic the effects of estrogen on tissue cells. Some of these are found in pesticides, plastics, household cleaning products, plastic bottles, plastic wrap, personal hygiene products, and hormone fed animals such as chickens, turkey, pigs and cows. Some of these products are phthalates, BPA, PCBs, parabens, BHA, FD&C Red #3, coffee, caffeinated beverages, beer and marijuana. Please look over my February 2012 newsletter, “Toxins and Detoxification” for more information. Your environment and diet can effect your prostate and its not just your age!
DETECTION OF BPH AND PROSTATE CANCER

The gold standard for detection of enlarged and/or abnormal prostate is a DRE or commonly known as a digital rectal examination. This a screening test to evaluate any abnormalities in size, shape, texture, and sensitivity of the prostate.

Another tool frequently used is a Prostate Specific Antigen or PSA test. This is a protein that is measured in the blood stream. The measurements are graded. 4 or less is considered normal, 4-10 is borderline, over 10 is abnormal and over 50 usually indicates the cancer has spread. However, this test is only a screening test and is not totally reliable, especially basing your conclusion on one single PSA reading. This protein can be elevated with injury to the prostate, infection or just inflammation and does not mean you have or will get cancer. PSA velocity which is a measure of change in the readings over a certain time can give you more information. Free PSA is also being used and studies suggest elevated PSAand low Free PSA may have a higher risk of cancer. PSA density is also another test. A brand new test that might help detect prostate cancer was just approved by the FDA in June 2012. It is called the Prostate Health Index and appears to distinguish between most very slow growing cancers and more aggressive ones. This should help minimize unnecessary surgeries and other more radical treatments.

Of course there are prostate ultrasounds, MRI, nuclear scans, cystoscope, uroflowmetry, and a biopsy to evaluate the prostate and its tissue.

TRADITIONAL TREATMENT OF BPH AND CANCER

For BPH, most physicians will recommend two groups of medications. The first are called alpha -1 blockers and the second are called 5-alpha reductase inhibitors.

The first class helps to dilate the urinary tube called the urethra. This is done by relaxing the muscular layer that is embedded in the urethra. Some of these medications are Flomax, Hytrin, Rapaflo, Cardura and Minipress. However, these medications have side effects such as dizziness, lightheadedness, drowsiness, back pain, diarrhea and sometimes decreased sexual ability.

The second group affects the enzyme that converts testosterone to DHT. It appears that by reducing the DHT production it reduces prostate enlargement and PSA levels. The two common ones prescribed are Adovert and Proscar. However, according to the American Urological Association, they can cause several sexual side effects and breast tenderness or growth.

Remember, about 70-80% of men that have an elevated PSA do not have prostate cancer. On the other hand 20% of men with a normal PSA do have cancer. These numbers should be watched and other blood tests along with a DRE should be performed. However, most BPH cases should be treated conservatively and surgery often is not indicated.

Family history, multiple PSA levels, free PSA, Prostate Health Index, DRE, ultrasounds and finally a biopsy should help determine prostate cancer existence. The type of cancer can be determined by a pathologist with a biopsy. There is a measure or grading of prostate tumors and is called a Gleason score. This is based on two cancerous areas removed from the prostate and the system is measured from a 2 to a 10. 2 being low grade and non-aggressive and 10 being very aggressive and high grade tumor.

The classic surgical procedure is called Transurethral Resection of the Prostate or TURP. However, there is a significant risk of permanent incontinence, retrograde flow of urine and semen back into the bladder. There are other surgical procedures as well but, all have there risks.

Radiation can be applied externally to treat the cancer or radioactive “seeds” can be implanted in the prostate. Again these methods have risk of radiation burns and other symptoms as a result.

“However, these medications have side effects such as dizziness, lightheadedness, drowsiness, back pain…”
Our mission is to help inform and educate the public about alternative treatments that are less invasive and employ more natural therapeutics. We in no way are suggesting that regular medical treatments should not be sought and with some conditions we will suggest a referral to the appropriate specialist.

We wish to provide hope to those people suffering and especially to those with chronic conditions. It is our purpose to provide you with knowledge that is helpful and can provide better health.

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Bringing you Natural Healthcare Information

NATURAL TREATMENTS FOR THE PROSTATE

Here are self help tips if you have BPH or wish to help avoid BPH or prostate cancer:

Stress reduction with prayer, meditation, breathing techniques, aerobic and other exercises, proper amounts of sleep and so on. This helps to reduce stress hormones such as cortisol, epinephrine and increased levels of estrogen in men.

Consuming plenty of organic, pesticide free, fruits, vegetables. Avoid consuming animal and dairy products that contain hormones (xenoestogens). Increased exposure to sunlight and consumption of Vitamin D3. Consumption of foods rich in essential fatty acids especially omega 3 fats. Reduction of consumption of fried foods, refined carbohydrates and reduction of caffeinated products. Low carbohydrate intake inhibits 5-alpha reductase and reduces DHT.

A great herbal that has been shown to be just as effective as finasteride (Proscar) is saw palmetto berries. Additionally, they do not have the side effects like the medication. Some other herbals that have been found to help BPH are stinging nettle, African pygeum, Radix Uritcea and pollen extracts that are found in a product called Cernitin.

The components of pumpkin seeds is able to interrupt prostate cell multiplication by DHT. The seeds are also very good source of zinc, carotenoids, vitamin E and other omega 3 fats. It contains gamma tocopherol, part of the vitamin E complex that may be important in prostate cancer prevention.

Lycopene and other antioxidant compounds are very important for the prostate and may further reduce the risk of cancer.

Zinc is especially important as it is used largely by the prostate. Zinc also inhibits 5-alpha reductase and decreases DHT.

Balancing adrenal function is extremely important as well.