



# Your guide to prostate cancer and treatment with FIRMAGON<sup>®</sup> (degarelix)



# About this booklet

**Your urologist has prescribed FIRMAGON® (also known as ‘degarelix’) as a treatment for your prostate cancer.**

This booklet provides you with useful information about FIRMAGON®, as well as more general advice about prostate cancer and how to access further support.

Before you start treatment with FIRMAGON®, please take time to read the **patient information leaflet (PIL) which can be found inside your FIRMAGON® medication box.** This booklet does not replace the PIL which contains important information.

# Contents

**Prostate cancer at a glance** ..... 4

**Introduction to FIRMAGON®** ..... 7

**What does treatment with  
FIRMAGON® involve?** ..... 9

**Does FIRMAGON® have any  
side effects?** ..... 11

**Information and support** ..... 13

**Frequently asked questions** ..... 17

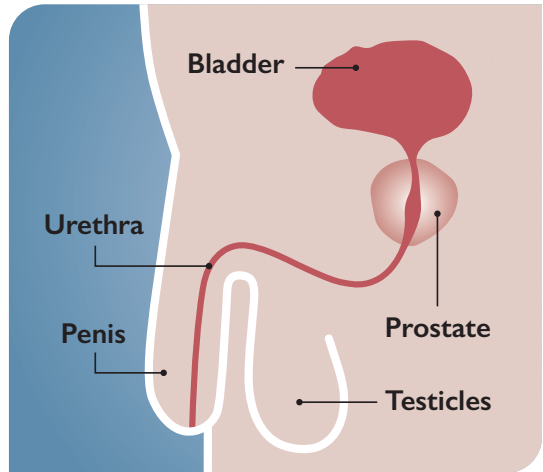
**Useful links** ..... 19

# Prostate cancer at a glance

## What is the prostate?

The prostate is a walnut-sized gland sitting under the bladder and surrounding the urethra (the tube that carries urine from the bladder out of the body).

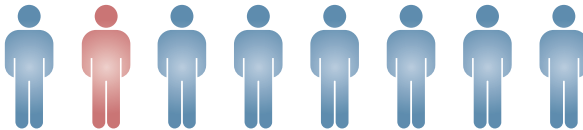
Its main function is in the production of semen (the fluid that carries sperm).



The prostate gland naturally grows bigger as you get older which can cause benign urinary symptoms including poor flow, needing to urinate more often (particularly at night) and difficulty starting to urinate, but it can also cause more serious problems such as prostatitis (inflammation of the prostate) and prostate cancer.

## What is prostate cancer?

Prostate cancer is the most common cancer in men, with 1 in 8 being diagnosed in their lifetime across the UK. It develops when prostate cells grow in an uncontrolled way. Sometimes this process is extremely slow and will not require treatment, but some cancers grow quickly and are more likely to spread. This is when treatment is required.



1 in 8 men in the UK will develop prostate cancer.

## What causes prostate cancer?

The precise cause of prostate cancer remains unknown, but there are certain things that can increase someone's risk of developing the condition such as:

- **Age** – Like most cancers, the risk increases as you get older; most cases are in men over 50 with the highest incidence between 75 and 79 years
- **Ethnic group** – Prostate cancer occurs more often in black men than white men; it is least common in Asian men
- **Family history** – The risk increases if you have a close relative, e.g. a brother or father, who developed prostate cancer under the age of 60. Research also suggests that having a close female relative diagnosed with breast cancer may be a risk factor for developing prostate cancer
- **Obesity** – Studies have shown that being obese could be a risk factor for prostate cancer, and that a healthy diet and exercise can reduce the risk of developing the condition

## I have advanced prostate cancer – what is that?

You might be told that your cancer has spread to other parts of your body and it will be referred to by your cancer care team as any of the following terms: metastatic prostate cancer, secondary prostate cancer, secondaries, metastases or mets. It is still prostate cancer, wherever it is in the body, and the most common places for your cancer to spread is to your bones and lymph nodes. Unfortunately, it's not possible to cure advanced prostate cancer, but treatments can help keep it under control and manage any symptoms.

## What symptoms might I experience?

If you have been diagnosed with advanced prostate cancer and the cancer has spread to other parts of your body then you may experience symptoms such as tiredness, bone pain, and problems urinating.

## How is advanced prostate cancer treated?

When prostate cancer has become advanced it is no longer possible to cure it, but its progression can be slowed down, your life prolonged and symptoms relieved with treatments such as:

- **Radiotherapy** which involves using radiation (X-rays) to kill cancerous cells, helping to slow the progression of advanced prostate cancer and relieve symptoms
- **Hormone treatment** which can be given as injections to prevent your body making testosterone, tablets to block the effects or reduce the production of testosterone or a combination of both
- **Chemotherapy** which destroys cancer cells by disrupting the way they multiply
- **Bisphosphonates** which are medicines that may be used if the cancer has spread to your bones and help reduce bone pain and loss

## Who will be treating me?

Your cancer care team may consist of any of the following doctors and nurses: a Urologist, a Medical Oncologist, a Clinical Oncologist, a Clinical Nurse Specialist, a GP and a Practice Nurse.

# Introduction to FIRMAGON®

## What is FIRMAGON®?

FIRMAGON® is a gonadotrophin releasing hormone antagonist that is able to block the message from your brain telling the testes to produce testosterone. Your prostate cancer is hormone-dependent, meaning that it grows using the testosterone produced in your body. It is therefore important to stop the production of testosterone to treat your prostate cancer.



## **FIRMAGON® is available in two different doses.**

You may be shown these packages when your healthcare professional explains what to expect when the treatment is administered.

## **Why have I been prescribed FIRMAGON®?**

These are some of the key reasons why this medicine may have been chosen for you by your HCP:

- To prevent or delay a worsening of your prostate cancer
- To relieve the pain or urinary symptoms you may suffer from, making day to day activities easier
- To reduce the chance of heart or vascular problems when compared to some other hormone treatments that can be used

**FIRMAGON® can be used to treat hormone-dependent prostate cancer, as well as in combination with radiotherapy and before radiotherapy in certain advanced cases.**

## **How long will I be treated with FIRMAGON®?**

Your cancer care team will regularly review your condition and will discuss with you how long you should continue your injections.

During the time it is recommended as the best treatment option for you, it is essential that you receive your injections as prescribed by your cancer care team for the reasons listed above.

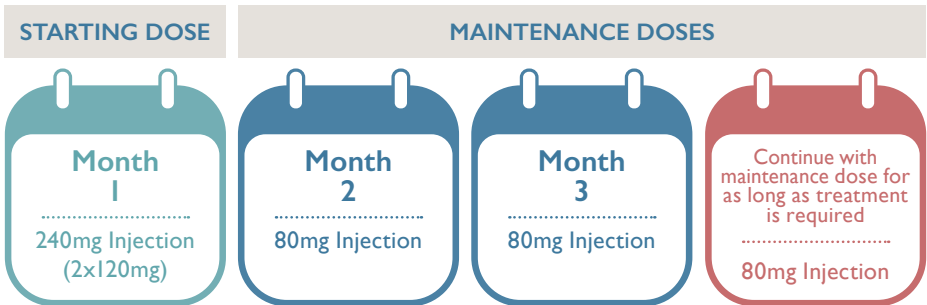


# What does treatment with FIRMAGON® involve?

## How and where is FIRMAGON® administered?

Your treatment is given by a healthcare professional at your hospital outpatient clinic or GP surgery. It involves a slow injection into the fat under the skin of your abdomen. Once injected, this will give you a continuous release of FIRMAGON® for a month.

The first time you are given your medicine, you will be given two injections on the same day. Following this you will need just one injection every month.



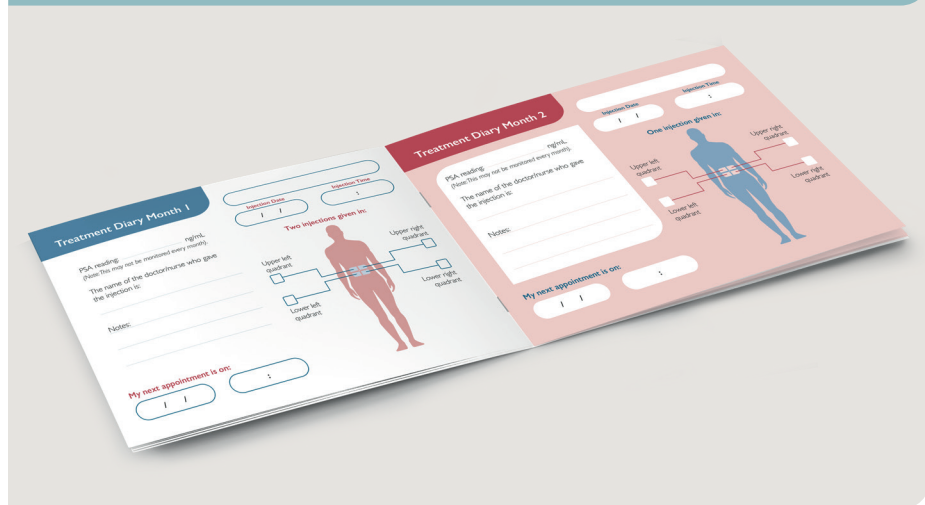
## How will my prostate cancer be monitored?

Whilst you are prescribed FIRMAGON<sup>®</sup>, you will have regular blood tests to measure your PSA (prostate specific antigen) level. This is to monitor how well you are responding to treatment.

Your cancer care team will discuss with you how often blood tests are necessary, as well as how often you should have check-ups.

You may find that, instead of needing to attend appointments at the hospital, you speak over the phone to your doctor or nurse. This is sometimes referred to as self-management.

**You can keep track of your injection site, dose and PSA levels in the treatment diary provided to you along with this booklet.**



# Does FIRMAGON® have any side effects?

## Most common side effects:

As with any medicine, there is a chance that you will experience side effects with FIRMAGON®.

The most commonly reported side effects are **hot flushes, injection site pain and redness**. The injection site reactions tend to be short-lived and occur most often after the first dose (dropping significantly with the following injections).

## Other side effects include:

- Injection site swelling/hardness
- Tiredness
- Joint pain
- Back pain
- Urinary tract infection
- Changes to your sex life
- Breast swelling and tenderness

For a full list of possible side effects, please read the FIRMAGON® patient information leaflet.

**If you experience any side effects, including those not listed on the patient information leaflet, talk to your cancer care team.**

You may also experience pain or swelling around the site where your medicine was injected.

**To help prevent pain or swelling, some tips for taking care of your injection site are:**



**Keep the site clean**



**Wear loose fitting clothes, i.e. avoid belts and tight waistbands which may rub**



**Avoid touching or rubbing the area**



**If the site is painful, a cold compress may be helpful**

# Information and support

Dealing with a diagnosis of advanced prostate cancer can be very challenging in itself, in addition to coping with the lifestyle changes and possible side effects treatment may bring. Being told that your cancer is no longer curable can be very difficult and some people may find it changes how they think about life. It is important to remember that everyone responds in their own way; there is no right or wrong way. **Your partner, family and friends may also find the information in this section useful.**

Many people find it helpful to learn more about prostate cancer in order to feel more confident in making decisions, as well as feeling more informed generally about the practicalities of treatment and what to expect.

Other ways in which you can help yourself navigate this challenging time are:

- **Talking about your worries and concerns**

This could be one-to-one with someone you are close to, or someone trained to listen such as a counsellor, doctor or nurse. Support groups, online or in person, where you can share your experiences of living with prostate cancer can also be very helpful. Sharing your questions and concerns with others who know exactly what you are going through can be very reassuring.

- **Take time to look after yourself and make plans for the future**

Learn some relaxation techniques such as breathing exercises or listening to music. If you struggle to sleep, it can be helpful to talk to your doctor or nurse as they will be able to give you advice to improve this. Making plans gives you something to look forward to.

- **Maintain a healthy weight**

It is very common for men on hormone therapy to put on weight, often around the waist. If you are overweight, hormone therapy can be less effective, as well as making it harder to deal with the side effects. It also puts you at risk of bone thinning.

- **Eat healthily**

Eating well can help you feel more in control, as well as being good for general health and wellbeing.

- **Be as active as possible**

Even a small amount of physical activity can help with your overall wellbeing. It can help with some of the side effects you may experience with hormone therapy like weight gain, tiredness, sexual problems and feelings of anxiety and depression. Weight-bearing exercise like walking can also help with reducing your risk of broken bones and heart-related problems.



**For more information on diet and physical activity, you may find this fact sheet from Prostate Cancer UK useful.**

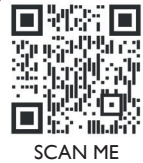


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- **Stop smoking**

Smoking can further increase your risk of bone thinning as well as increasing your risk of heart disease, stroke and some other cancers. It may also be harmful for men with prostate cancer. Stopping smoking can reduce your overall risk.

**For more information on stopping smoking, visit the NHS website.**

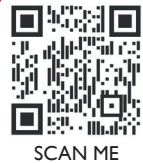


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- **Plan ahead**

Organising finances and making an up-to-date Will can help some men feel more in control of the situation.

**For more information on planning ahead, you may find this booklet produced by Prostate Cancer UK helpful.**



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- **Hospice support**

Hospices don't only care for those at the end of their life, they can help you with:

- pain control
- practical and financial advice
- emotional and spiritual support
- support for families

You can be referred to a hospice by your specialist, GP or nurse. If you do decide that having more information would be helpful, it is important to get it from trusted people and places. Your cancer care team can provide you with information, or you can find fact sheets or booklets either online or in print.

**A good place to start is the Prostate Cancer UK website where you can download or order information offering support.**



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**The charity also provides some extremely helpful information specifically for partners, friends and family.**



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You can find other sites which may be useful at the end of this booklet in the **Useful Links** section.



# Frequently asked questions



## **How often will I need a FIRMAGON® injection?**

Once a month.



## **How long will I be treated with FIRMAGON®?**

Your Urologist or Oncologist will review your condition regularly and you should continue your injections for as long as you and they agree that it is working for you.



## **Is FIRMAGON® different from other hormone therapies for advanced prostate cancer?**

Yes. FIRMAGON® works differently to most other hormone therapies. It works by blocking testosterone from being produced at its main source. As a result, it can achieve rapid symptom relief.



## **What if I miss an injection?**

If you miss, or think you have missed an injection, contact your local healthcare team straight away. It is always a good idea to set up your next appointment after you have received an injection. The patient diary provided in this pack can help with this.

# Common terminology

Here are some of the most frequently used terms mentioned in relation to prostate cancer:

## **ADT (androgen deprivation therapy):**

FIRMAGON® is in this group of drugs as it prevents androgens (sex hormones such as testosterone) from being produced and worsening your prostate cancer.

## **Gleason score:**

Based on how prostate cells look under the microscope, it is used to assess the aggressiveness of a prostate cancer.

## **GnRH (gonadotrophin releasing hormone):**

The hormone whose function is blocked by FIRMAGON®.

## **LUTS (lower urinary tract symptoms):**

Such as poor urinary stream, sudden urge to urinate, needing to urinate more often, waking at night to urinate and straining to urinate.

## **Metastasis:**

When a cancer spreads beyond its initial site either to nearby structures or distant organs and bones.

## **PSA (prostate specific antigen):**

Measured with a blood test to monitor how you are responding to treatment with FIRMAGON®.

## **TPV (total prostate volume):**

The size of your prostate measured by ultrasound scan.

# Useful links

Below are some QR codes to link you to websites offering further help and support about your condition.

## Prostate Cancer UK

<https://prostatecanceruk.org/>



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## NHS

<https://www.nhs.uk/conditions/coronary-heart-disease/prevention/>



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## Macmillan Cancer Support

<https://www.macmillan.org.uk/>



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## Cancer Research UK

<https://www.cancerresearchuk.org/>



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# Notes

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### **Reporting of side effects**

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at [yellowcard.mhra.gov.uk](https://yellowcard.mhra.gov.uk). By reporting side effects, you can help provide more information on the safety of this medicine.