

PSA ELEVATION POST SURGERY OR RADIATION
by Charles (Chuck) Maack – Prostate Cancer Advocate/Activist

Disclaimer: Please recognize that I am not a Medical Doctor. I have been an avid student researching and studying prostate cancer as a survivor and continuing patient since 1992. I have dedicated my retirement years to continued research and study in order to serve as an advocate for prostate cancer awareness, and, from a activist patient's viewpoint, to help patients, caregivers, and others interested develop an understanding of prostate cancer, its treatment options, and the treatment of the side effects that often accompany treatment. Readers of this paper must understand that the comments or recommendations I make are not intended to be the procedure to blindly follow; rather, they are to be reviewed as my opinion, then used for further personal research, study, and subsequent discussion with the medical professional/physician providing prostate cancer care.

How can our prostate cancer recur if the pathology report of the surgically removed prostate gland, seminal vesicles, and lymph nodes indicates the cancer appeared to have been contained within the gland, there were no cells identified at the gland margins, and the seminal vesicles and lymph nodes removed showed no evidence of the presence of prostate cancer; or even post-radiation?

A finite number of cells can migrate beyond the gland and its periphery and settle elsewhere wherein pathology of those organs removed in surgery, as well as imaging, is unlikely to identify their presence or the fact that they had migrated. As I read in a physics paper, they have "vanished outside a set of finite measure." See my paper "Prostate Cancer Spreads to Bone – Then What?" These cells then settle in an environment in our system that is conducive to their development and proliferation and eventually we become aware by an unusual elevation of our PSA level or future imaging that this development has become sufficient in cell numbers to cause this elevation or form an identifiable tumor.