

‘I WAS DIAGNOSED AT 33’: INSIDE THE RISE AND RISE OF AUSTRALIA’S MOST COMMON CANCER

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Prostate cancer is now the most common cancer in Australia, as well as being the most common cancer among men, who are much more likely than women to receive a cancer diagnosis overall.

New data from the Australian Institute of Health and Welfare estimates the number of prostate cancer cases will reach 29,000 this year, accounting for 30 per cent of the cancers among men.

The number of deaths from prostate cancer is also rising, from 2700 in 2000 to an estimated 4000 deaths in 2025. This compares with the estimated 20,000 cases this year of breast cancer – the most commonly diagnosed cancer for women in Australia – and 3300 deaths from the disease.

“The chances of survival for prostate and breast cancer, the most commonly diagnosed cancer among Australian males and females respectively, have been gradually improving,” AIHW spokesman Justin Harvey said.

For Professor Damien Bolton, president of the Urological Society of Australia and New Zealand, the findings are not unexpected.

“Even though so many more men are being diagnosed with prostate cancer, the rate of men dying from it is reducing,” he said.

“The ageing population and population growth gives rise to this prevalence.”

In 1994, prostate cancer mortality rates were 63 deaths per 100,000 males. In 2025, it was estimated prostate cancer mortality rates will be 33 deaths per 100,000 males – nearly half the peak rate.

“Men who have been diagnosed with prostate cancer can live a long and healthy life, provided the tumours are diagnosed early enough,” Professor

Bolton said.

Father-of-two Joel Brooker was diagnosed with prostate cancer when he was just 33, and said he is example of why people should get tested early.

“I was diagnosed by accident,” the Melbourne business owner said. “I was lethargic, so I got a check-for-everything blood test.

“(It) picked up elevated PSA levels. The doctor said at my age, it may not be anything.”

Mr Brooker stopped taking supplements; a biotin could have been a reason for his PSA levels.

“I did another blood test, and it was then that the doctor referred me to a urologist,” he said. “We did an MRI and a biopsy, which confirmed that I had prostate cancer.”

Mr Booker, who is now 37, said he was living with virtually “no problems”, besides the chore of regular blood checks.

“I now try to spread how easy it is to get tested for prostate cancer. I’m an example of why you shouldn’t wait to get tested,” he said. “This whole experience has reinforced how precious life is.”

Professor Bolton said the key factor in determining when and how often to get tested is if your family has a history of prostate cancer. “The majority of people who’ve got a family history of prostate cancer should start to have their PSA checks from around 40, once every five years or 10 years,” he recommended.

“All men should probably be having a PSA check every two years from the age of 50, and that’s available on Medicare.”