

THE
Educated Patient[®]

PSMA-Positive Metastatic Prostate Cancer

RESOURCE GUIDE



Presented by

cure[®]

A collection of resources that provide information and support for patients and the professionals who treat them



Not actual patient.

A targeted prostate cancer treatment that can help men with metastatic prostate cancer

If you have PSMA+ mCRPC, PLUVICTO™ (lutetium Lu 177 vipivotide tetraxetan) is the first and only treatment that targets PSMA+ cancer cells wherever they are in the body.

Talk to your doctor or visit [PLUVICTO.com](https://www.pluvicto.com)

Noncancerous PSMA+ cells and other surrounding cells will also be impacted.

mCRPC, metastatic castration-resistant prostate cancer; PSMA+, prostate-specific membrane antigen positive.

What is PLUVICTO™ (lutetium Lu 177 vipivotide tetraxetan)?

PLUVICTO is a radiopharmaceutical used to treat adults with an advanced cancer called prostate-specific membrane antigen-positive metastatic castration-resistant prostate cancer (PSMA-positive mCRPC) that:

- has spread to other parts of the body (metastatic), and
- has already been treated with other anticancer treatments

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about PLUVICTO?

Use of PLUVICTO involves exposure to radioactivity. Long-term, accruing radiation exposure is associated with an increased risk for cancer.

**PLUVICTO™**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

Please see additional Important Safety Information on the next page and Brief Summary of full Prescribing Information on the following pages.

IMPORTANT SAFETY INFORMATION

(continued)

What is the most important information I should know about PLUVICTO? (continued)

To minimize radiation exposure to others following administration of PLUVICTO, limit close contact (less than 3 feet) with household contacts for 2 days or with children and pregnant women for 7 days, refrain from sexual activity for 7 days, and sleep in a separate bedroom from household contacts for 3 days, from children for 7 days, or from pregnant women for 15 days.

PLUVICTO may cause serious side effects, including:

- **Low level of blood cell counts.** Tell your doctor right away if you develop any new or worsening symptoms, including:
 - Tiredness or weakness
 - Pale skin
 - Shortness of breath
 - Bleeding or bruising more easily than normal or difficulty stopping bleeding
 - Frequent infections with signs such as fever, chills, sore throat, or mouth ulcers
- **Kidney problems.** Tell your doctor right away if you develop any new or worsening symptoms, including passing urine less often or passing much smaller amounts of urine than usual

Before you receive PLUVICTO, tell your doctor if any of these apply to you:

- You have low level of blood cell counts (hemoglobin, white blood cell count, absolute neutrophil count, platelet count)

- You have or have had tiredness, weakness, pale skin, shortness of breath, bleeding or bruising more easily than normal or difficulty stopping bleeding, or frequent infections with signs such as fever, chills, sore throat, or mouth ulcers (possible signs of myelosuppression)
- You have or have had kidney problems
- You have or have had any other type of cancer or treatment for cancer, as PLUVICTO contributes to your long-term cumulative radiation exposure
- You are sexually active as:
 - All radiopharmaceuticals, including PLUVICTO, have the potential to cause harm to an unborn baby
 - You should use effective contraception for intercourse during treatment with PLUVICTO and for 14 weeks after your last dose
 - PLUVICTO may cause temporary or permanent infertility

Before administration of PLUVICTO, you should drink plenty of water in order to urinate as often as possible during the first hours after administration.

The most common side effects of PLUVICTO include:

- Tiredness
- Dry mouth
- Nausea
- Low red blood cell count
- Loss of appetite
- Changes in bowel movements (constipation or diarrhea)
- Vomiting
- Low blood platelet count
- Urinary tract infection
- Weight loss
- Abdominal pain

These are not all of the possible side effects of PLUVICTO. Call your doctor for advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Brief Summary of full Prescribing Information on the following pages.



Summary of Important Information

What is PLUVICTO™ (lutetium Lu 177 vipivotide tetraxetan)?

PLUVICTO is a radiopharmaceutical used to treat adults with an advanced cancer called prostate-specific membrane antigen–positive metastatic castration-resistant prostate cancer (PSMA-positive mCRPC) that:

- has spread to other parts of the body (metastatic), and
- has already been treated with other anticancer treatments

What is the most important information I should know about PLUVICTO?

The use of PLUVICTO involves exposure to radioactivity. Long-term, accruing radiation exposure is associated with an increased risk for cancer.

PLUVICTO may cause serious side effects, including:

- **Low level of blood cell counts.** Tell your doctor right away if you develop any new or worsening symptoms, including:
 - Tiredness or weakness
 - Pale skin
 - Shortness of breath
 - Bleeding or bruising more easily than normal or difficulty stopping bleeding
 - Frequent infections with signs such as fever, chills, sore throat or mouth ulcers
- **Kidney problems.** Tell your doctor right away if you develop any new or worsening symptoms, including passing urine less often or passing much smaller amounts of urine than usual

The most common side effects of PLUVICTO include:

- Tiredness
- Dry mouth
- Nausea
- Low red blood cell count
- Loss of appetite
- Changes in bowel movements (constipation or diarrhea)
- Vomiting
- Low blood platelet count
- Urinary tract infection
- Weight loss
- Abdominal pain

These are not all of the possible side effects of PLUVICTO. Call your doctor for advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

What should I tell my doctor before receiving PLUVICTO therapy?

Before you receive PLUVICTO, tell your doctor if any of these apply to you:

- You have low level of blood cell counts (hemoglobin, white blood cell count, absolute neutrophil count, platelet count)
- You have or have had tiredness, weakness, pale skin, shortness of breath, bleeding or bruising more easily than normal or difficulty to stop bleeding, or frequent infections with signs such as fever, chills, sore throat, or mouth ulcers (possible signs of myelosuppression)
- You have or have had kidney problems
- You have or have had any other type of cancer or treatment for cancer, as PLUVICTO contributes to your long-term cumulative radiation exposure
- You are sexually active as:
 - All radiopharmaceuticals, including PLUVICTO, have the potential to cause harm to an unborn baby
 - You should use effective contraception for intercourse during treatment with PLUVICTO and for 14 weeks after your last dose
 - PLUVICTO may cause temporary or permanent infertility

Before administration of PLUVICTO, you should drink plenty of water in order to urinate as often as possible during the first hours after administration.

How will I receive PLUVICTO?

- There are strict laws on the use, handling and disposal of radiopharmaceutical products. PLUVICTO will only be used in special controlled areas. This product will only be handled and given to you by people who are trained and qualified to use it safely. These persons will take special care for the safe use of this product and will keep you informed of their actions
- The recommended dose is 7.4 GBq (gigabecquerel, the unit used to express radioactivity)
- PLUVICTO is given approximately every 6 weeks for a total of 6 doses
- PLUVICTO is administered directly into a vein
- Your nuclear medicine doctor will inform you about the usual duration of the procedure
- If you have any questions about how long you will receive PLUVICTO, talk to your nuclear medicine doctor
- Your nuclear medicine doctor will do blood tests before and during treatment to check your condition and to detect any side effects as early as possible. Based on the results, your nuclear medicine doctor may decide to delay, modify or stop your treatment with PLUVICTO if necessary
- An overdose is unlikely. However, in the case of an overdose, you will receive the appropriate treatment
- If you miss an appointment for an administration, contact your nuclear medicine doctor as soon as possible to reschedule

After administration of PLUVICTO, you should:

- Remain hydrated and urinate frequently in order to eliminate the product from your body
- Limit close contact (less than 3 feet) with others in your household for 2 days or with children and pregnant women for 7 days
- Refrain from sexual activity for 7 days
- Sleep in a separate bedroom from others in your household for 3 days, from children for 7 days, or from pregnant women for 15 days
- The nuclear medicine doctor will inform you if you need to take any special precautions after receiving this medicine. This may include special precautions for you or your caregiver with regard to toilet use, showering, laundry, waste disposal, emergency medical assistance, unplanned hospitalization or traveling. Contact your nuclear medicine doctor if you have any questions

General information about the safe and effective use of PLUVICTO

Talk to your nuclear medicine doctor about any concerns. You can ask your nuclear medicine doctor for information about PLUVICTO that is written for healthcare professionals.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

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About Metastatic Prostate Cancer

Prostate cancer (PC) involves development of malignant (cancerous) cells in the prostate, a gland in the male reproductive system that produces some of the fluid that makes up semen.¹ In 2022, an estimated 268,000 new cases of PC will be diagnosed in the United States. PC is the second most prevalent cancer found in men in the United States; approximately one in every eight men will be diagnosed with the disease at some point during their lives, with older and non-Hispanic Black men being the most vulnerable. Men aged at least 65 years account for six of every 10 occurrences, with the average age at diagnosis being 66 years.²

Understanding Stage of Disease

Immediately following diagnosis, your doctor should order various medical tests, assess the stage of your cancer and investigate whether and how far the cancer has spread (metastasized). Identifying the stage of your cancer is most important when your doctor is deciding on appropriate options for your treatment and a clinical course of action.

The TNM system is a standard method for staging cancer. To use this system to stage your PC, your doctor will gather information on five areas of concern: the extent of the main tumor (T); any spread to nearby lymph nodes (N); metastasis of the cancer (M); your blood level of prostate-specific antigen (PSA), a factor that is found in abnormally high quantities when PC is diagnosed; and the grade of your tumor.³ Tumor grade provides additional information about the aggressiveness of cancer.⁴ In PC, clinicians use the Gleason score to rate the tumor grade from six (low grade) to 10 (high grade). Also in PC, the T category is split into clinical T (an estimate based on a physical exams and imaging) and pathologic T (a more accurate measure only determined if your prostate is removed and cells are analyzed).³ After compiling and considering all of this information, your doctor will determine the overall stage of your cancer.³

Stages of PC span from 1 to 4. Stage 1 refers to cancers that are contained within the bounds of the prostate. Stages 2 and 3 imply that the cancer is locally advanced, growing within the prostate and possibly spreading to nearby tissues. Stage 4, also known as metastatic PC (mPC), indicates that the cancer has spread to organs and tissues in other parts of the body.³

In metastatic disease, cancer cells travel through the lymphatic or circulatory system and form tumors elsewhere.⁵ Later stages of cancer typically

are more aggressive, which means that the disease forms, grows or spreads more quickly.⁶ Patients with aggressive forms of cancer may go through standard treatment options more quickly than do patients with nonaggressive tumors.⁷

Understanding the Difference Between PSA and PSMA

Your PSA level plays a central role in determining the stage of your PC.⁴ PSA is a protein produced by the prostate gland that can be detected by blood testing.⁸ Elevated PSA levels in the blood can serve as an indicator of PC. PSA levels are closely monitored after a patient receives a diagnosis of PC to find out if current treatments are effective and if the disease is progressing.⁴

Prostate-specific membrane antigen (PSMA) is another protein that provides information about PC progression. PSMA stays attached to cell membranes; it is found at much higher levels on the surfaces of malignant cells than on those of healthy ones.^{8,9} PSMA analysis helps to identify advanced disease that has spread to other organs or parts of the body.

Information about both PSA and PSMA is useful for guiding treatment decisions.^{4,10} Moreover, because PSMA does not circulate in blood, it provides a unique opportunity target to attack PC cells, even those that have metastasized, with precision medicine and targeted therapies.⁸

PSMA Detection

PSMA-targeted PET imaging is effective for making a diagnosis of PC, determining prognosis and monitoring treatment. Traditional diagnostic techniques (e.g., bone, MRI and CT scans) provide valuable information and are often used to complement PET scans. Results of PSMA PET/CT testing that indicate the presence and location of metastases often help health care providers to select personalized treatment options.⁹

To perform the scan, PSMA-targeted radioactive imaging agents first are injected into the patient's bloodstream; these agents are attracted to PSMA proteins wherever they may be throughout the body.¹¹ Importantly, these radioactive agents are FDA-approved, and they are given at extremely low doses.¹¹ The patient then is placed in the PET scanner, which produces a three-dimensional image that shows where the imaging agents accumulated and where the cancer cells are located.¹²

Treatment Options for mPC

The prognosis for mPC is typically less favorable than it is for local or regional PC; however, there are several treatment options that may slow the growth and spread of mPC.^{13,14} The main treatment challenge in most cases of mPC is that the cancer might respond to treatment at first but then become resistant over time.⁷ Advanced and metastatic tumors can even grow in the low-testosterone environments that result from androgen deprivation therapy (ADT), which involves lowering your levels of male sex hormones.¹⁵ You likely will discuss some or all the following common treatment options with your doctor:

- Immunotherapy uses agents that increase the body's natural immune response to cancer cells.¹⁶
- ADT involves hormone treatment to lower testosterone levels and slow the growth of cancer cells.¹⁶
- Chemotherapy uses drugs that can stunt the growth of, or even destroy, cancer cells.¹⁶
- Targeted drug therapy entails use of agents (e.g., medications, radiopharmaceuticals) that attack certain biomarkers and interfere with the functions of malignant cells.¹⁶
- Surgery involves the removal of the prostate and some surrounding lymph nodes by a surgeon. Additionally, the testicles can be removed surgically to reduce your testosterone levels.^{13,16}
- Radiation therapy uses high-energy X-rays or other particles to kill cancer cells and stop tumor growth.¹⁷ Radiation therapy can be given inside or outside of the body. External-beam radiation therapy uses a machine to deliver radiation to parts of the body with cancerous cells.¹⁷ Internal radiation therapy relies on small, seed-like implants that contain radioactive material and release radiation into surrounding tissue.¹⁷ Alternatively, radiophar-

maceuticals are drugs that carry radioactive particles; after they are injected into the bloodstream, they circulate in the body, find and bind to a particular protein on the cancer cell and then release radiation to kill the cancer cell.¹⁸

Treatment for PSMA-Positive mPC

PSMA-positive mPC requires additional treatment considerations. PSMA expression is associated with aggressive disease and early recurrence.¹⁹ As previously stated, the highest concentrations of PSMA are found on the surface of mPC cells. Targeted therapies are designed to attack certain proteins that show up in greater amounts on the surface of cancer cells than on normal cells.⁸ Nuclear medicine uses radiopharmaceuticals that bind to a protein and release radiation into the surrounding tissues. Precise targeting of cancer cells helps to make the treatment as effective as it can be and cause as little damage to healthy tissues as possible.¹⁸

This treatment method requires time for preparation. Your doctor and you will decide on the best option, but it can take a month or more to finish the imaging and blood tests needed to personalize your medication strategy. After that, you will be scheduled for your first infusion session. A full course of treatment consists of up to four infusion sessions spaced eight weeks apart.

The radiopharmaceutical is given intravenously, and you may be given other drugs to prevent nausea or protect your other organs. Once the drug enters the bloodstream, it targets cancer cells and begins to release radiation, which damages the cancer cells beyond repair. Excess radiopharmaceuticals in your bloodstream are removed from your body in your urine.¹⁸ Common side effects for PSMA-targeted radiopharmaceuticals include nausea, hair loss and dry mouth.^{18,20}

Using Radiation to Treat Cancer

A common concern about receiving radiation treatment is that it may not be safe to be around friends and family after treatment. You should take precautions after being treated with radiation therapy, but exposure to dangerously high radiation sources, even for short periods of time, is very different from medical treatment with radiation.²¹ The controlled and precise nature of medical radiation greatly reduces exposure risk. For example, your doctor might recommend that you maintain a certain distance from your family members for a period after treatment, but it is perfectly safe to be in the same house as someone who is taking radiopharmaceuticals. Other common safety precautions include limiting time spent in common areas,

avoiding contact with frequently used surfaces/appliances and limiting the exposure of other people to biohazards like your saliva, blood or waste products.¹⁷

Following treatment, patients generally limit close contact (within three feet) with others for at least two days. Close contact with pregnant women or children should be limited for up to seven days. You should sleep in a separate bedroom from others for at least three days; this recommendation is extended to seven days when dealing with children and up to 15 days for being with pregnant women.²² As with all facets of patient care, it is important to talk with your care team to discuss your best safety strategies.

Patient Care Team

After being diagnosed with mPC, you will likely meet with a variety of health care professionals who make up your patient care team. For PC, this team likely will include a urologist and a medical oncologist, who are experts in urinary system diseases and cancer treatment, respectively. Over the course of your treatment, other specialists, such as a radiation oncologist or surgical oncologist, likely will join your care team.²³

When radiopharmaceuticals are needed, nuclear medicine radiologists, technologists and pharmacists can contribute their expertise to ensure that you are receiving proper care. Nuclear radiologists can assess whether use of radiopharmaceuticals is appropriate; they may use scintigraphy, which involves injecting one of these agents into the bloodstream and then obtaining a two-dimensional image of organs and tissues using a special camera.²⁴ Nuclear technologists often give radiopharmaceuticals to patients and assist the radiologist by analyzing biological specimens and scans.²⁴ Nuclear pharmacists prepare radiopharmaceuticals; they can provide insights on safety concerns regarding these radioactive drugs.²⁴

Health, Diet and Emotional Support

Your care team and you will pay close attention to your physical health as it relates to PC and your treatment, but it is important that you also address your general health and wellness. Your mental and emotional health, diet, exercise and quality of life are important considerations during your treatment journey.

Health

Treatments for PC can cause changes in body function that may result in various symptoms and side effects. Fatigue, difficulty sleeping, frequent urination and hot flashes are common.²⁵ To limit the severity and frequency of symptoms, your care team might recommend that you try to improve your sleeping habits and physical fitness and limit harmful practices (e.g., alcohol consumption, tobacco use).²⁶

Diet

Research on the impact of diet on PC is limited, but there are some generally beneficial dietary choices that may help you recover from treatment and even reduce the odds that your cancer returns.²⁷ Your care team likely will recommend a combination of cutting out potentially harmful products and supplementing your diet with wholesome foods that can help preserve your immune system and increase your energy levels.²⁷

Emotional Support

As you begin to prioritize your physical health during treatment, you should not neglect your emotional health. A diagnosis of cancer may be a heavy emotional burden; it is easy to feel overwhelmed, angry, afraid and depressed.²⁵ Changes associated with sexual function, a known symptom of PC, can result in feelings of sexual insecurity and uncertainty.²⁵ Talking with the people in your life and your care team about these feelings is critical for maintaining positivity and stability through treatment.²⁸ Joining a support group can be a very positive experience that can help you to receive information about moving forward during and after treatment.²⁸

HOW TO USE

QR CODES

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2.



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3.



Tap the pop-up notification on your screen to open the web link in your browser.



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Frequently Asked Questions

When is nuclear medicine used, and how does it work?

Nuclear medicine is the term for drug therapies that use radioactive particles in a targeted way to destroy cancer cells.¹⁸ These radioactive particles, known as radiopharmaceuticals, bind to a particular protein found in the tumor during testing and release radiation into the surrounding tissues.¹⁸

Are any preparations required before treatment?

Most treatments require blood tests and other clinical assessments before treatment. Consult your care team for information specific to your treatment strategy.¹⁸

How is treatment given?

Treatment is usually given intravenously in an outpatient setting. Patients may receive up to four infusions, which are typically given eight weeks apart. Consult with your care team for more information regarding your specific treatment plan.¹⁸

To how much radiation will I be exposed?

The actual amount of radiation will vary based on your specific treatment. However, the controlled, precise nature of medical radiation means you are exposed to as little radioactivity as possible during treatment.²¹

Will I be radioactive after I receive treatment?

Yes, you will be slightly radioactive after treatment. However, your care team should take special precautions to develop an effective treatment plan that ensures that your radiation

exposure will be as low as possible. Radioactive materials can be present in body fluids following treatment, so you should take certain precautions to limit exposure for others around you.²⁹

Do I need to take any special precautions after my diagnostic nuclear medicine procedure?

Take extra care to ensure that others do not use objects with which you have close contact; these would include clothes, blankets and utensils. You should maintain a certain distance (three to six feet) from your family members for a period of time after treatment. However, it is perfectly safe to be in the same house as someone treated with radiopharmaceuticals. Limit your time spent in common areas, keep away from contact with frequently used surfaces/appliances and avoid contact of others with your saliva, blood or waste products.¹⁷ Ask your care team for more information regarding your specific treatment plan.¹⁷

Can I be around pregnant women or children?

Following treatment, avoiding close contact (within three feet) with others for at least two days and not sleeping in the same bed for three days is recommended. However, children and pregnant women are more susceptible to effects from radiation. Therefore, you should follow these precautions for seven days around children and up to 15 days around pregnant women.²²

What are the side effects of the therapy?

Common side effects include tiredness or weakness, pale skin, shortness of breath, hair loss and loss of appetite.^{18,30}

Glossary of Terms

Adenocarcinoma: a type of cancer that begins in cells that produce mucus, such as those in the bowel, breast and prostate³¹

ADT: androgen deprivation therapy; a type of hormone therapy designed to lower the level of androgens (male sex hormones) to help slow prostate cancer growth³²

Biomarker: a change in genes or proteins known to be involved in a disease that can be used to screen for cancer and to predict or monitor response to treatment^{33,34}

Chemotherapy: treatment designed to kill cancer cells or prevent them from multiplying⁶

CT scan: computed tomography; a scan using contrast and a series of X-ray images from different angles to view two-dimensional cross-sections of the body³⁵

Gleason score: a system used to group prostate cancer into five categories based on the microscopic characteristics of the cancer cells³⁶

Hormone therapy: treatment designed to lower levels of hormones to help slow prostate cancer growth³²

Immunotherapy: treatment designed to improve the immune system's response to cancer cells³²

mPC: metastatic prostate cancer; disease that has progressed by spreading from the prostate to other parts of the body⁵

MRI scan: magnetic resonance imaging; a scan using a magnetic field to create detailed three-dimensional images of the body that is often used to view organs and soft tissue⁶

Nuclear medicine: a technique involving the use of radioactive materials to diagnose or treat disease³⁷

PC: prostate cancer; a disease caused by the abnormal growth of cells in the prostate³⁸

PET scan: positron emission tomography; a three-dimensional scan using a tracer dye that helps to evaluate organ and tissue function³⁹

Prostate biopsy: a procedure involving the removal of tissue samples from the prostate to look for signs of prostate cancer⁴⁰

Prostate gland: part of the male reproductive system involved in ejaculatory function, hormone metabolism and seminal fluid production⁴¹

PSA: prostate-specific antigen; a protein released by the prostate that can be used as a biomarker in prostate cancer to help physicians monitor disease progression⁸

PSMA: prostate-specific membrane antigen; a protein on the cell surface that can be used as a biomarker in prostate cancer to identify where the disease has progressed and inform precision medicine-based decisions about treatment^{8,42}

Radiation therapy: a category of treatment that uses high-energy rays to kill cancer cells³²

Radiopharmaceuticals: drugs containing radioactive material that can deliver radiation therapy to cells inside the body³²

Targeted drug therapy: drugs that leave healthy cells alone as they attack changes in cancer cells that help them to grow, divide and spread⁴³

Questions to Ask Your Physician⁴⁴⁻⁴⁹

How do the treatments differ for patients with metastatic disease?

What is prostate-specific membrane antigen (PSMA)-positive metastatic prostate cancer (mPC)?

What does a PSMA-positive mPC diagnosis mean for my prognosis?

What are my treatment options for PSMA-positive mPC?

What should I expect if I receive a PSMA-positive targeted treatment?

Do I need any other tests before we decide on treatment?

Should I see any other types of doctors before deciding on treatment?

How will I know if the treatment is working?

Is there anything I can do to manage side effects?

Will I have problems with bladder control or sexual function?

What kind of follow-up can I expect after treatment?

How often will I need to have follow-up examinations and testing? What tests will I need?



ADDRESS

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New York, NY 10101

CONTACT INFO

Phone: 888-301-4414
Email: website form or info@fansforthecure.org

FANS for the CURE

fansforthecure.org

Founded by sports broadcaster Ed Randall following his prostate cancer diagnosis in 2003, FANS for the CURE began by offering awareness and educational materials at minor league baseball stadiums. The organization has since expanded its reach beyond the ballpark and now partners with community hospitals to offer a wide spectrum of educational, screening and speaking events for fans with prostate cancer and their families.

Resource checklist:

- ✓ Free screening events and health fairs
- ✓ Education and support groups
- ✓ Speaking engagements and events



CONTACT INFO

Phone: 212-673-4920
Email: darryl@malecare.org

Global Prostate Cancer Alliance

www.prostatecanceralliance.org

The Global Prostate Cancer Alliance builds awareness of prostate cancer locally, nationally and internationally to assist men in accessing affordable care. The organization distributes important information through media, online education, archives and publications.

Resource checklist:

- ✓ Online patient support groups
- ✓ Patient assistance programs
- ✓ Online information



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CONTACT INFO

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Email: info@malecare.org

Malecare

www.malecare.org

Founded to address cancers that occur in men, Malecare is a nonprofit group staffed by oncologists, psychologists and social workers who help men and their loved ones live long and happy lives. The organization sets the standard for peer-to-peer support. It offers several men’s health programs for underserved populations, such as Black, LGBT and Hispanic men.

Resource checklist:

- ✓ Caregiver support
- ✓ Online information
- ✓ Online prostate cancer support groups



CONTACT INFO

Email: website form;

info@menshealthnetwork.org

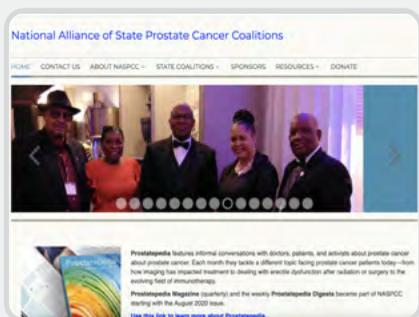
Men’s Health Resource Center

www.menshealthresourcecenter.com

The Men’s Health Resource Center provides information about men’s health and diseases, including prostate cancer. The organization’s goal is to help men to adopt preventive health measures and take an active approach to their health.

Resource checklist:

- ✓ Health articles
- ✓ Health conditions
- ✓ Interactive tools



ADDRESS

1999 Avenue of the Stars, Suite 1100
Los Angeles, CA 90067

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Phone: 424-253-1168
Email: info@naspcc.org

National Alliance of State Prostate Cancer Coalitions (NASPCC)

naspcc.org

The NASPCC is dedicated to improving prostate cancer awareness, education, clinical trials and treatment by bringing state prostate cancer coalitions together under a shared network. The NASPCC aims to provide resources for state prostate cancer organizations to foster the development of a public policy network to support patients with prostate cancer.

Resource checklist:

- ✓ Webinars and conferences
- ✓ Prostatepedia and information for caregivers
- ✓ Best practice guidelines



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8455 Colesville Road, Suite 930
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CONTACT INFO

Phone: 877-622-7937
Email: website form; info@canceradvocacy.org

National Coalition for Cancer Survivorship

www.canceradvocacy.org

The National Coalition for Cancer Survivorship advocates on behalf of patients with cancer and calls for changes in policy regarding research, regulation and finances. It encourages quality cancer care for all by working with legislators on policy change and education. The coalition was started in 1986 by patients with cancer for others given a diagnosis of cancer.

Resource checklist:

- ✓ Public policy information
- ✓ Cancer advocacy
- ✓ Cancer survival toolbox
- ✓ Online blog



ADDRESS

421 Butler Farm Road
Hampton, VA 23666

CONTACT INFO

Phone: 800-532-5274

Email: website form; help@patientadvocate.org

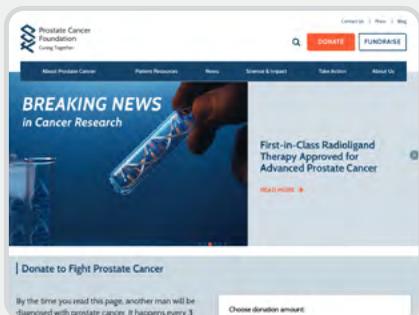
Patient Advocate Foundation

www.patientadvocate.org

The Patient Advocate Foundation is a national nonprofit organization that serves as an active liaison between patients and their insurers, employers and creditors to resolve diagnosis-related insurance, job retention and debt crisis issues through case managers, physicians and attorneys. The foundation seeks to safeguard patients through effective mediation to ensure access to care, maintenance of employment and preservation of financial stability.

Resource checklist:

- ✓ Insurance and financial information
- ✓ Co-pay assistance
- ✓ Free webinars and information sessions



ADDRESS

1250 Fourth St.
Santa Monica, CA 90401

CONTACT INFO

Phone: 800-757-CURE (800-757-2873);
310-570-4700

Email: info@pcf.org

Prostate Cancer Foundation (PCF)

www.pcf.org

PCF was started in 1993 to give hope to men who receive a diagnosis of prostate cancer. The foundation is dedicated to investing in the most promising research about prevention, detection and treatment of prostate cancer. PCF provides patients and their families with information, patient guides and news as well as patient stories and support group information.

Resource checklist:

- ✓ Patient stories
- ✓ Free patient guide
- ✓ Prostate cancer informational guides
- ✓ News
- ✓ Support group information



ADDRESS

10016 Edmonds Way, Suite C, No. 153
Edmonds, WA 98020

CONTACT INFO

Phone: 206-453-2987

Email: info@prostatecancerfree.org

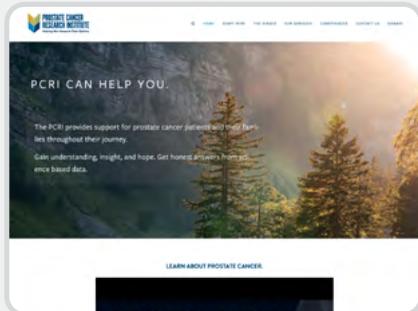
Prostate Cancer Free Foundation

www.prostatecancerfree.org

The Prostate Cancer Free Foundation helps patients make the best decisions regarding their prostate cancer treatment by offering information and education about the disease. This foundation also provides an open and inclusive community providing clear and graphic data and information.

Resource checklist:

- ✓ Prostate cancer patient guide
- ✓ Video library
- ✓ Prostate cancer information
- ✓ Prostate cancer patient work sheet



ADDRESS

300 Corporate Pointe, Suite 383
Culver City, CA 90230

CONTACT INFO

Phone: 310-743-2116

Email: website form; help@pcri.org

Prostate Cancer Research Institute (PCRI)

www.pcri.org

PCRI enables patients to take a closer look at treatment options. Designed by a team of multidisciplinary experts, this institute educates patients about their disease to empower them and provides tools like conferences, helplines, brochures and more to help men communicate better with their health care providers.

Resource checklist:

- ✓ Newsletters
- ✓ Conferences
- ✓ Staging guide
- ✓ Helpline
- ✓ Support group information



ADDRESS

7208 S. Tucson Way, Suite 230
Centennial, CO 80112

CONTACT INFO

Phone: 866-4-PROST8 (886-477-6788)

Email: website form

Prostate Conditions Education Council

www.prostateconditions.org

The Prostate Conditions Education Council is a nonprofit organization that prioritizes patient education to help save lives through learning and awareness. This national organization strives to reach men with prostate cancer, their close friends and family members and the medical community about prostate cancer prevalence, the importance of early detection and available treatment options.

Resource checklist:

- ✓ Outreach programs
- ✓ Prostate cancer information
- ✓ Clinical trial information



ADDRESS

500 Victory Road, 4th Floor
Quincy, MA 02171

CONTACT INFO

Phone: 617-481-4020

Email: rapcancer@prostatehealthd.org

Prostate Health Education Network (PHEN)

www.prostatehealthd.org

In the United States, Black men have the highest incidence and mortality rates related to prostate cancer. PHEN was founded in 2003 by a prostate cancer survivor. To help eliminate prostate cancer diagnosis and treatment disparities, PHEN provides online networks, monthly support group meetings and other resources to educate patients and to work toward a cure.

Resource checklist:

- ✓ Clinical trial information
- ✓ Information and statistics
- ✓ Survivor network
- ✓ Church partnerships
- ✓ PHEN Survivor Network



ADDRESS

500 Westover Dr., No. 13149
Sanford, NC 27330

CONTACT INFO

Email: support@prostatenet.org

Spanish information:

www.theprostatenet.org/espanol

The Prostate Net (TPN)

www.theprostatenet.org

TPN is a patient education and advocacy organization that seeks to inform the community about prostate cancer, create open lines of communication between medical staff and the community and motivate consumers to make informed and educated choices concerning their health. TPN delivers information to at-risk communities to connect them with public health departments.

Resource checklist:

- ✓ The BarberShop Initiative
- ✓ Press and news
- ✓ Podcast
- ✓ Online information
- ✓ Workshops and seminars



ADDRESS

515 King St., Suite 420
Alexandria, VA 22314

CONTACT INFO

Phone: 202-463-9455; 844-244-1309

Email: info@zerocancer.org

ZERO – The End of Prostate Cancer

www.zerocancer.org

ZERO – The End of Prostate Cancer is a nonprofit organization that provides support for men given a diagnosis of prostate cancer. With a focus on education, ZERO provides information to families and patients. Through financial assistance programs, ZERO has helped more than 48,000 men with advanced prostate cancer afford treatment.

Resource checklist:

- ✓ UsTOO support groups
- ✓ Support line
- ✓ Resource library
- ✓ Prostate cancer news
- ✓ Peer-to-peer support
- ✓ ZERO360: Comprehensive Patient Support
- ✓ Financial assistance programs

American Cancer Society (ACS): Understanding Health Insurance

www.cancer.org/treatment/finding-and-paying-for-treatment/understanding-health-insurance.html

The ACS is a global grassroots force of 1.5 million volunteers dedicated to saving lives, celebrating survivorship and leading the fight for a world without cancer. This page provides links to topics such as options for the uninsured, sources of financial help, disability benefits, health plans, issues concerning health insurance, handling medical payments, dealing with claims denials and more.

Resource checklist:

- ✓ Cancer basics and general information
- ✓ Health insurance resource information
- ✓ Latest research updates
- ✓ Downloadable PDFs



ADDRESS

250 Williams St. NW
Atlanta, GA 30303

CONTACT INFO

Phone: 800-227-2345
Email: website form

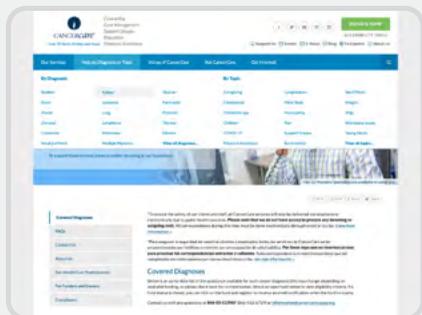
CancerCare Co-Payment Assistance Foundation

www.cancercarecopay.org

CancerCare has provided free, professional support services and credible information for patients with cancer since 1944. In addition to emotional and practical support resources, this organization offers financial support to cover co-payments, coinsurance and deductibles as well as grants to support other costs of treatment.

Resource checklist:

- ✓ Counseling and support groups
- ✓ Information by cancer type
- ✓ Financial assistance resources



ADDRESS

275 Seventh Ave., 22nd Floor
New York, NY 10001

CONTACT INFO

Phone: 866-55-COPAY (866-552-6729)
Email: information@cancercarecopay.org



ADDRESS

1719 Route 10, Suite 303
Parsippany, NJ 07054

CONTACT INFO

Phone: 973-394-1411
Email: website form

ADDRESS

142 Berkeley St., 3rd Floor
Boston, MA 02116

CONTACT INFO

Phone: 847-233-2764
Email: website form

Family Reach

www.familyreach.org

Formed in 1996 by two New Jersey families closely affected by the loss of loved ones to cancer, Family Reach has become a national nonprofit organization offering innovative solutions to the financial hardships associated with cancer treatment.

Resource checklist:

- ✓ Emergency financial relief
- ✓ Financial coaching and educational resources
- ✓ Online blog



ADDRESS

2611 Internet Blvd., Suite 105
Frisco, TX 75034

CONTACT INFO

Phone: 877-968-7233
Email: admin@mygooddays.org

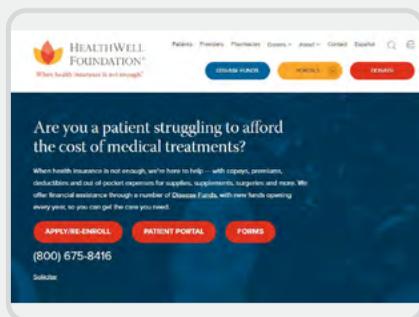
Good Days

www.mygooddays.org

Good Days is strongly committed to patients with chronic disease, cancer, and other life-altering conditions. Through its progressive assistance programs, the organization provides financial support to help patients obtain the medications they need. Using a modernized workflow, a prevalent public fundraising presence and its expansive network of trusted partners, Good Days continuously pursues its mission to remove barriers to patient access.

Resource checklist:

- ✓ Financial assistance
- ✓ Information on support and advocacy groups
- ✓ Blogs and patient testimonials



ADDRESS

P.O. Box 489
Buckeystown, MD 21717

CONTACT INFO

Phone: 800-675-8416
Email: grants@healthwellfoundation.org

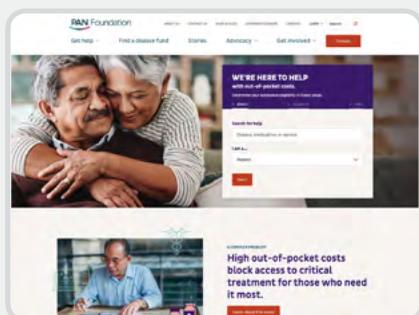
HealthWell Foundation

www.healthwellfoundation.org

The HealthWell Foundation is an independent nonprofit organization dedicated to reducing financial barriers to care for underinsured Americans with chronic and life-altering medical conditions. HealthWell offers a financial lifeline to adults and children who desperately need critical medical treatments but can't afford them by assisting with their cost-sharing obligations. The site contains general information on what the foundation does, how to apply for assistance and how providers and others can advocate on behalf of a patient.

Resource checklist:

- ✓ Support helpline
- ✓ Financial assistance
- ✓ Pharmacy card and medication information tools



ADDRESS

805 15th St. NW, Suite 500
Washington, DC 20005

CONTACT INFO

Phone: 800-394-0161; 866-316-7263
Email: website form; info@panfoundation.org

Patient Access Network (PAN) Foundation

www.panfoundation.org

The PAN Foundation was founded in 2004 to assist underinsured patients and provide financial support for out-of-pocket costs associated with the treatment of prostate cancer and other life-threatening, chronic or rare diseases. Since its inception, the organization has provided more than \$300 million to more than 180,000 underinsured patients.

Resource checklist:

- ✓ Financial assistance
- ✓ Support programs
- ✓ Donation portal

Resource Reference Chart

WEBSITE	ADDRESS	CONTACT INFORMATION
FANS for the CURE fansfortheure.org	P.O. Box 213 New York, NY 10101	Phone: 888-301-4414 Email: website form or info@fansfortheure.org
Global Prostate Cancer Alliance www.prostatecanceralliance.org		Phone: 212-673-4920 Email: darryl@malecare.org
Malecare www.malecare.org	85 Delancey St., 3 rd Floor, No. 9 New York NY 10002	Phone: 212-673-4920 Email: info@malecare.org
Men's Health Resource Center www.menshealthresourcecenter.com/		Email: website form or info@menshealthnetwork.org
National Alliance of State Prostate Cancer Coalitions (NASPCC) naspcc.org	1999 Avenue of the Stars, Suite 1100 Los Angeles, CA 90067	Phone: 424-253-1168 Email: info@naspcc.org
National Coalition for Cancer Survivorship www.canceradvocacy.org	8455 Colesville Road, Suite 930 Silver Spring, MD 20910	Phone: 877-622-7937 Email: website form or info@canceradvocacy.org
Patient Advocate Foundation www.patientadvocate.org	421 Butler Farm Road Hampton, VA 23666	Phone: 800-532-5274 Email: website form or help@patientadvocate.org
Prostate Cancer Foundation (PCF) www.pcf.org	1250 Fourth St. Santa Monica, CA 90401	Phone: 800-757-CURE (800-757-2873) or 310-570-4700 Email: info@pcf.org
Prostate Cancer Free Foundation www.prostatecancerfree.org	10016 Edmonds Way, Suite C, No. 153 Edmonds, WA 98020	Phone: 206-453-2987 Email: info@prostatecancerfree.org
Prostate Cancer Research Institute (PCRI) www.pcri.org	300 Corporate Pointe, Suite 383 Culver City, CA 90230	Phone: 310-743-2116 Email: website form or help@pcri.org
Prostate Conditions Education Council www.prostateconditions.org	7208 S. Tucson Way, Suite 230 Centennial, CO 80112	Phone: 866-4-PROST8 (886-477-6788) Email: website form
Prostate Health Education Network (PHEN) www.prostatehealthed.org	500 Victory Road, 4 th Floor Quincy, MA 02171	Phone: 617-481-4020 Email: rapcancer@prostatehealthed.org
The Prostate Net (TPN) www.theprostatenet.org	500 Westover Dr., No. 13149 Sanford, NC 27330	Email: support@prostatenet.org Spanish information: www.theprostatenet.org/espanol
ZERO – The End of Prostate Cancer www.zerocancer.org	515 King St., Suite 420 Alexandria, VA 22314	Phone: 202-463-9455 or 844-244-1309 Email: info@zerocancer.org

WEBSITE	ADDRESS	CONTACT INFORMATION
American Cancer Society: Understanding Health Insurance www.cancer.org/treatment/finding-and-paying-for-treatment/understanding-health-insurance.html	250 Williams St. NW Atlanta, GA 30303	Phone: 800-227-2345 Email: website form
CancerCare Co-Payment Assistance Foundation www.cancercarecopay.org	275 Seventh Ave., 22 nd Floor New York, NY 10001	Phone: 866-55-COPAY (866-552-6729) Email: information@cancercarecopay.org
Family Reach www.familyreach.org	1719 Route 10, Suite 303 Parsippany, NJ 07054	Phone: 973-394-1411 Email: website form
	142 Berkeley St., 3 rd Floor Boston, MA 02116	Phone: 847-233-2764 Email: website form
Good Days www.mygooddays.org	2611 Internet Blvd., Suite 105 Frisco, TX 75034	Phone: 877-968-7233 Email: admin@mygooddays.org
HealthWell Foundation healthwellfoundation.org	P.O. Box 489 Buckeystown, MD 21717	Phone: 800-675-8416 Email: grants@healthwellfoundation.org
Patient Access Network (PAN) Foundation panfoundation.org	805 15 th St. NW, Suite 500 Washington, DC 20005	Phone: 800-394-0161 or 866-316-7263 Email: website form or info@panfoundation.org

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