



**ASK THE EXPERTS**



**Updates in Hereditary Prostate Cancer**



"FORCE improves the lives of the millions of individuals and families facing hereditary breast, ovarian, pancreatic, prostate, colorectal and endometrial cancers.



# FORCE Programs



## Support

Personalized Peer Support

Virtual Support Groups

Private Facebook Group and  
Message Boards

Helpline



## Advocacy & Public Policy

State & Federal Advocacy Efforts

Advocacy Day

Patient Advocate Leader Training

Take Action Campaigns



## Education

Information on Genes &  
Hereditary Cancers

XRAY – Behind the Cancer  
Headlines

Educational Brochures &  
Decision Guides

Ask the Experts Webinar Series



## Research

Research Matching and Targeted  
Study Promotion

Researcher Training, Assistance  
and Collaborations

Research Advocate Training

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# Speakers



**Fatima Karzai, MD**

Urologic Oncologist  
National Cancer Institute



**Bruce Montgomery, MD**

Urologic Oncologist  
University of Washington

Section 1

# Prostate Cancer Risk

# Genes Associated with Prostate Cancer Risk

| Genes with strong evidence     | Genes with emerging evidence                                              |
|--------------------------------|---------------------------------------------------------------------------|
| BRCA2, BRCA1, HOXB13, and TP53 | ATM, CHEK2, PALB2, and the Lynch syndrome genes (MSH2, MSH6, MLH1, EPCAM) |

# Behind the Headlines (XRAY Program)



Relevance: Medium-High

*Most relevant for: Men with prostate cancer*

## Study: Males with prostate cancer share positive experiences with genetic testing

A study of men with prostate cancer found that most had a positive experience with genetic testing. Many reported feeling more informed about their health and understanding their cancer risks after receiving their results. (posted 5/26/2026)

[READ MORE ›](#)



<https://bit.ly/force-xray-progress>

Section 2

# Prostate Cancer Screening

# Prostate Screening Study for High-Risk Men



Prostate screening study with  
the National Cancer Institute



Scan QR code

## ✓ This Study is Open To:

Men, and people assigned male at birth are eligible if they:

- are between the ages 30 - 75 years old
- do not have prostate cancer, and
- have had genetic testing and have any of the following: Lynch syndrome (MLH1, MSH2, MSH6, PMS2, EPCAM), BRCA1, BRCA2, HOXB13, ATM, NBN, TP53, BRIP1, CHEK2, PALB2, RAD51C, RAD51D, or FANC (FANCA, FANCB, FANCC, FANCD2, FANCE, FANCF, FANCG, FANCI, FANCL, and FANCM) mutation.

## ✗ This Study is NOT Open To:

- People who have already been diagnosed with prostate cancer

Eligibility

# Search and Enroll Tool Feedback on Study

**“I found a research study for my spouse that detected his aggressive prostate cancer while he still had a normal PSA. This study literally saved his life.,,”**

**“I enrolled in a prostate cancer high-risk screening study. It detected cancer on my first visit. My doctors believe my cancer was found 3-4 years earlier than it would have normally been found.,,”**

# Prostate Cancer Screening Clinical Trials

Screening Studies: [facingourrisk.org/research](https://facingourrisk.org/research)



PATROL Study: Prostate Cancer Screening for People AT Genetic Risk for Aggressive Disease



Upright MRI for Prostate Cancer Screening



Prostate Screening Studies

# Where You Live Affects Coverage for Prostate Cancer Screening



## Prostate Cancer Screening

**Note:** Coverage with no cost-sharing applies to in-network providers and facilities only. Unless explicitly stated, these laws may not apply to Medicaid, Medicare, self-funded, high-deductible, catastrophic, ERISA, federal, or small employer health plans.

**Disclaimer:** FORCE does its best to reflect information about current laws that benefit the hereditary cancer community. The information provided may not be comprehensive and is not a guarantee of coverage. Contact your health plan or [state insurance commission](#) for additional information.

|         |   |
|---------|---|
| Alabama | ▼ |
| Alaska  | ▼ |
| Arizona | ▼ |

Illinois

^

Prostate Screening

- Coverage of annual screening, including a prostate-specific antigen (PSA) blood test and a digital rectal examination (DRE), and diagnostic imaging (i.e., urinary analysis, serum biomarkers, and medical imaging such as MRI) with no copay, deductible, or coinsurance for:
  - Asymptomatic individuals age 50 and over
  - African-American individuals age 40 and over
  - Individuals age 40 and over with a family history of or genetic predisposition to prostate cancer
- Includes most individual and group health plans
- Gender-neutral

# Based on Diagnosis

Discuss genetic testing with your doctor if you have prostate cancer and:



- ✓ Metastatic prostate cancer
- ✓ High-risk/very high-risk prostate cancer
- ✓ Intermediate-risk prostate cancer with "intraductal cribriform" histology
- ✓ Diagnosed at 55 or younger
- ✓ A tumor test found a change that suggests you may have an inherited mutation

# Based on Family History

Discuss genetic testing with your doctor if you have prostate cancer and:



- ✓ A relative who tested positive for an inherited mutation
- ✓ Eastern European Jewish Ancestry
- ✓ Three or more relatives on same side of family with prostate cancer at any age
- ✓ Close relative/s with male breast, ovarian, pancreatic, metastatic, high-risk or very high-risk prostate cancer at any age
- ✓ Close relative/s with breast cancer at or before age 50

Section 3

# Prostate Cancer Treatment

# Definitions

- **Active surveillance** refers to intensive monitoring of localized prostate cancer with the goal to treat to cure if cancer progresses.
- **Watchful waiting** involves less intensive monitoring with a focus on symptom management. Watchful waiting may be used for patients for whom the risks of treatment outweigh the benefits.

# Prostate Cancer Risk Groups



| Risk Group      | Description                                                                                                                                                           |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Very low<br>Low | Tend to be slow-growing and less likely to spread.                                                                                                                    |
| Intermediate    | Cancer has features that suggest a higher chance of growth or spread than low-risk disease.<br>Often divided into favorable and unfavorable intermediate-risk groups. |
| High            | Cancer is still localized to the prostate area but has features that make it more likely to grow, spread, or come back after treatment.                               |
| Very high       | Cancer has characteristics that suggest a greater likelihood of spreading beyond the prostate or returning after treatment.                                           |

# Definitions

- **Hormone-sensitive prostate cancer** (also called "castration-sensitive" or cspc) refers to cancer that still responds to testosterone suppression (hormone therapy).
- **Hormone-resistant prostate cancer** (also called "castration-resistant" or crpc) refers to cancer that still grows despite very low testosterone levels.

# Definition

- **PARP inhibitors** are a type of targeted therapy used in several types of cancer, including prostate. They are most effective in people with a BRCA1 or BRCA2 mutation, however, they may be used to treat people with other mutations.

# PARP Inhibitors for Prostate Cancer Treatment



| When Used                                 | Akeega                              | Lynparza                                            | Rubraca                             | Talzenna                                            |
|-------------------------------------------|-------------------------------------|-----------------------------------------------------|-------------------------------------|-----------------------------------------------------|
| First-line or later treatment of mCSPC    | BRCA2 (Tumor or inherited)          |                                                     |                                     | BRCA1/2 or HRD positive                             |
| First-line or later treatment of mCRPC    | BRCA1 or BRCA2 (Tumor or inherited) | BRCA1 or BRCA2 (Tumor or inherited)                 |                                     | BRCA1 or BRCA2 (Tumor or inherited) or HRR mutation |
| mCRPC that has progressed after treatment | BRCA1 or BRCA2 (Tumor or inherited) | BRCA1 or BRCA2 (Tumor or inherited) or HRR mutation | BRCA1 or BRCA2 (Tumor or inherited) | BRCA1 or BRCA2 (Tumor or inherited) or HRR mutation |

## Biomarkers & Related Treatments Relevant for Advanced Prostate Cancer



| Gene/s or Biomarkers                                                                                        | Drug                                                                 | Indication                                                                                |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| BRCA1<br>BRCA2<br>(tumor or inherited)                                                                      | PARP inhibitors                                                      | mCSPC and mCRPC<br>(varies by drug)                                                       |
| HRR mutations (Tumor mutations in ATM, BRCA1, BRCA2, BARD1, BRIP1, CHEK2, PALB2, RAD51C, RAD51D and others) | PARP inhibitors                                                      | mCRPC<br>(gene list varies by drug)                                                       |
| MSI-High (More often found in people with Lynch syndrome)                                                   | Immunotherapies                                                      | Metastatic/advanced cancers that have stopped responding or gotten worse after treatment. |
| PTEN deficiency in the tumor                                                                                | Truqap (capivasertib)                                                | mCSPC or mCRPC which has not been treated with hormone therapy yet                        |
| PSMA (for imaging)                                                                                          | PET/CT scans                                                         | To locate prostate cancer spread.                                                         |
| PSMA (for treatment)                                                                                        | PSMA-directed radioligand therapy<br>Bispecific ACDs (research only) | As treatment for metastatic prostate cancer (hormone sensitive or hormone resistant).     |

# Definitions

- **Radioligand therapy** refers to a type of targeted treatment that delivers radiation directly to cancer cells.
- **Antibody-drug conjugates** refer to a type of targeted treatment where antibodies find the cancer cells and release the chemotherapy only where needed.
- **Bi-specific antibodies** are a type of immunotherapy that forces the cancer cells together with immune cells in order to kill the cancer cells.

# EvoPAR-PRO2

Treatment Studies and Registry: [facingourrisk.org/research](https://facingourrisk.org/research)



A Study of the PARP Inhibitor  
Saruparib Added to Standard  
Treatment for High Risk BRCA-  
Positive Prostate Cancer  
(EvoPAR PRO2)

 **This Study is Open To:**

You may be able to join if you have all of the following:

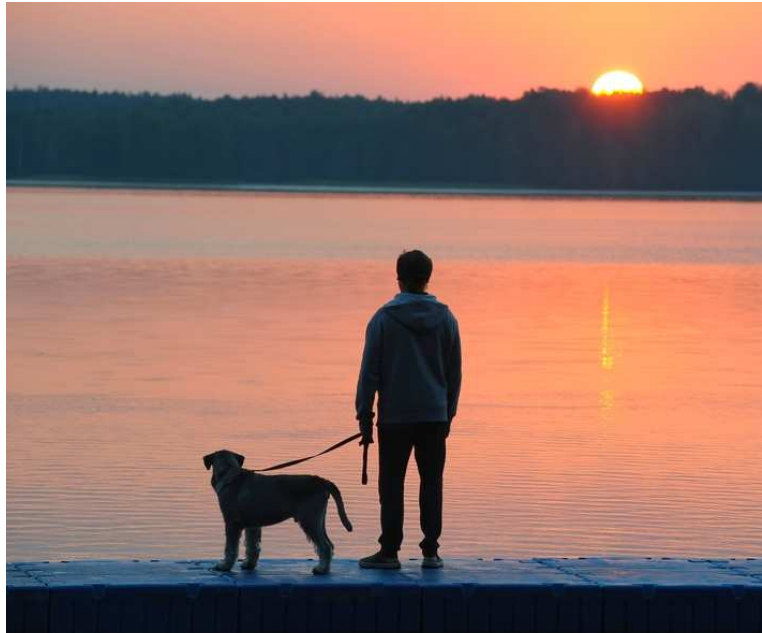
- Are 18 or older
- Have high-risk or very high-risk prostate cancer that:
  - Has not spread outside the pelvis, or
  - Came back after prostate surgery (biochemical recurrence)
- Have a confirmed BRCA1 or BRCA2 mutation found on tumor testing
- Have had or are currently having radiation therapy
- Are receiving hormone therapy (ADT)
- Are able to carry out most daily activities



[bit.ly/force-research-  
evoparpro2](https://bit.ly/force-research-evoparpro2)

# TALENT Study

Treatment Studies and Registry: [facingourrisk.org/research](https://facingourrisk.org/research)



A Study of Talazoparib With or Without Enzalutamide in People With Prostate Cancer Who Have Previously Received Abiraterone or Darolutamide (TALENT)

## ✓ This Study is Open To:

You may be able to join if you have all of the following:

- Are 18 or older
- Have high-risk or very high-risk prostate cancer that:
  - Has not spread outside the pelvis, or
  - Came back after prostate surgery (biochemical recurrence)
- Have a confirmed BRCA1 or BRCA2 mutation found on tumor testing
- Have had or are currently having radiation therapy
- Are receiving hormone therapy (ADT)
- Are able to carry out most daily activities



[bit.ly/force-talent-study](https://bit.ly/force-talent-study)

# High Dose Testosterone Study for mCRPC

Treatment Studies and Registry: [facingourrisk.org/research](https://facingourrisk.org/research)



High Dose Testosterone  
Treatment for People with  
Metastatic Prostate Cancer  
and an ATM, CDK12 or CHEK2  
Mutation

✓ This Study is Open To:

Male assigned at birth, aged 18 years and older, who meet the following criteria:

- Veterans who can receive care within the VA medical system.
- Diagnosed with metastatic, castration-resistant prostate cancer
- Ongoing treatment that lowers the levels of male hormones produced by the testicles, which includes medications like gonadotropin-releasing hormone (GnRH) analogues or antagonists, or surgical removal of the testicles (orchiectomy)
- Have a genetic mutation in ATM, CDK12, or CHEK2 gene
- Do not have severe symptoms related to your cancer
- Your prostate cancer has progressed after using one of the newer hormone therapies for prostate cancer, such as abiraterone, enzalutamide, apalutamide, darolutamide, etc.



[bit.ly/force-high-dose-testosterone](https://bit.ly/force-high-dose-testosterone)

# FORCE Prostate Cancer Treatment Resources



Treatment

[bit.ly/force-prostate-treatment](https://bit.ly/force-prostate-treatment)



Biomarkers

[bit.ly/force-prostate-biomarkers](https://bit.ly/force-prostate-biomarkers)



Targeted & Immunotherapies

[bit.ly/force-targeted-therapy-prostate](https://bit.ly/force-targeted-therapy-prostate)

# Clinical Trials for Advanced Prostate Cancer



Metastatic Castration Resistant Prostate Cancer Clinical Trial



[bit.ly/force-pfizer-mcrpc-study](https://bit.ly/force-pfizer-mcrpc-study)

# Thank You! Please Complete our Short Feedback Survey



[bit.ly/AtE-prostate-updates](https://bit.ly/AtE-prostate-updates)



# Connect with us

-  [www.FacingOurRisk.org](http://www.FacingOurRisk.org)
-  866-266-RISK
-  [Info@FacingOurRisk.Org](mailto:Info@FacingOurRisk.Org)

