

<b>Please delete before use</b>		Letter Name	Urology_Prostate_EoTS_hormone_deprivation_032025 Version 1.0
Ratified by Pathway Board	2025	Created	Circa 2020
Consulted	Urology CNS teams across GM	Reviewed	March 2025
Contact point for amendments	<a href="mailto:gmcancer.admin@nhs.net">gmcancer.admin@nhs.net</a> <a href="mailto:Andrea.webber@nhs.net">Andrea.webber@nhs.net</a>	Review date	March 2027

## GM Cancer standard template for prostate cancer – hormone deprivation therapy treatment summary

**Please delete this title and box after reading these instructions.**

**Remove all wording that does not apply to a particular patient in order to personalise it to the individual.**

**If you need to localise this treatment summary, e.g. job titles do not match those used in your Trust or adding your Trust logo, please do so, but please retain all other information.**

**Remember to ensure sections don't overrun onto the next page or titles separate from the body of the text before sending.**

**For GP use only: please code this letter as cancer treatment completed:**

Snomed code 413737006	Cancer hospital treatment completed (situation)
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**Patient Name**

**Hospital Name**

**Patient Address**

**Hospital Address**

**Date of Birth: 00/00/0000**

**Hospital No: 01234567**

**NHS No: 999 999 9999**

Dear **[INSERT PATIENT NAME]**

Thank you for attending your **[INSERT CLINIC NAME]** appointment on **[INSERT DATE]**.

Please find below the summary of your diagnosis, treatment and the ongoing management plan that we discussed. A copy of this has also been sent to your GP. This plan is specific to your needs.

Our (**INSERT LOCAL TRUST SERVICE NAME**) has been designed to increase your knowledge and wellbeing and to help you move forward now that your initial treatment has finished. Please remember that if you do feel anxious or would like further advice at any time you are welcome to contact your Urology Clinical Nurse Specialist who can recommend a wide range of resources and services that have been designed to help you.

### Key Contact Numbers:

<b>Urology Clinical Nurse Specialist</b>	<b>Contact Number:</b>
<b>Urology Cancer Care Coordinator</b>	<b>Contact Number:</b>

### Out of hours contact details for advice:

Your GP out of hours service,  
NHS 111  
or your district nurses (if you have a designated district nurse) for advice

### Out of hours when immediate attention is needed:

Go to your local Accident and Emergency department.  
**If you are unable to get to A&E yourself ring 999 for an ambulance.**  
  
Take this treatment summary with you

### Diagnosis and Treatment to Date:

Diagnosis:	Please give full details	Date of Diagnosis:	SMDT date
Histology:			
Summary of Treatment and relevant dates:			
Treatment aim:	Treatment with medication to lower or block testosterone with the intention to control your prostate cancer		

### Alert symptoms that require urgent attention

If any of the symptoms in the box below are causing you **big problems** than make a same day GP appointment or speak to your CNS. If this is not possible, or if it is out of hours, or

you feel any of the symptoms require immediate attention, go to your local accident and emergency department.

If you are unable to get to A&E yourself ring 999 for an ambulance.

It is important you do not wait over a weekend to speak to someone.

- Pulsating chest pain

#### **Signs of Spinal Cord Compression**

- Tingling down the spine into legs or arms and legs
- New pain which gets worse and does not respond to painkillers
- Stiffness and heaviness in the legs affecting balance and walking
- A sudden onset of weakness in your legs or arms
- Numbness or changed sensation in legs – this can also affect your lower body, chest or arms
- Bladder or bowel problems – loss of control (incontinence) or unable to pee

#### **Alert symptoms that require referral back to specialist team:**

- Difficulty in peeing/ worsening urinary symptoms
- Blood in your pee (haematuria)
- Swelling in legs
- Bone pain
- Pain in the lower back or kidney area

#### **Other symptoms**

- Feeling breathless
- Constantly feeling tired
- Unintended weight loss (more than 3kg)
- Loss of appetite
- Pain on peeing (urine infection/cystitis)
- Problems with being able to control when you poo or pee

#### **Possible treatment toxicities and/or late effects from the treatment you have had:**

##### **Hormone Therapy:**

- Hot flushes
- Erection problems and loss of sex drive
- Bone thinning
- Mood changes
- Loss of body hair
- Breast swelling and tenderness
- Weight gain and changes to glucose levels.

- Feeling tired
- Loss of muscle strength
- General aches and pains
- Cardiac and blood pressure changes
- Loss of body hair
- Worsening of diabetes
- Change in cholesterol levels
- Disease related anxiety and psychological stress

### Secondary Care Ongoing Management Plan (tests, appointments etc) [Delete AS APPROPRIATE]

You are on one of the following medications as part of your treatment:

- Degarelix (Firmagon) – Dose: Initially 240 mg, to be administered as 2 injections of 120mg, then 80 mg every 28days, dose to be administered into the abdominal region.
- Prostag (injection) 11.25mg – every 12 weeks
- Zoladex (injection) 10.8mg – every 12 weeks
- Decapeptyl (injection) 11.25mg – every 12 weeks
- Decapeptyl (injection) 22.5mg – every 6 months
- If you are also on Bicalutamide (tablet) 50mg/150mg – daily  
Please continue this medication until advised otherwise.
- Outpatient appointments will be every 4-6 months initially.
- After 2 years, if your PSA is stable, you will be enrolled onto the remote surveillance system.
- **Always have a PSA done at least one week prior to the outpatient appointment.**

### Additional information relating to lifestyle and support needs:

A cancer diagnosis is often a life altering event. A number of lifestyle choices can affect your ongoing health and wellbeing. These can help you regain or build physical strength, reduce severity of side effects and reduce the risk of developing secondary cancers or other health issues.

#### Exercise and Physical Activity:

It has been proven that engaging in regular exercise or physical activity can address feelings of anxiety, experience of fatigue and low mood. It can also improve heart health, muscle strength, and maintaining a healthy weight. Even a small amount of physical activity is helpful if you are able. You

may need to change the type of activity you do to your specific needs and limitations so we advise talking to your GP before you start.

#### **Eating Well:**

Eating a healthy balanced diet is an important part of maintaining good health and can help you feel better. This means eating a wide variety of foods in the right amounts and maintaining a healthy body weight.

#### **Reducing alcohol to within safe limits:**

The current UK guidelines to keep health risks to a low level are to avoid or not to regularly drink more than 14 units a week (6 pints of average-strength beer or 10 small (125ml) glasses of low-strength wine).

#### **Stopping smoking:**

If you are a smoker, giving up smoking will improve blood circulation, lower blood pressure, reduce the risk of a stroke, improve your immune system (ability to fight infection), and help to improve your breathing or stop it from getting worse. If you would like more help and advice, please speak to your Urology Cancer Care Co-ordinator, Urology Clinical Nurse Specialist Team, Local Pharmacy or GP.

#### **Other Useful Contact Numbers: [DELETE AS APPROPRIATE]**

<b>Macmillan Cancer Support Line</b>	<b>0808 808 0000</b> <b><a href="http://www.macmillan.org.uk">www.macmillan.org.uk</a></b>
<b>Macmillan Information and Support Centre –The Hope Building and The Christie at Salford</b>	<b>0161 206 1455</b>
<b>Macmillan Information and Support Centre – Royal Oldham Hospital</b>	<b>0161 656 1026</b>
<b>Macmillan Information and Support Centre – Tameside Hospital</b>	<b>0161 922 5644</b>
<b>Macmillan Information and Support Centre – Royal Bolton Hospital</b>	<b>01204 390625</b>
<b>Macmillan Information and Support Centre – Manchester Royal Infirmary</b>	<b>0161 276 6868</b>
<b>Macmillan Information and Support Centre – North Manchester General</b>	<b>0161 604 5244</b>
<b>Macmillan Information and Support Centre – Wythenshawe Hospital</b>	<b>0161 291 4876</b>
<b>Macmillan Information and Support Centre – Royal Albert Edward Infirmary</b>	<b>0194 282 2760</b>
<b>Cancer Research UK Support Line</b>	<b>0808 800 4040</b>
<b><a href="#">Maggie's Manchester</a> <a href="#">The Robert Parfett Building</a> <a href="#">The Christie Hospital</a></b>	<b><a href="tel:01616414848">0161 641 4848</a> <a href="http://www.maggies.org/our-centres/maggies-manchester">www.maggies.org/our-centres/maggies-manchester</a></b>
<b><a href="#">Maggie's Oldham</a></b>	<b><a href="tel:01619890550">0161 989 0550</a></b>

<a href="#">The Royal Oldham Hospital</a>	<a href="http://www.maggies.org/our-centres/maggies-oldham">www.maggies.org/our-centres/maggies-oldham</a>
Surgical Secretary	<b>[INSERT CONTACT DETAILS]</b>
Other <b>[INSERT DETAILS]</b>	<b>[INSERT CONTACT DETAILS]</b>
Other <b>[INSERT DETAILS]</b>	<b>[INSERT CONTACT DETAILS]</b>
Other <b>[INSERT DETAILS]</b>	<b>[INSERT CONTACT DETAILS]</b>
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Other <b>[INSERT DETAILS]</b>	<b>[INSERT CONTACT DETAILS]</b>
Other <b>[INSERT DETAILS]</b>	<b>[INSERT CONTACT DETAILS]</b>

<b>Treatment Summary Completed by:</b>	
Copy sent to GP:	<input type="checkbox"/>
Copy sent to Consultant:	<input type="checkbox"/>
Copy sent to other Health Care Professional(s):	<b>[INSERT DETAILS]</b>

## ADDITIONAL NOTES FOR GP

**For GP use only: please code this letter as cancer treatment completed:**

Snomed code 413737006	Cancer hospital treatment completed (situation)
8BCF.00	Read Cancer hospital treatment completed

<b>Personalised Care and Support Plan <input type="checkbox"/> (attached)</b>	
<b>Health and Wellbeing Information and Support given</b>	<b>[INSERT DETAILS]</b>
<b>Prescription Charge exemption certificate <input type="checkbox"/></b>	<b>Free prescription reminder <input type="checkbox"/></b>
<b>Advice given on services available on prescription</b>	<b>[INSERT DETAILS]</b>
<b>Advice given to apply for Personal Independence Payment (PIP)</b>	Yes/No/Not applicable

<b>Will <i>[INSERT PATIENT NAME]</i> be self-managing?</b>	<b>Yes / No [DELETE AS APPROPRIATE] [IF NO PLEASE STATE REASON]</b>
<b>Advise entry onto primary care palliative or supportive care register?</b>	Yes/No/Not applicable
<b>SR1 application completed?</b>	Yes/No/Not applicable

<b>Required GP actions (e.g. ongoing medications/ osteoporosis screening)</b>	
Cancer Care Review at 3 months and 12 months post diagnosis.	
<b><i>Cancer Care Review at 3 months and 12 months post diagnosis.</i></b>	

***Additional resources and information for primary care staff are available through  
[www.gatewayc.org.uk](http://www.gatewayc.org.uk)***