



INVASION OF THE PROSTATE SNATCHERS

NO MORE
UNNECESSARY BIOPSIES,
RADICAL TREATMENT OR LOSS
OF SEXUAL POTENCY

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Invasion of the Prostate Snatchers: No More Unnecessary Biopsies, Radical Treatment or Loss of Sexual Potency



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Every year almost 25 % of a million confused and frightened American men are tossed into a prostate cancer cauldron stirred by salespeople representing a multibillion-dollar industry. In this flourishing business, the radical prostatectomy is still the most broadly recommended treatment option. Yet a recent and definitive research in the New England Journal of Medication concluded that out from the fifty thousand prostate operations performed annually, a lot more than forty thousand are unjustified. But that is no surprise considering that 99 percent of most doctors treating this disease are surgeons or radiation therapists. Invasion of the Prostate Snatchers acts as an indispensable map through the medical minefield of prostate tumor. Invasion of the Prostate Snatchers is a written report on the most recent thinking in prostate tumor therapy: close monitoring- Intermediate-Risk, which will benefit from procedure, radiation, and/or hormonal therapy; should be the initial treatment approach for many men. There are three levels of prostate cancer and this book will provide accurate info about how exactly to distinguish between them: Low-Risk, which requires no instant treatment; active surveillance instead of surgery or radiation- Ralph Blum's demonstration of new scientific developments, provides convincing proof that noninvasive approach could be crucial in preventing tens of thousands of guys from being overtreated every year. and High-Risk, a type that does require immediate treatment with a combination of therapies. s accounts of his personal struggle, as well as Dr. Tag Scholz' In a unique collaboration, doctor and individual provide a wholly new perspective on managing this disease. The appalling simple truth is that men are still being rushed into a major operation that rarely prolongs lifestyle and over fifty percent enough time leaves them impotent.



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A GREAT book-ALL males with prostate cancers should read! This book is a good sense approach to the best treatment (active surveillance) for prostate cancer patients with slow growing, encapsulated tumors. It is not typically promoted by urologists because they are all SURGEONS and seem to prefer the safest remedy (from a liability standpoint), but brings with it lots of potential side effects that infringe on your own quality of life. I am living proof that it functions, because I was fortunate to have a relationship with among the nations leading radiology oncologists and we asked his opinion 3-1/2 years ago when I then found out we had the BIG C. thus it's appearance on his birthday desire list. Instead I did active surveillance for 3-1/2 years without negative effects and I feel great, but I really do PSA lab tests every 3-4 months, bone scans every 6 months and CT scans 1/season to monitor the experience. I thank God Almighty I've done it this way. I've friends that did medical procedures and radiation and now they're incontinent and have other disgusting unwanted effects and have an unhealthy quality of life. Before my father was diagnosed I hardly ever knew just what a Prostate was, following the thought that I would someday get cancer haunted me. Packed with fabulously helpful information to help make the hard choices on prostate healthcare issues This book was a birthday present for my husband, who had already read the entire book after checking it right out of the library. But he valued the content so much that he wished his own copy. I have already been to one seminar and examine three books on prostate cancers and spent countless hours on the web. And, it would be good for an updated quantity 2 to be published. His solution was DON'T do surgery, radiation, or chemo UNTIL I HAVE TO. This reserve allowed him to rethink his urologist's quick insistence that he have a biopsy (of course, at that doctor's workplace) and that doctor's declare that only "1 in 1000" possess a risk from the task. There is an extended bibliography with capsule testimonials of the books for individuals who desire to be better informed... The prognosis for my risk category is usually substantially much better than surgery, which explains why I chose to cancel surgery. made up. My first reaction was "obtain it out of me" and both urologists I consulted agreed. That was then, that is now Strike or miss relevancy are available in this volume when you can number out what is even now accurate...this time around from a integrative doctor it doesn't financially reap the benefits of a biopsy procedure. This reserve is considered to be the best way to obtain information about them I have encountered. That is a serious study of the treating prostate cancer. It is well created and loaded with info on alternatives to radical treatment of the disease. It covers different types of treatment: medical procedures, radiation, immune therapy, etc. A biopsy exposed stage 1 cancers with a Gleason rating of 6 and a PSA of 5.1. It also helped my husband to understand better how to use and interpret the PSA and the dangers of following "doctor's information" as well as the risks of not really doing so---of "watchful waiting around". I was all set to make plans for a radical prostatectomy. Read first, came back again! It was a brief piece about this book. I purchased and browse it and I am today seeing my GP to endure energetic surveillance or "watchful waiting around". That number sounded method to.. a must read reserve for low risk prostate cancer patients Don't let the seemingly flip name of the reserve put you away. I needed rapid treatment due to high-intermediate dx. It'll change your life, actually. I found some of the advice and statistics contained in this book to be scary and off-putting. I enrolled in the watchful waiting system at the University of Chicago Hospital. The U of C biopsy uncovered an increased presence of cancers in different regions of the prostate and a far more aggressive cancer. Part of their protocol is you need to have a biopsy to start the program it doesn't matter how latest your last biopsy was. I did so not want the next biopsy but I am glad that I did so! 10 years after my dad exceeded I got an

elevated PSA then a biopsy confirmed I had Prostate Cancer . Don't rush into not for god's sake consider nothing for granted. My wife and brother both called me to tell me to hear a segment on NPR on prostate cancer tumor. This was first book read after PCa diagnosis in Nov. 2010. If you are considering radical treatment and also have been diagnosed as a minimal risk stage cancer patient READ THIS BOOK. I am under active surveillance for two years and am today going under the knife, because I've been tested a lot and that's the key to not letting prostate cancer overwhelm you. A blog I examine led me to Dr. Scholz's internet site and I recalled the publication I had read 3 months earlier. A second read was a lot more helpful because so very much learning had happened in three months..He referred me to doctor in Seattle who could oversee dual radiation while I reside in Alaska and that was easier to attain than LA. I did so 6 months hormone therapy and then did both seeds and beam radiation. I consider this a really valuable reserve to anyone facing this analysis. I finished last radiation in August 2011. My PSA is quite low and Personally i think great..Too shortly to know longterm outcome but missing surgery and better amounts are both comforting. Side effects were present but were very tolerable and temporary.. I took 2 weeks read a lot of books and visited several doctors representing medical procedures ,radiation, cyber knife. My PSA do spike a bit after about 9 weeks, but then plunged to zero! My Seattle doctor experienced the cancer cells that were eventually dying released the PSA and caused the short-term spike. Now, 2 years since that spike, it continues to be at zero. I seldom have to pee at night time several time (was 5+ ahead of treatment). Side effects have virtually disappeared in every respect. Great Resource in Prostate Cancer This is great resource on prostate cancer. I was identified as having prostate cancer in April of the year. However, this book was published about 8 years ago, this means there may even more up-to-date treatment methods on the market.. The book was written by a doctor AND a patient, which gives a much more comprehensive perspective and helped my husband to decide to obtain a second opinion. If you need to depend on a 2010 medical book, based on even older analysis for assistance, that is clearly a personal preference. Chose surgery but as date neared I kept evaluating outcomes between surgery treatment, radiation, Hifu and even freezing. My test results show things are receiving worse, not really better and I must act now while the tumor(s) are local and contained (as far as can be established).A post script to the review and my personal story.. I chosen phone consultation with the author and thereafter cancelled medical procedures..but that seemed to be the author's aim. It took lots of soul searching, study and advice to access where I am today. I've retrenched and second-guessed the issue in my mind a hundred times, and I could say this book nearly made me need to cancel my upcoming surgery..Revise July 2014.until I remembered this book's publish day. No wonder the dealer I purchased this from was charging \$1 for the hardbound copy! Personal decision predicated on facts this book provides one particular opinion get 2nd , 3rd and 4th opinion My father was diagnosed with prostrate cancer at age 62 and had a radical prostatectomy and died at 72 because the cancer had pass on beyond your Prostate. Watchful waiting would have killed him actually sooner.This book will tell you the way it truly is. The main point is that watchful waiting provides it's inherent risks as well. The one thing I learned when i was diagnosed was there is absolutely no one way to cope with or treat prostrate cancer. It's been nearly 3 years since the dual radiation treatment. Predicated on my age group 53 my PSA 6.4 and Gleason of 4/5 I choose to have robotic surgery by way of a highly rated surgeon. Five Stars Mark Scholz provides a realistic objective demonstration as to what to accomplish when prostate cancers is diagnosed. The 1st week was just a little rough with the catheter but in weeks I was nearly back again to

normal. I don't believe about prostate cancer every day now and that alone was worthy of the temporary pain and after effects of the surgery. Become an expert do your research talk to qualified people take as much time as you need. Retain your prostate, boys! This book is I'm all over this! I was halfway through the medical/industrial complex mutilation of my prostate gland when I browse overview of this reserve in the NYT. You have got a far greater chance taking low-dosage aspirin (numerous research demonstrate taking this reduces ALL forms of cancer by 30%) and watchful waiting. What they outlined is the "normal process" is just what was happening to me. Urologist: they are surgeons by schooling and want to use Oncologist: need to irradiate or poison you (chemotherapy) Other: you into a woman via Hormone therapy. I got it and immediately starting asking the important questions that prevented unnecessary and life altering treatments. The dirty little top secret is there is NO statistical difference in longevity from treatment vs non treatment. it includes a great guidebook on how to change your diet to help This book has all of the options in it. It explains it in layman terms. Also, it has a great instruction on how best to change your diet to greatly help. 5 months later on my psa is virtual 0 and have some erection problems but believe they'll get better with time. Five Stars if you've been diagnosed--read this publication!! I proceeded with Brachytherapy.



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