

CREW HEALTH ADVICE

Prostate Cancer

What is the prostate?

The prostate is part of the male reproductive system and is a gland. Glands produce and release a variety of different hormones into your body.

What does it do?

It produces a fluid that mixes with sperm cells from the testicles and fluid from other glands, which make up semen (ejaculate). The prostate muscles ensure that semen is forcefully pressed into the urethra and then expelled outwards during ejaculation.

Where is it?

The prostate is about the size of a walnut and is located underneath the bladder and in front of the rectum. It does get bigger with age.

What is prostate cancer?

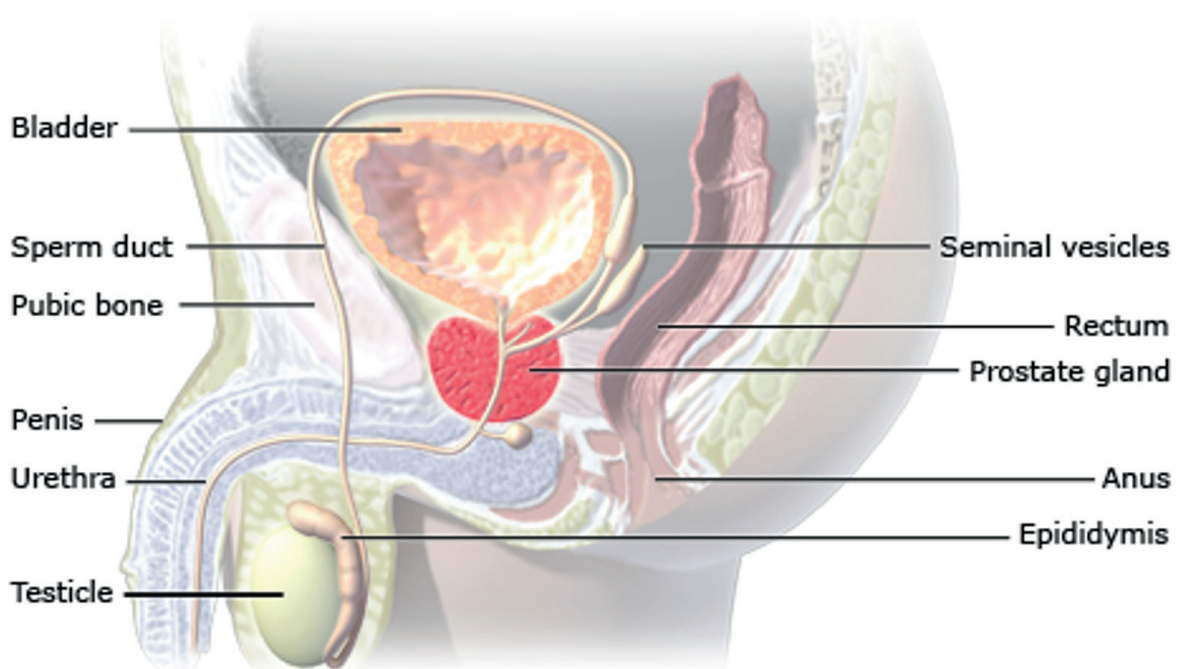
Prostate cancer is a form of cancer, which begins in the gland cells of the prostate, which is only found in males. It is one of the most common types of cancer that males can develop.

Statistics

- Prostate cancer is the 2nd most commonly occurring cancer in men and the 4th most common cancer overall. (“World Cancer Research Fund International”)
- There were approximately 1.41 million cases worldwide in 2020. (“World Health Organisation”)

What are the risk factors that make a person more likely to get prostate cancer?

- Prostate cancer mainly affects men over 50 years of age and the risk increases with age
- The risk is even higher for black men and the risk may be from the younger age of 45 years
- The risk is higher for men with a family history of prostate cancer. The risk increases by two and a half times if a close family member has been diagnosed with prostate cancer (i.e. father or brother), compared to a man who has no relatives with prostate cancer. It is strongly recommended to speak with other men in the family to find out if they have had prostate cancer so to better understand an individual's risk factors



Location of the prostate gland

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- The risk may also be higher if a close female relation, i.e. mother or sister, has had breast cancer. Again, it's recommended to talk openly about family health find out
- Being overweight or obese increases the risk of prostate cancer

Early warning signs to be aware of

As with many types of cancer, in the early stages there may not be any symptoms which means understanding the risk factors are even more important. Once the cancer has grown large enough it will begin to put pressure on the urethra (the tube that carries urine from your bladder out of the penis).

Common symptoms to look out for

- Needing to pee more frequently, often during the night or when sleeping
- Needing to rush to the toilet

- Difficult in starting to pee
- Straining or taking a long time while peeing
- Weak flow of urine
- Feeling that the bladder has not been fully emptied
- Blood in the urine or blood in the semen (ejaculate)

These symptoms do not necessarily mean a person has prostate cancer but it means that they should report to the medical officer in charge and seek further advice. Never ignore these symptoms as early detection of prostate cancer will give a chance at a better outcome.

What to do if you develop any of these symptoms

If onboard and any of the above symptoms develop it is important to report to the Medical Officer in charge and accurately relay the symptoms to them. They will likely take down a lot of

information that may not seem relevant but when the information is passed to a Doctor ashore they always need to make sure that everything they may want to know is documented.

It is important to think about the risk factors mentioned above and be sure to mention any of them to the Medical Officer onboard so that they document it for sharing with the onshore Doctor. This will help doctors plan the most appropriate response to your symptoms.

The medical officer is likely to assist with symptoms via the help of the onshore Doctor and an onshore appointment will be arranged to see a Doctor in person.

This advice was compiled in collaboration with Red Square Medical, who offer a full range of maritime medical services, from training and consultancy services, right through to mass casualty incident planning and training.

www.redsquaremedical.com

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The Club was the first to launch a crew health scheme in 1996 due to increasing crew illness claims and a lack of accountability of clinics. Since 1996, the Crew Health programme has become one of the Club's leading loss prevention initiatives. The aim of the programme is to reduce the volume and value of crew illness claims which are caused by a pre-existing illnesses or disease. These underlying conditions often impact on the crew member's fitness for service and can endanger not only the health of the seafarer but also the onboard safety of other crew.

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Sophia joined Thomas Miller in 1992 and from 1994 worked as a claims handler dealing mainly with French and Spanish Members. In 2004, Sophia became the Crew Health Programme Director. Sophia has undertaken a large number of clinic audits, implemented the standard medical

form and clinic guidelines. She has also lead the scheme through the largest period of growth and development with a doubling of approved clinic facilities and a four fold member increase. Sophia is a Director of Thomas Miller & Co. Ltd.

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Saidul Alom joined Crew Health from the European Region Service Team in 2004. Saidul provides administrative support to the Crew Health programme and is responsible for liaison with the approved clinics on financial billing matters and ensuring prompt payment of all clinic fees.

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Stuart joined Thomas Miller in 1998 as a claims trainee for UK P&I Club's Greek Members. In April 2005 Stuart joined Crew Health as the Team Administrator. Stuart is responsible for co-ordination of Member entries and administration for the clinic approval process.