



the DEATH of ME?

The **true** story of one man's experience
with stage IVa **prostate cancer**...

BY
**JAMES
BURNS**



Copyright ©2025 by James Burns. All rights reserved. Second Edition. This is a memoir, and is my best recollection of the events contained within. Was it exactly like this? Well, generally, within my limitations as an artist and storyteller.

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I USED TO LIKE TO BELIEVE THAT MY BODY
WAS FILLED WITH A *GOLDEN LIGHT*...

...INSTEAD OF *BLOOD* AND
BILE AND OTHER FLUIDS.

PEOPLE OFTEN USE THE IDEA OF
"INTELLIGENT DESIGN" AS PROOF
OF A *SUPREME BEING*...



...THEY CITE HOW
MIRACULOUS THE
HUMAN BODY IS...

...HOW *AMAZING* IT IS THAT
IT FUNCTIONS SO WELL...

ME? I'VE ALWAYS FOUND THE
HUMAN BODY *POORLY* DESIGNED...

...PRONE TO FAILING IN THE
MOST DISASTROUS WAY...



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LET ME
INTRODUCE
MYSELF.

I'M A 65-YEAR-
OLD RETIRED
GRAPHIC DESIGNER,
HUSBAND, AND
FATHER.

I'VE BEEN BEEN
MAKING COMICS
FOR THE LAST
SEVERAL YEARS.

... MOSTLY
AUTOBIOGRAPHICAL
ONES ABOUT MY
VARIOUS MEDICAL
WOES...

...THINGS LIKE A
DETACHED RETINA,
A THYROID CANCER
SCARE, AND A
DISASTROUS FALL.

I *HAD* HOPED I
WAS DONE WITH
THAT GENRE...

... BUT
ALAS... NO.

SIGH...

I'M NOT SURE
HOW TO TELL
THIS STORY...

... BUT MAYBE THE
BEST PLACE TO
START IS AT THE
BEGINNING.

IT ALL
STARTED IN
LATE JULY
2023.

I'M ATTENDING
THE UNIVERSITY OF
GEORGIA AS PART
OF AN "OVER-62"
PROGRAM...*

... AND I HAD JUST
STARTED FALL
SEMESTER.

I'M MOSTLY
TAKING ART
CLASSES.

* SEE MY LAST COMIC,
"OLD MAN ON CAMPUS."



MY BACK PAIN STARTED WITH THE START OF THE SCHOOL SEMESTER...

OWW!



I'VE HAD BACK PAIN BEFORE, BUT THIS SEEMED LIKE SOMETHING DIFFERENT.



AND THEN I STARTED WAKING UP FREQUENTLY AT NIGHT...

SIGH!



...MOSTLY IT WAS BECAUSE I HAD TO PEE...

I TOLD MYSELF THAT I SHOULD EXPECT THAT AS I GOT OLDER...



THEN, AT MY ANNUAL CHECKUP, I HAD SOME BLOODWORK DONE...

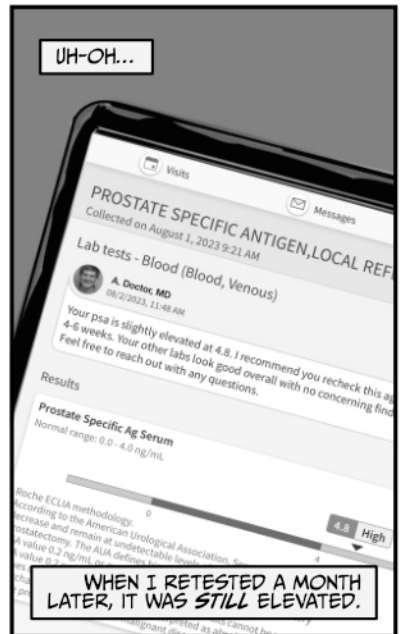


THIS INCLUDED A PSA TEST.*

* PROSTATE-SPECIFIC ANTIGEN...



WHEN I GOT MY RESULTS, THEY WERE ACCOMPANIED BY A DISTURBING NOTE FROM MY DOCTOR.



UH-OH...

WHEN I RETESTED A MONTH LATER, IT WAS STILL ELEVATED.



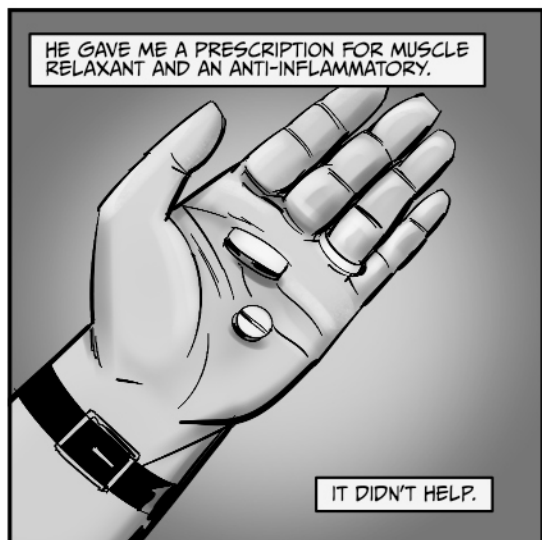
MY DOCTOR TOLD ME TO FOLLOW UP WITH A **UROLOGIST**, BUT UNFORTUNATELY IT WOULD TAKE A MONTH TO GET AN APPOINTMENT.

DURING THAT ANNUAL CHECKUP I COMPLAINED TO MY DOCTOR ABOUT MY **ACHES** AND **PAINS**...



... AND I TOLD HIM ABOUT HAVING TO PEE **SEVERAL** TIMES A NIGHT.

I ALSO MENTIONED THAT I WAS EXPERIENCING SOME **SEVERE** LOWER BACK PAIN.



HE GAVE ME A PRESCRIPTION FOR MUSCLE RELAXANT AND AN ANTI-INFLAMMATORY.

IT DIDN'T HELP.



HE ALSO REFERRED ME TO A PHYSICAL THERAPIST.

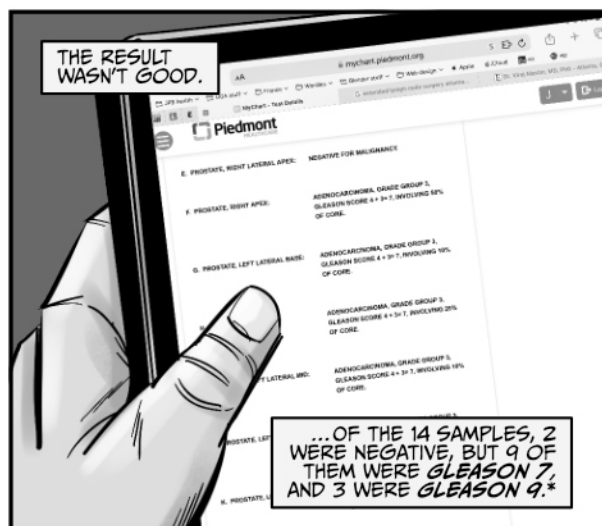
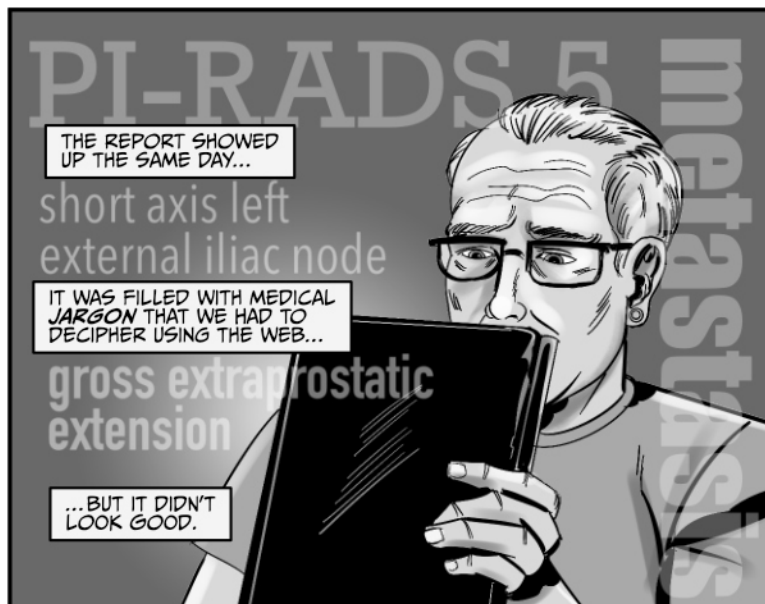


... BUT THE PAIN CONTINUED, AND JUST GOT **WORSE**.



SO I WAITED **PATIENTLY** FOR MY UROLOGY APPOINTMENT, AND **HOPED** FOR A DIAGNOSIS.





* THE SCALE GOES FROM 1-10. 9 IS REALLY BAD.



WE MET WITH MY UROLOGIST
WHO ANSWERED OUR QUESTIONS
ABOUT THE *BIOPSY*...

BASICALLY I HAD *PROSTATE CANCER*,
AND IT WAS *AGGRESSIVE*.



THE NEXT STEP WOULD INVOLVE A *PSMA
PET SCAN*, WHERE THEY WOULD INJECT
ME WITH A *RADIOACTIVE TRACER*...*

...WHICH WOULD SHOW *WHERE* THE
CANCER HAD *SPREAD* IN MY BODY.

* AFTER ANOTHER 2 WEEKS WAIT...



AS THE CONSULTATION CONTINUED,
THE REALITY OF THE SITUATION
STARTED TO BECOME APPARENT.

I STARTED TO THINK ABOUT
THIS COLLECTION OF CELLS
GROWING INSIDE OF ME...

...HOW THIS DIAGNOSIS WOULD
AFFECT THOSE I LOVE...

...AND HOW THIS
WOULD EVENTUALLY BE
THE *DEATH* OF ME.

CANCER!

MY MOM
DIED OF LUNG
CANCER BACK
IN 1984.

IT WAS
AWFUL!

SHE LIVED FOR
ONE AND A HALF
YEARS AFTER HER
DIAGNOSIS...

...BUT IN PAIN,
WITH CONSTANT
EMT TRIPS TO
THE ER...

...IT WAS TOUGH
ON HER, BUT ALSO
ON ME AND MY
SISTER.

WE WERE BOTH
IN THE ROOM
WHEN SHE DIED.

I OBVIOUSLY AM
AFRAID OF THE PAIN
AND THE MEDICAL
STUFF....

...BUT I ALSO
DON'T WANT MY
LOVED ONES TO
GO THROUGH WHAT
WE DID WITH MOM.

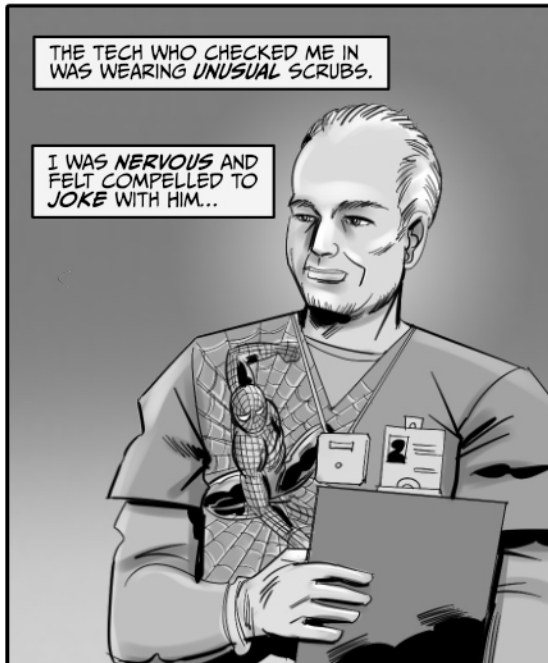
BUT **EVERY** CANCER
IS DIFFERENT, AND I
JUST HOPE I MAKE THE
RIGHT DECISIONS WHEN
IT'S MY TIME.

EVENTUALLY THE DAY ROLLED AROUND FOR MY *PSMA/PET SCAN*...



THE TECH WHO CHECKED ME IN WAS WEARING *UNUSUAL SCRUBS*.

I WAS *NERVOUS* AND FELT COMPELLED TO *JOKE* WITH HIM...



HEH! I GET THE REFERENCE ON YOUR SCRUBS...

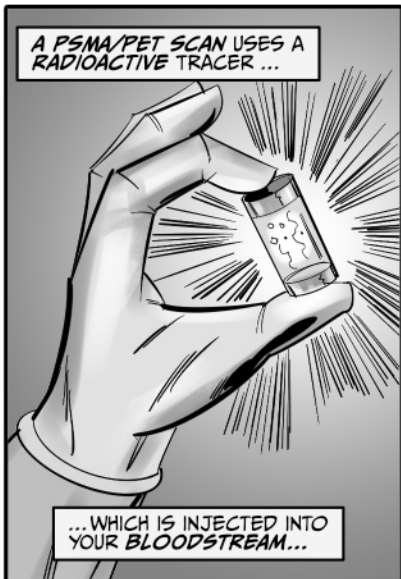


REFERENCE?

SPIDERMAN?
BITTEN BY A
RADIOACTIVE
SPIDER?

OH... *NO*...
I JUST BUY THESE
BECAUSE THEY'RE
CHEAP!

A *PSMA/PET SCAN* USES A *RADIOACTIVE TRACER* ...

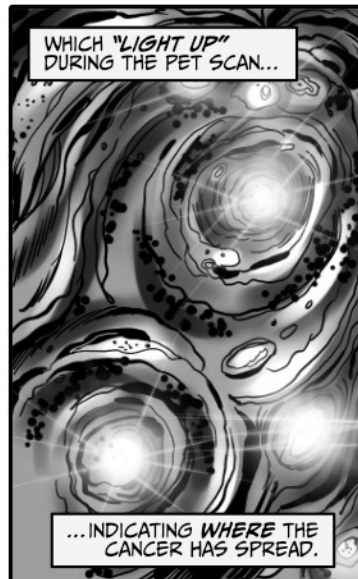


...WHICH IS INJECTED INTO YOUR *BLOODSTREAM*...

IT THEN SEEKS OUT *PROSTATE CANCER* CELLS IN THE BODY...



WHICH "*LIGHT UP*" DURING THE *PET SCAN*...



...INDICATING *WHERE* THE *CANCER* HAS SPREAD.



SO THEY INJECTED ME WITH THE RADIOACTIVE *TRACER*, THROUGH AN IV IN MY ARM...



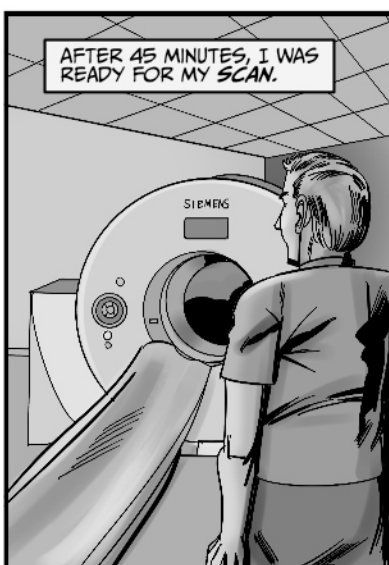
...AND I HAD TO SIT IN A LITTLE ROOM WHILE IT *CIRCULATED* THROUGH MY SYSTEM...

...LOOKING FOR *PROSTATE* CANCER CELLS.



REBECCA HAD TO WAIT IN ANOTHER ROOM...

...BECAUSE I WOULD BE *RADIOACTIVE* FOR AWHILE.

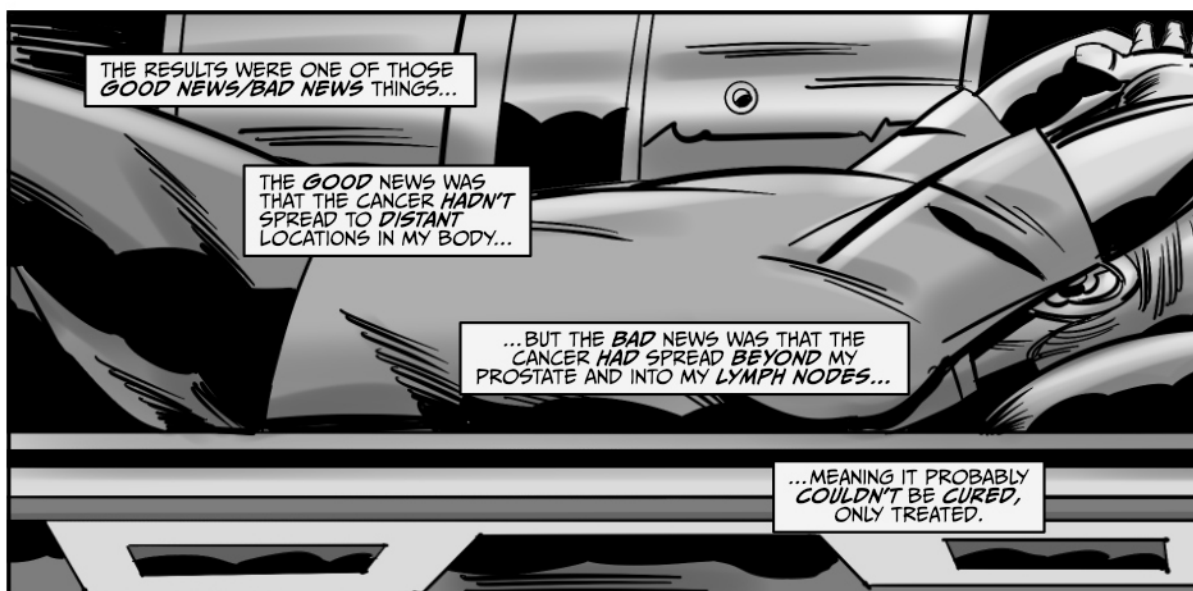


AFTER 45 MINUTES, I WAS READY FOR MY *SCAN*.



THEY DID AN INITIAL *QUICK* SCAN...

...FOLLOWED BY A MUCH *SLOWER* ONE TO DETECT THE RADIATION.



THE RESULTS WERE ONE OF THOSE *GOOD NEWS/BAD NEWS* THINGS...

THE *GOOD* NEWS WAS THAT THE CANCER *HADN'T* SPREAD TO *DISTANT* LOCATIONS IN MY BODY...

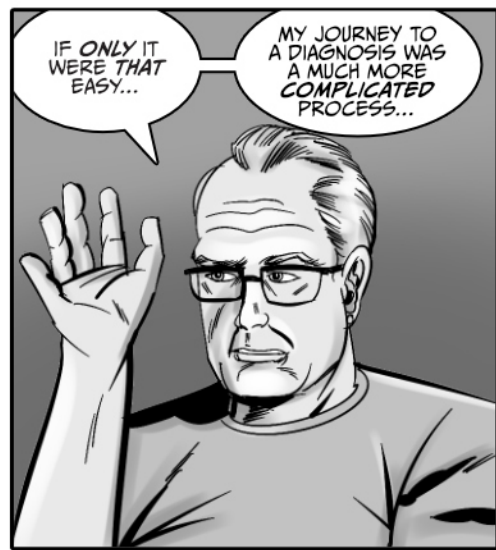
...BUT THE *BAD* NEWS WAS THAT THE CANCER *HAD* SPREAD *BEYOND* MY PROSTATE AND INTO MY *LYMPH NODES*...

...MEANING IT PROBABLY *COULDN'T* BE *CURED*, ONLY *TREATED*.



ON TELEVISION, DISEASE
DIAGNOSES ARE *EASY*...

SEE HERE?
DEFINITELY
CANCER.



IF *ONLY* IT
WERE *THAT*
EASY...

MY JOURNEY TO
A DIAGNOSIS WAS
A MUCH MORE
COMPLICATED
PROCESS...



LET'S
SEE...

I GOT MY
FIRST PSA
TEST BACK IN
JULY...

...AND WAS
DIAGNOSED WITH
STAGE 4 CANCER
IN DECEMBER.

SO THAT
WAS LIKE 5
MONTHS!



I *CANNOT*
EXPRESS HOW
AWFUL ALL THAT
WAITING WAS...

...REBECCA AND
I HAD A LOW-
LEVEL OF STRESS
GOING FOR THE
WHOLE TIME.

...AND IT
CONTINUES...



MY EXPERIENCE INVOLVED *LOTS* OF WAITING
AROUND TO GET ONE TEST OR ANOTHER.

...AND I'D SPEND MY TIME DOING WAY
TOO MUCH INTERNET RESEARCH ON THE
TREATMENT OF *PROSTATE* CANCER...



THERE WERE BASICALLY THREE
CHOICES - *SURGERY*, *RADIATION*,
AND *HORMONAL THERAPY*.

FREQUENTLY *SEVERAL*
WOULD BE COMBINED.

WE'D HAVE TO CONSULT AN *ONCOLOGIST* IN
ORDER TO MAKE AN *INFORMED* DECISION.

OF COURSE, I'D HAVE TO
WAIT FOR A REFERRAL.



IN SOME WAYS I COUNT MY-
SELF AS A *LUCKY* GUY...



I HAVE NO IDEA HOW I'D COPE WITH
THIS IF IT WASN'T FOR *REBECCA*.

SHE'S BEEN WITH ME, FOR
BETTER OR *WORSE*, IN
SICKNESS OR IN *HEALTH*...

...FOR OVER 35 YEARS.



THE PROSPECT OF *LEAVING HER*
ON HER OWN IS *ONE* OF THE
THINGS I WORRY THE *MOST* ABOUT.

IT'S *NOT* THAT SHE *CAN'T* HANDLE THINGS
ON HER OWN, IT'S THAT WE WERE *SUP-
POSED* TO BE DOING THEM *TOGETHER*.



OF COURSE I *WON'T*
BE *LEAVING HER*...

...I'LL JUST
CEASE TO BE.



I REALLY HAVE NO IDEA
HOW MUCH TIME I HAVE...



...MONTHS? YEARS?

WHATEVER TIME I HAVE LEFT, I
WANT TO SPEND IT WITH *HER*.

AFTER *FINALLY* GETTING DIAGNOSED, MY UROLOGIST STARTED ME ON ANDROGEN DEPRIVATION THERAPY (ADT).



THE IDEA IS TO *STARVE* THE CANCER CELLS BY DRASTICALLY REDUCING THE *TESTOSTERONE* LEVELS IN YOUR SYSTEM.



IN THEORY, THIS *SHOULD* SLOW THE GROWTH.



SO I STARTED TAKING SOME *HORMONAL THERAPY* MEDS SHORTLY BEFORE CHRISTMAS...

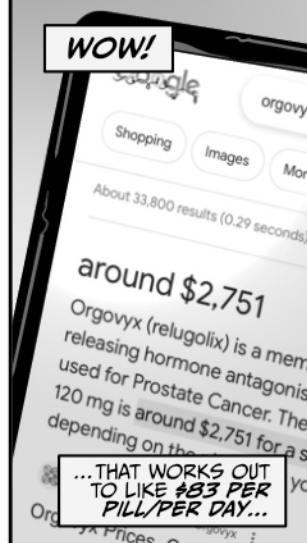


WHEN I SAW THE INITIAL INSURANCE CLAIM...

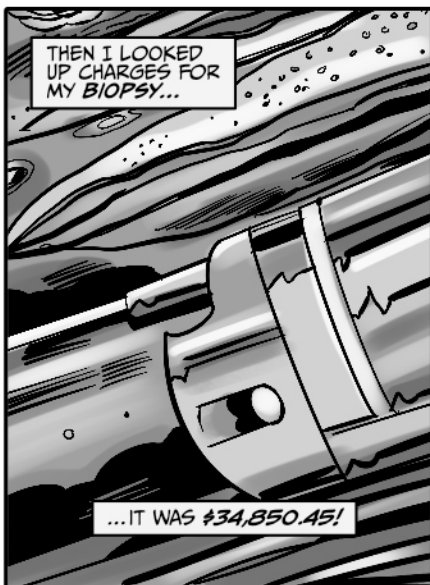


...I DID A LITTLE RESEARCH ON THE COST OF THAT DRUG.

WOW!

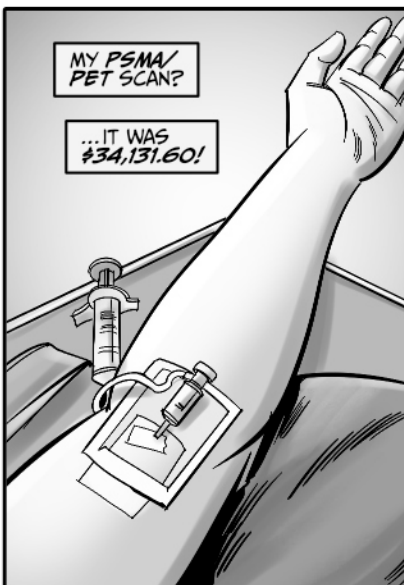


THEN I LOOKED UP CHARGES FOR MY *BIOPSY*...



...IT WAS \$34,850.45!

MY *PSMA/ PET* SCAN?

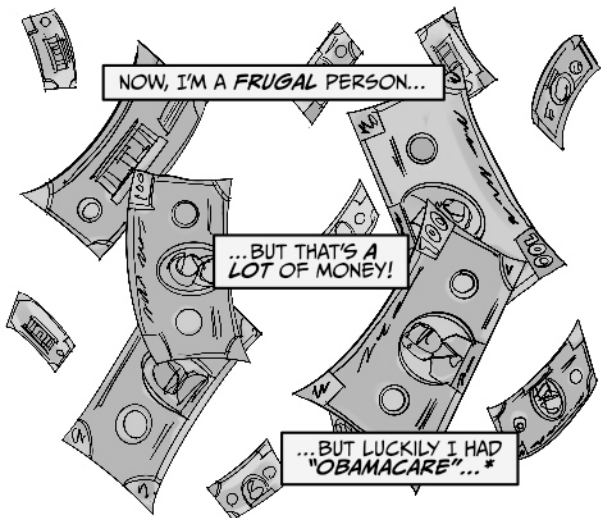


...IT WAS \$34,131.60!

SO, JUST TO GET FULLY *DIAGNOSED*?



...AROUND \$69,000!



NOW, I'M A FRUGAL PERSON...

...BUT THAT'S A LOT OF MONEY!

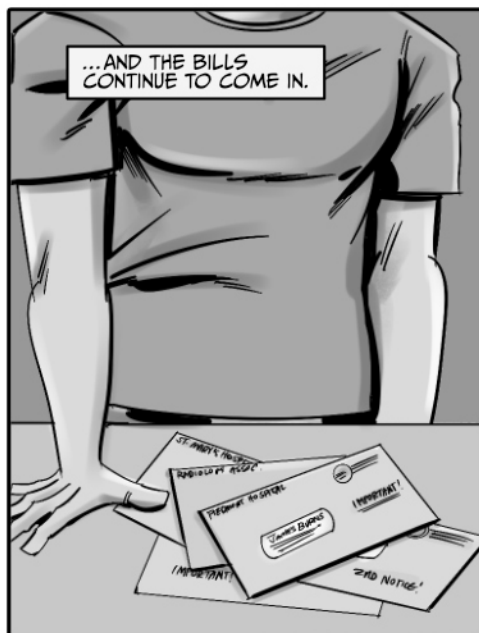
...BUT LUCKILY I HAD "OBAMACARE" ... *

* THANKS, OBAMA!

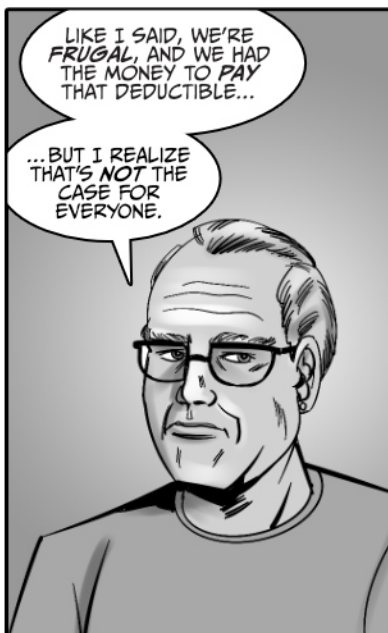


I DID HAVE TO PAY A LOT OUT OF POCKET* TO MEET MY DEDUCTIBLE ...

* SOMETHING OVER \$6,000, ACCORDING TO MY RECORDS...



...AND THE BILLS CONTINUE TO COME IN.



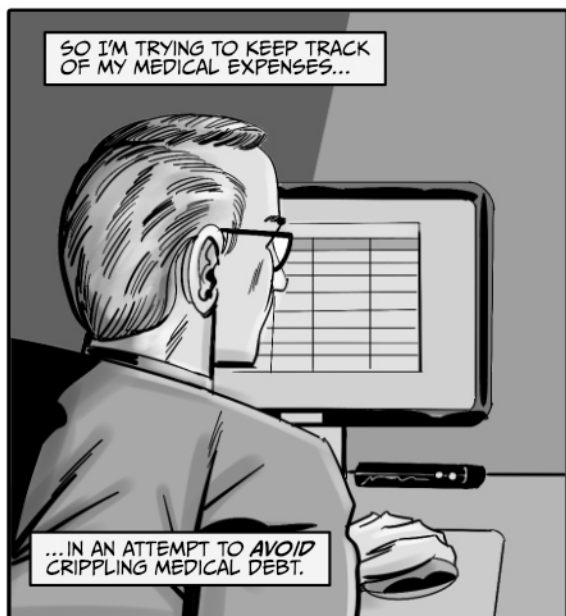
LIKE I SAID, WE'RE FRUGAL, AND WE HAD THE MONEY TO PAY THAT DEDUCTIBLE...

...BUT I REALIZE THAT'S NOT THE CASE FOR EVERYONE.



WHAT IF WE DIDN'T HAVE SAVINGS? OR INSURANCE?

WHAT IF I WASN'T RETIRED, AND HAD TO WORK?



SO I'M TRYING TO KEEP TRACK OF MY MEDICAL EXPENSES...

...IN AN ATTEMPT TO AVOID CRIPPLING MEDICAL DEBT.

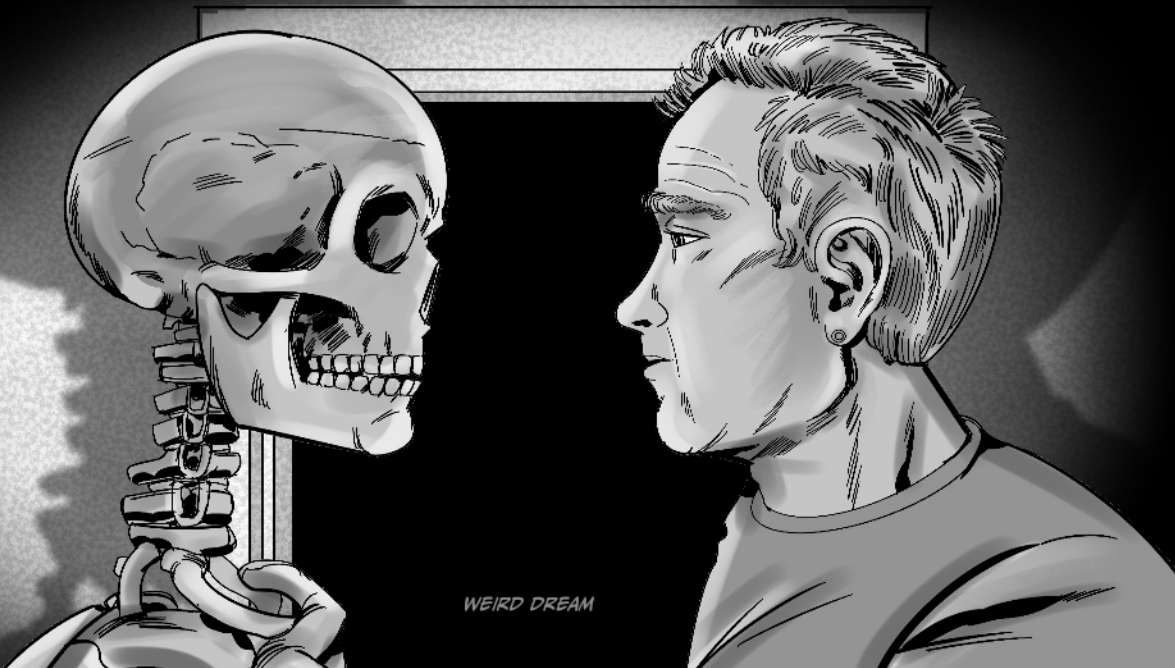


IT'S DIFFICULT ENOUGH TO COPE WITH THIS DISEASE...

...WITHOUT HAVING TO WORRY ABOUT DEALING WITH THE RIDICULOUS COST OF TREATMENT.



LATE ONE NIGHT...



WEIRD DREAM

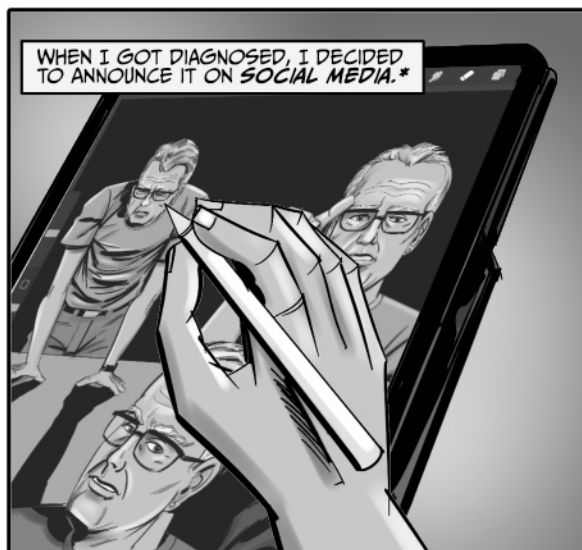
AAAAA

GASP!

HUHN...HUHN...

I TRY TO NOT
THINK ABOUT MY
ULTIMATE FATE...

...BUT *SOME*
NIGHTS IT'S
DIFFICULT.



WHEN I GOT DIAGNOSED, I DECIDED TO ANNOUNCE IT ON *SOCIAL MEDIA*.*

* IN A COMIC, NATURALLY, ON *INSTAGRAM*.



PARTLY BECAUSE IT WAS *EASIER* THAT WAY...

... BUT *ALSO* BECAUSE I WANTED TO *AVOID* PEOPLE SAYING:



OH! I KNOW SOMEONE WHO HAD *THAT* AND THEY'RE *FINE*...



OR...

THEY'RE MAKING GREAT STRIDES IN *CURING* PROSTATE CANCER...



BECAUSE... IT *WASN'T* CAUGHT EARLY ENOUGH. IT'S *METASTATIC*.

... AND WHILE TREATMENTS CAN *EXTEND* MY LIFE, I'M TOLD THAT IT WOULD BE VERY UNLIKELY I COULD BE *CURED*.



... AND WHEN SOMEONE IS STANDING ON THE EDGE OF THE *ABYSS*...

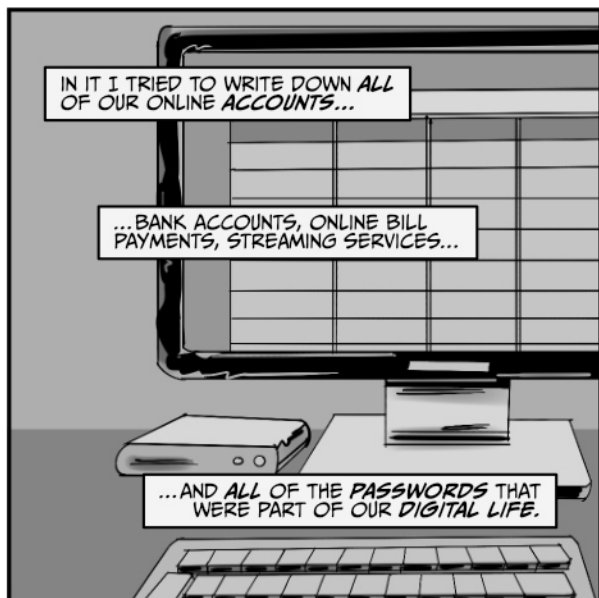
... THE *LAST* THING THEY WANT TO HEAR IS THAT IT'S *NOT* ACTUALLY THAT *BOTTOMLESS*.



SHORTLY AFTER I WAS
FIRST DIAGNOSED...

...I STARTED A SPREADSHEET
TO SHARE WITH REBECCA.

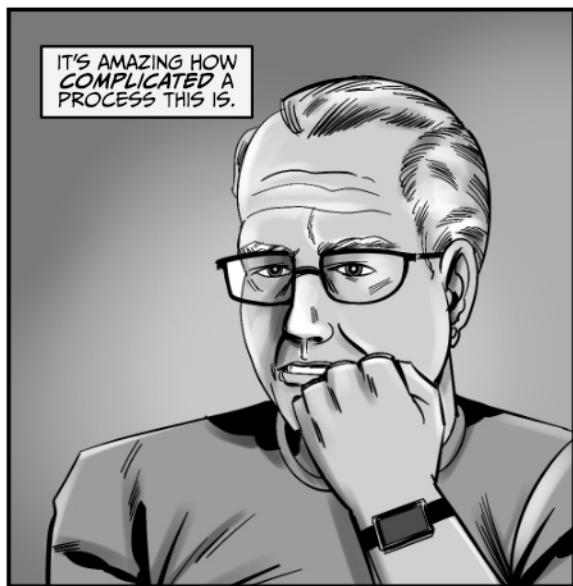
I GUESS YOU'D CALL IT "GET-
TING MY AFFAIRS IN ORDER."



IN IT I TRIED TO WRITE DOWN ALL
OF OUR ONLINE ACCOUNTS...

...BANK ACCOUNTS, ONLINE BILL
PAYMENTS, STREAMING SERVICES...

...AND ALL OF THE PASSWORDS THAT
WERE PART OF OUR DIGITAL LIFE.



IT'S AMAZING HOW
COMPLICATED A
PROCESS THIS IS.



THEN I WENT TO OUR DOMAIN REGISTRAR AND PAID
FOR 2 YEARS OF DOMAIN REGISTRATION...*

...JUST IN CASE.

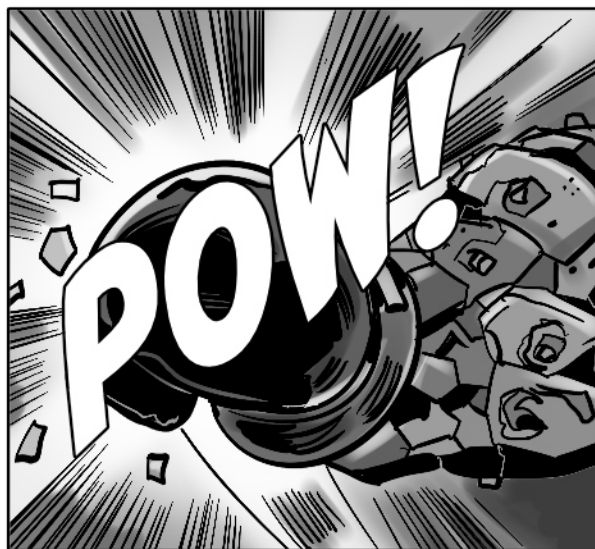
* BURNSCOMICS.COM, REBECCA-BURNS.COM, ETC.

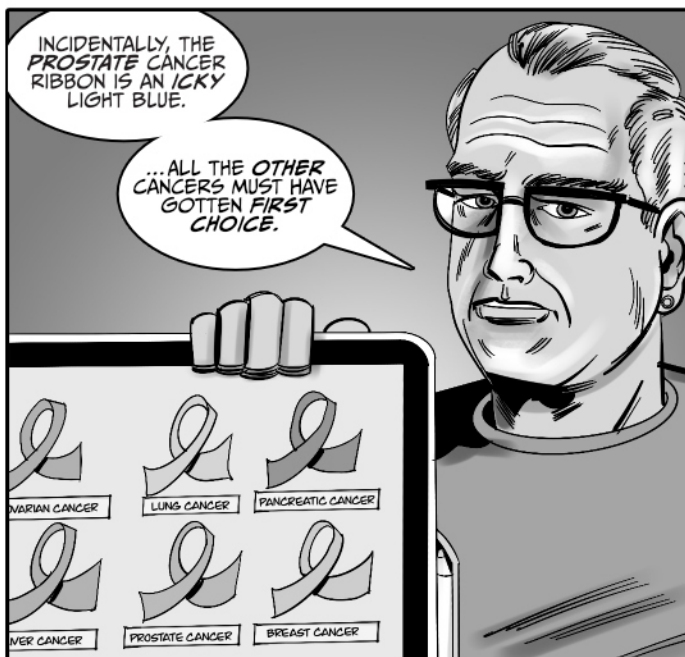
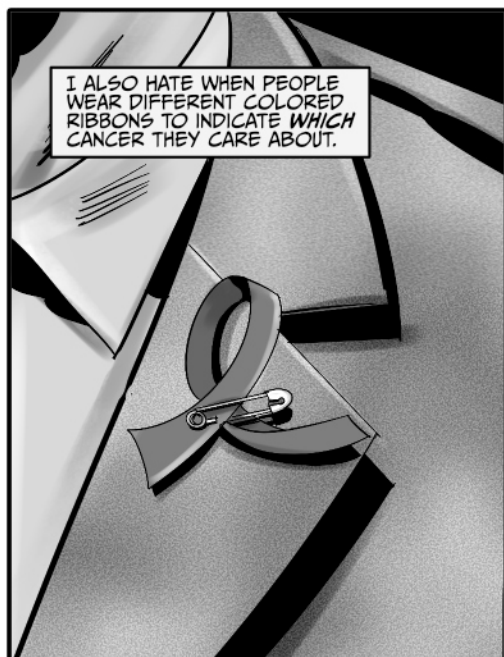


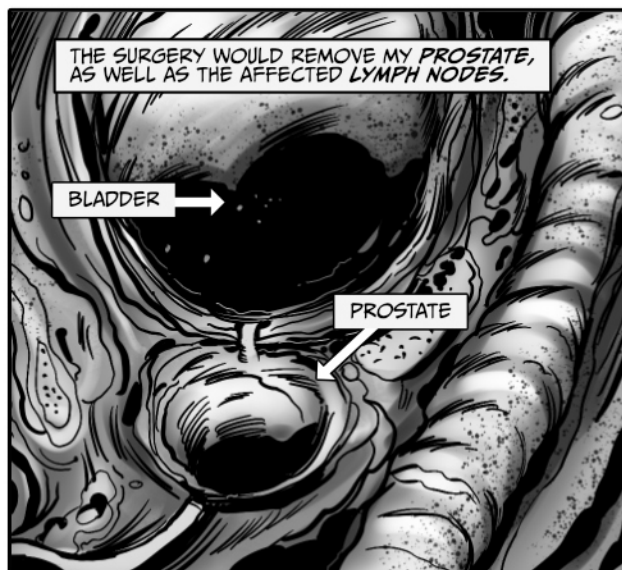
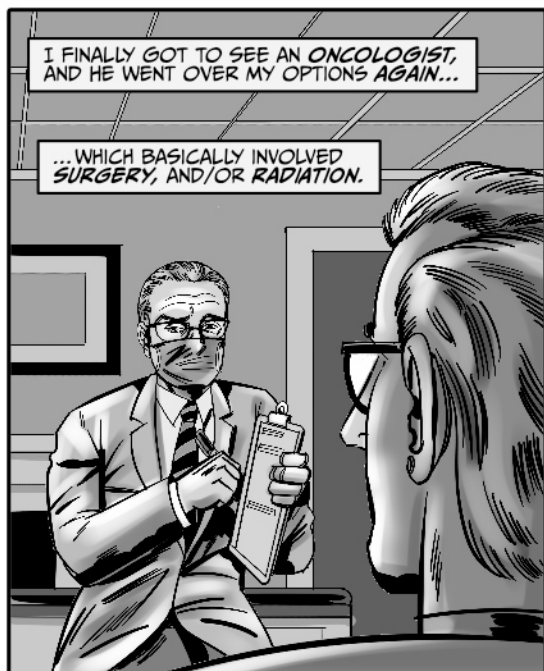
I WANTED EVERYTHING TO BE EASIER
FOR REBECCA WHEN I DIED.



MAYBE I WAS JUMPING THE GUN,
BUT IT MADE ME FEEL LIKE I WAS
ACCOMPLISHING SOMETHING.







* LAPAROSCOPICALLY...

HOPE...

ALL THIS TALK
OF A CURE
GAVE ME
HOPE...

... WHICH IN SOME
WAYS WAS MORE
INSIDIOUS THAN
THIS DISEASE.

ALL THIS TIME
I'D BEEN TOLD
THAT IT WAS
HOPELESS...

... AND I WAS
GETTING USED
TO THE IDEA OF
LETTING GO...

BUT GIVE
ME HOPE?

... YOU'D ALSO BE
GIVING ME THE
POSSIBILITY OF
DASHING THAT
HOPE.





* SEE MY FIRST COMIC, "DETACHED."



* SEE MY COMIC "SPEECHLESS," ABOUT A THYROID CANCER SCARE.



* LAMINECTOMY AND SPINAL FUSION. NO COMIC, ODDLY...



* AS DEPICTED IN MY COMIC "THE FALL."



WHILE WE WAITED FOR MY FIRST APPOINTMENT WITH THE **SURGEON**, WE MADE SOME LIFESTYLE CHANGES.



MY ONCOLOGIST WAS BIG ON **SOY**.*



SOY!

* I'M GUESSING BECAUSE OF ITS ANDROGEN-DEPLETING NATURE?

SO WE STARTED BUYING **SOY MILK**.



...I HAD IT ON **CEREAL** AND MADE PUDDING POPS WITH IT.

...AND WE BOUGHT **TOFU** MORE OFTEN.



...AND WE TRIED TO LEARN HOW TO COOK IT PROPERLY.

I'M NOT QUITE SURE IF I **NEEDED** TO DO THIS FOR **HEALTH** REASONS...



...BUT IT PASSED THE TIME WHILE I AWAITED TREATMENT.







MOST OF WHAT I'VE
BEEN DOING IS WAITING.



MY APPOINTMENT WITH THE
SURGEON WOULDN'T BE
UNTIL THE END OF JANUARY.

...AND SO I FELL
INTO A ROUTINE...



I WAKE IN THE MORNING...



...TAKE MY
THYROID PILLS...



...AND ROLL OVER AND TRY
TO GO BACK TO SLEEP.



BUT *THAT'S* WHEN MY MIND
STARTS WORKING OVERTIME.

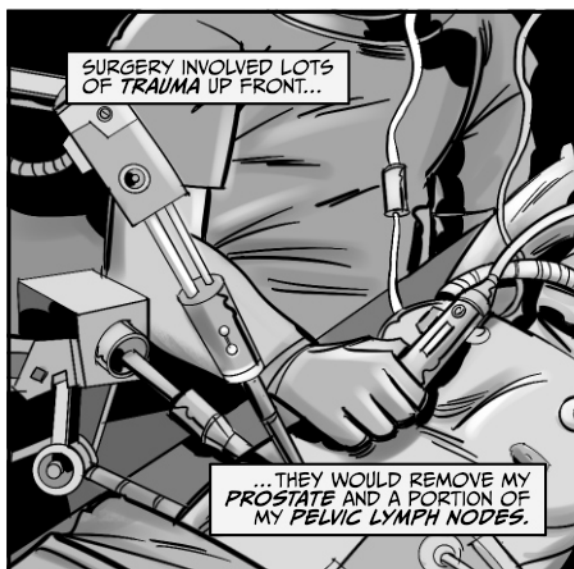


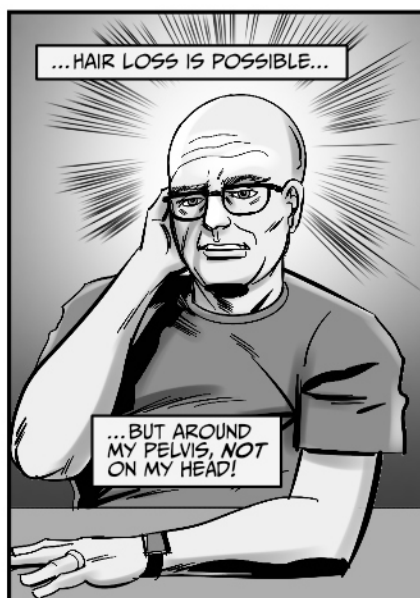
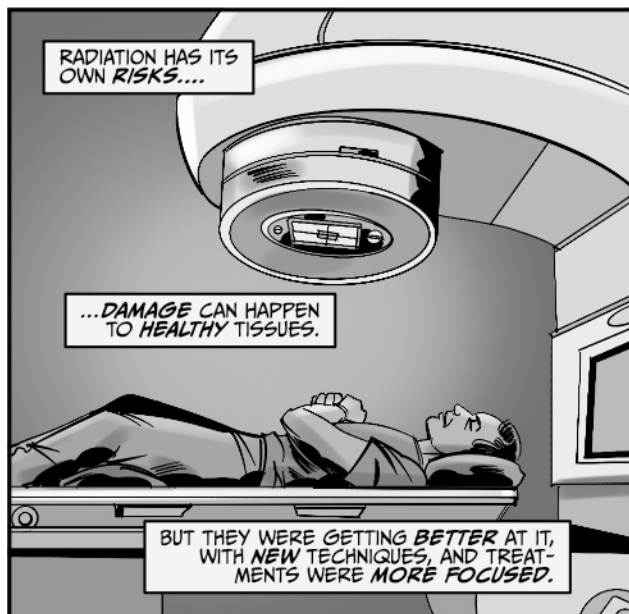
I START TRYING TO
PROBLEM SOLVE...

...TO FIGURE
THINGS OUT...



...TO WORRY
ABOUT DYING.







I *FINALLY* GOT TO MEET THE SURGEON AT WINSHIP.

HE SEEMED VERY UPFRONT...



... AND SURPRISINGLY OPEN TO *ALTERNATIVES* TO SURGERY.

...AND UNLIKE SOME OF THE *OTHER* DOCTORS...

... HE *NEVER* USED THE WORD "CURE."



DURING OUR CONSULT, WE HAD A *FUNNY* DISCUSSION.*

YOU'RE 64, BUT BIOLOGICALLY YOU'RE MORE LIKE 50.

HA! BASED ON WHAT?

...I FEEL LIKE A GEEZER.

WELL... IT'S *JUST* MY IMPRESSION.

...IS HE HITTING ON ME?

* FUNNY TO ME, ANYWAY...



LATER ON HE SAID IT WAS BECAUSE MY OVERALL HEALTH WAS *RELATIVELY* GOOD...

...NO HEART DISEASE OR DIABETES.



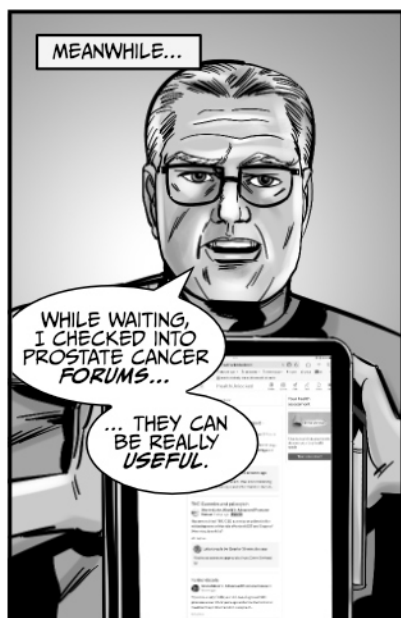
REBECCA AND I LEFT WITH THE FEELING THAT I WAS *CLOSER* TO FIGURING OUT *MY* TREATMENT PLAN.

I HAD SHIFTED TO CONSIDERING *RADIATION* AS AN OPTION...

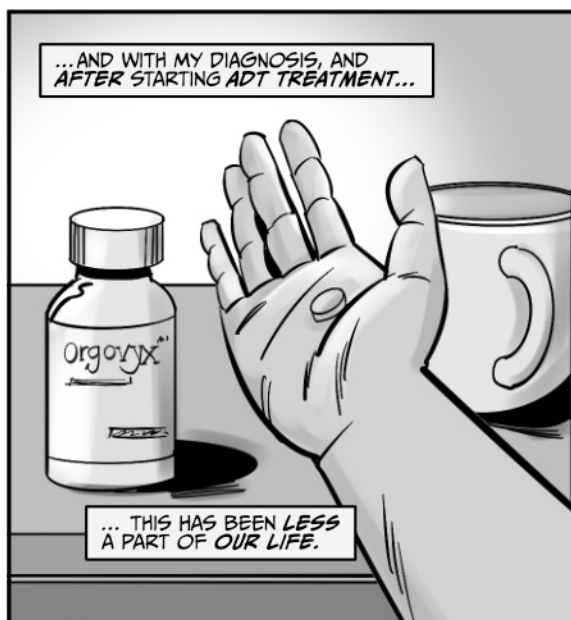


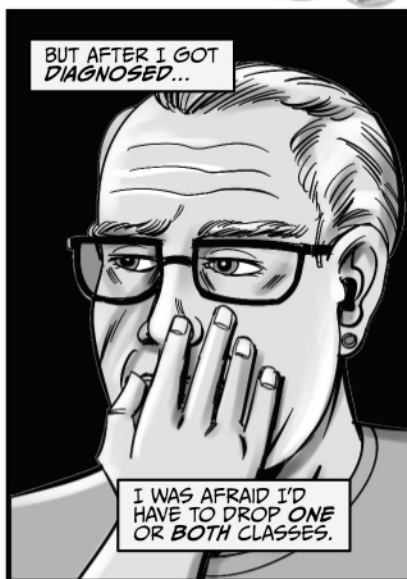
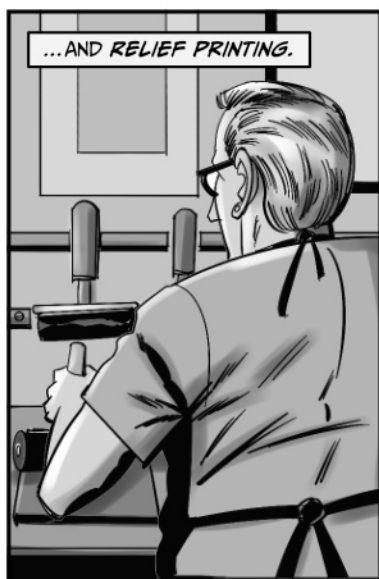
WE'D KNOW MORE AFTER OUR MEETING WITH THE *RADIOLOGICAL ONCOLOGIST*...

... IN A WEEK.



* ERECTILE DYSFUNCTION ...







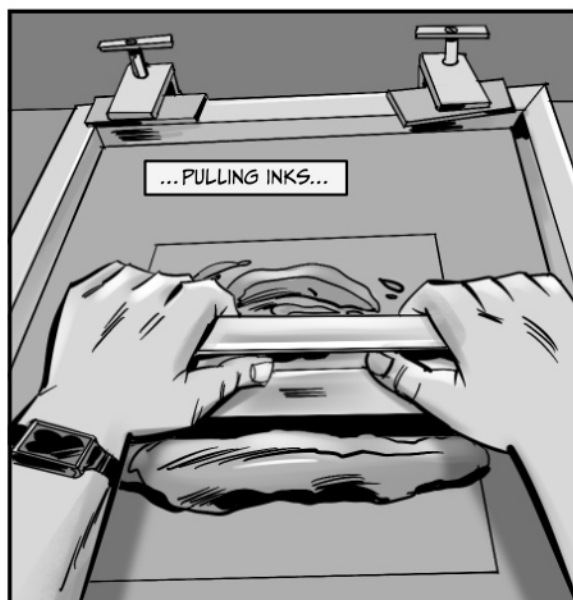
BUT IT SOON WAS *OBVIOUS* I JUST *DIDN'T* HAVE THE ENERGY TO GET THROUGH BOTH...

OW!

...SO I DROPPED *ASTRONOMY* AND JUST TOOK *SCREEN PRINTING*.



I REALLY ENJOYED *THE PROCESS...* MAKING *SCREENS...*



...PULLING *INKS...*



...MAKING *PRINTS...*



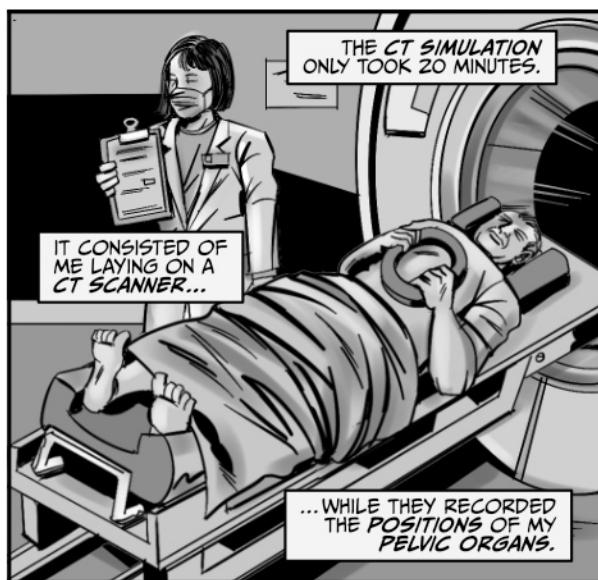
...BUT AFTER I DECIDED ON *RADIATION...*



...I REALIZED THAT THE *TREATMENT SCHEDULE** WOULD MAKE ME MISS *OVER A MONTH* OF THE CLASS.

* 28 "FRACTIONS," 5 DAYS A WEEK.









* REBECCA CAME UP WITH THAT TERM...





HERE'S THE *DEVICE*
THEY'LL USE FOR MY
RADIATION TREATMENT.

IT'S CALLED
A *VARIAN*
TRUEBEAM.
TM

I'LL BE LYING UNDER
THIS THING *28* TIMES,
5 TIMES A WEEK...

THIS IS WHERE
THE *RADIATION*
COMES OUT...

THIS IS USED FOR THE *CONE-BEAM*
COMPUTED TOMOGRAPHY (CBCT)
FOR TRACKING THE POSITION OF
MY PELVIC ORGANS *BEFORE*
IRRADIATION.

THIS IS THE *MULTI-LEAF*
COLLIMATOR THAT SHAPES
THE BEAM TO THE CON-
TOURS OF MY PROSTATE.

ALSO PART OF THE *CBCT*
SYSTEM. THESE UNITS
COME OUT ON ROBOTIC
ARMS AT THE START OF
THE TREATMENT.

THIS IS THE TABLE
I'LL LIE ON...

THE WHOLE DEVICE *PIVOTS* AROUND THE
PATIENT ON THE TABLE, SENDING TARGETED
PHOTONS AT THE CANCEROUS AREAS...

IT WILL IRRADIATE MY PROSTATE AND
PELVIS. THE PHOTONS *DAMAGE* THE *DNA*
OF THE CELLS THEY ENCOUNTER...

... BOTH *HEALTHY* CELLS AS
WELL AS *CANCEROUS* ONES.

THE IDEA IS THAT HEALTHY CELLS
CAN *REPAIR* THE DAMAGE, WHILE
CANCEROUS ONES *CANNOT*.

THIS IS WHAT *KILLS* THE CANCER
AT THE *CELLULAR* LEVEL...

... AT LEAST, THAT'S
THE *THEORY*.



FINALLY THE *FIRST* DAY
OF TREATMENT ARRIVED.



FIRST, I MADE SURE MY
BLADDER WAS FULL...

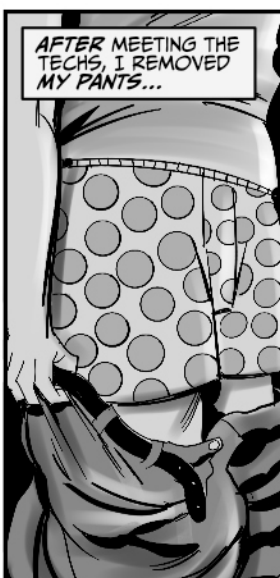


MR.
BURNS?



I ENTERED THE
TREATMENT ROOM...

...BEHIND RADIATION-
PROOF DOORS.



AFTER MEETING THE
TECHS, I REMOVED
MY PANTS...



...AND GOT ON THE TABLE.



THEN, UNDER A TINY
PRIVACY TOWEL...

... I PULLED MY
BOXERS DOWN.



WITH MY ELBOWS TO
MY SIDE, I GRABBED
A LITTLE FOAM RING...

...SO I COULD HOLD
MY ARMS *STILL* DURING
THE TREATMENT.



THE TECHS THEN ADJUSTED ME ON THE TABLE, USING THE **MARKS** ON MY HIPS AND LASERS AS GUIDES...

...SPEAKING IN NUMBERS.

137.4...

312...



THEN THEY LEFT THE ROOM...

...AFTER INSTRUCTING ME TO KEEP **STILL**.



THEN THE **RADIATION** DOOR SLID **SHUT**...

...AND THESE **ARMS** REACHED OUT...



...AND QUICKLY MAPPED THE **DAILY** POSITION OF MY **ORGANS**...

WHIRRR...

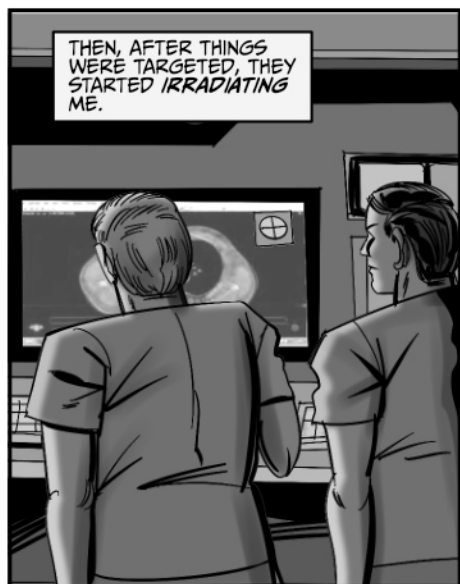
...ROTATING AROUND ME WHILE I LAY **STATIONARY**.



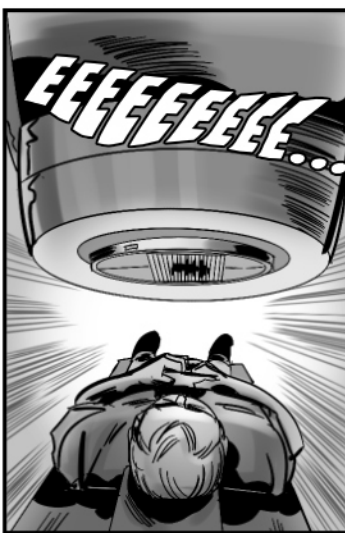
IT USED A TECHNIQUE CALLED **CONE-BEAM COMPUTED TOMOGRAPHY (CBCT)**...

WHIRRRRRRRRR!

...A KIND OF **3D** IMAGING.



THEN, AFTER THINGS WERE **TARGETED**, THEY STARTED **IRRADIATING** ME.



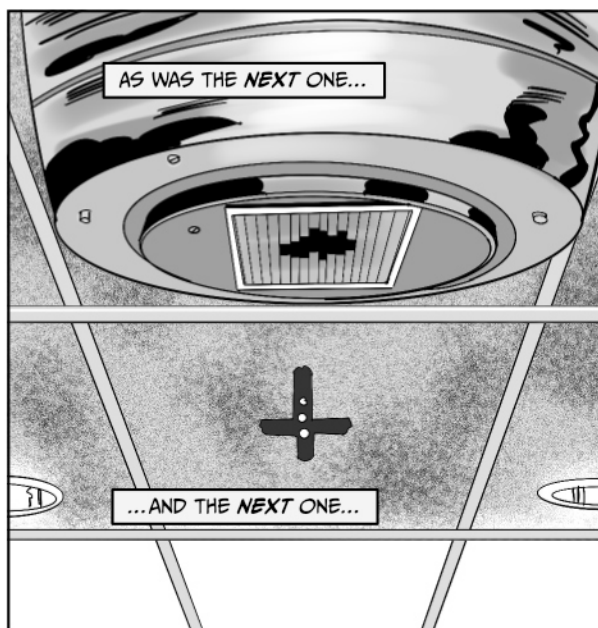
EEEEEEEEEE...

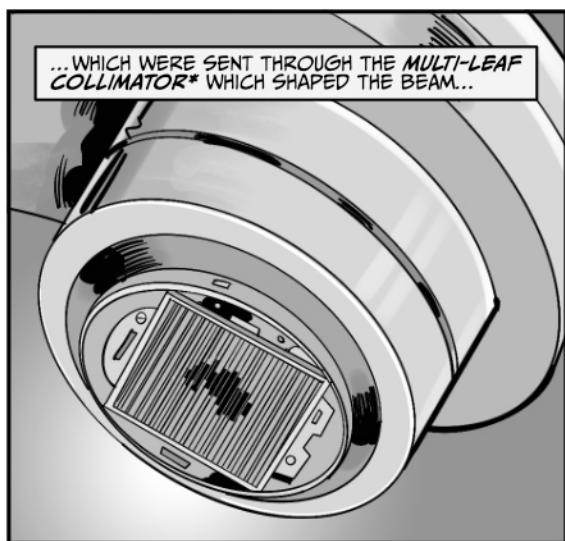
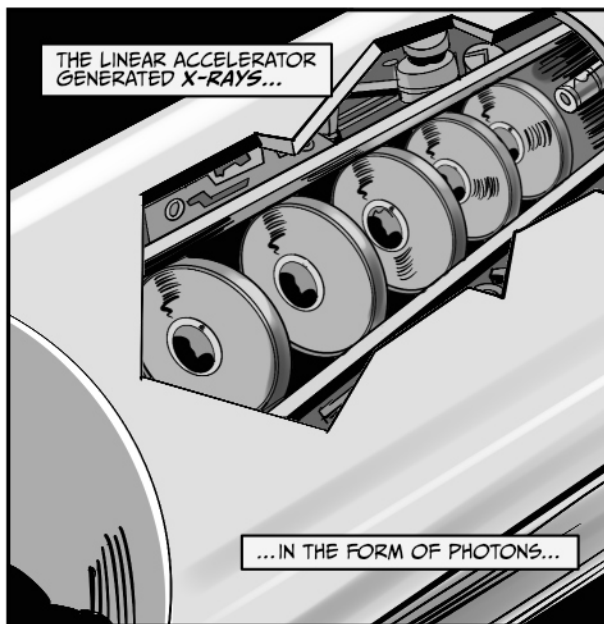
* IN REALITY, THERE'S NOTHING VISIBLE. I'M JUST BEING **DRAMATIC** HERE...



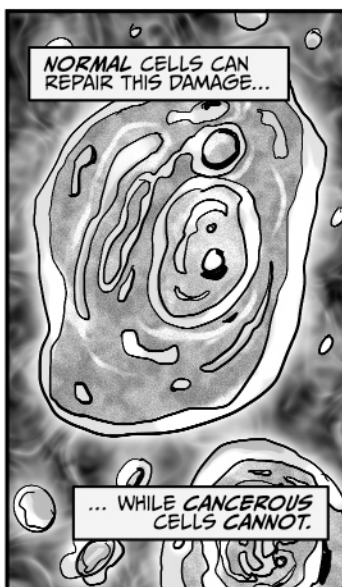
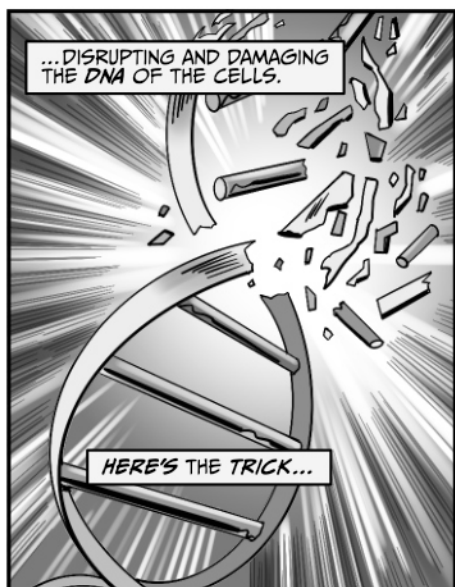
...AND THEN I WAS **DONE**.

THE WHOLE THING TOOK **LESS** THAN 15 MINUTES.





** I LOVE THAT TERM...SUCH GREAT TECHNO-BABBLE!*





NOW I'VE SAID BEFORE THAT I DON'T REALLY LIKE TO THINK OF MY SITUATION AS "FIGHTING CANCER."



ALL I WAS REALLY DOING WAS...

...TRYING TO EAT WELL...



...EXERCISING...

HUFF!
HUFF!



...DRINKING A LOT OF WATER...

GLUG! GLUG! GLUG!



...AND LYING ON A TABLE.

EEEEEEEEEEEEEE!

BUT I MUST ADMIT, AS I WAS LYING THERE BEING IRRADIATED...



...I COULDN'T HELP BUT THINK:

FRY YOU BASTARD!

WE STAYED IN ATLANTA AT A PLACE CALLED "THE HOPE LODGE."



IT'S ONE OF 30 RUN BY THE AMERICAN CANCER SOCIETY.

BACK WHEN MY MOM WAS DYING OF LUNG CANCER...

...I WAS LEFT WITH A BAD IMPRESSION OF THAT ORGANIZATION.



I WAS DESPERATE TO GET HER SOME HELP, SO I CALLED THEM AND ASKED:

WHAT TANGIBLE THING CAN YOU DO TO HELP MY MOM?



ERRR...
...WE DO RESEARCH...?

THEIR ANSWER WAS LESS THAN SATISFYING.



NOW... THAT WAS SOMETHING LIKE 40 YEARS AGO...

...BUT THIS EXPERIENCE TOTALLY CHANGED MY OPINION OF THEM.





* 150 MILES TOTAL!





I *CANNOT* EXPRESS HOW GRATEFUL
I AM FOR THE *HOPE LODGE*.

IT WAS AMAZING TO
MEET ALL MY FELLOW
CANCER PATIENTS ...

THEY CAME FROM ALL
WALKS OF LIFE...

...AND WERE ALL
SHARING THIS *HOME*
AWAY FROM *HOME*.



... TO GET *CANCER TREATMENTS*
DONE AT ATLANTA AREA FACILITIES...



IT SOMEHOW MADE ME FEEL
BETTER TO SEE *OTHERS*
COPING WITH THIS PROBLEM ...



...BUT ALSO *SAD* TO
WITNESS THEIR STRUGGLES.



THE STAFF AND
VOLUNTEERS WERE
INCREDIBLE, TOO.



BUT BEING THERE MADE MY
TREATMENT *SO MUCH EASIER*.





THE HOPE LODGE
SERVES A DIVERSE
GROUP OF INDIVIDUALS...

... THAT COME FROM
ALL OVER THE PLACE.



... PEOPLE WITH **LEUKEMIA**,
PROSTATE CANCER, **LYMPHOMA**...

... SHARING THEIR **LIVES**
AND **STRUGGLES** WITH
EACH OTHER...

... IT'S BOTH **HEARTENING** AND
TRAGIC AT THE SAME TIME.



LIVING HERE WAS A **VERY**
COMMUNAL EXPERIENCE ...

... MAKING MEALS AND
EATING TOGETHER...



IT'S THE KIND OF PLACE
THAT WHEN PEOPLE ASK...

HOW
ARE YOU
DOING?

... THEY **REALLY**
MEANT IT!



THEY ALL HAD THEIR
OWN **STORIES**...

... AND IT WAS AN
AMAZING
EXPERIENCE MEETING
THEM ALL.



DURING OUR STAY, NORTH AMERICA EXPERIENCED A SOLAR *ECLIPSE*.



IN ATLANTA IT WAS *JUST* GOING TO BE A *PARTIAL ECLIPSE*...

... BUT PEOPLE WERE *STILL* EXCITED TO SEE IT.

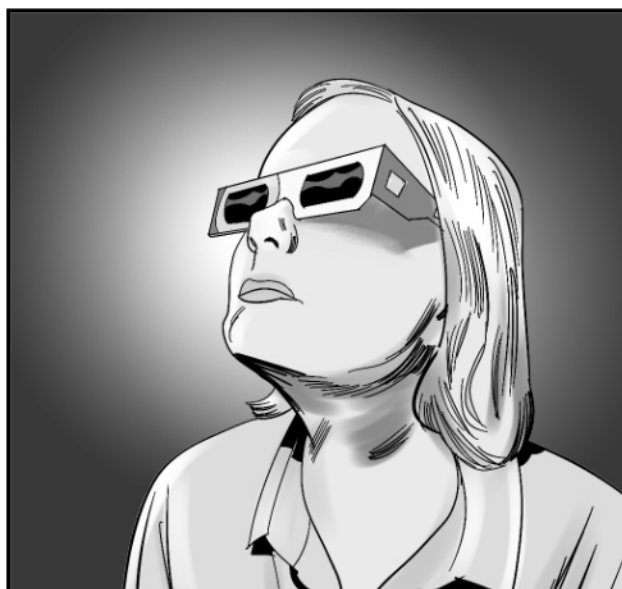


OUR ACCOUNTANT HAD SENT US 2 SETS OF *ECLIPSE GLASSES*...

...ALONG WITH HER *HOLIDAY CARD*.

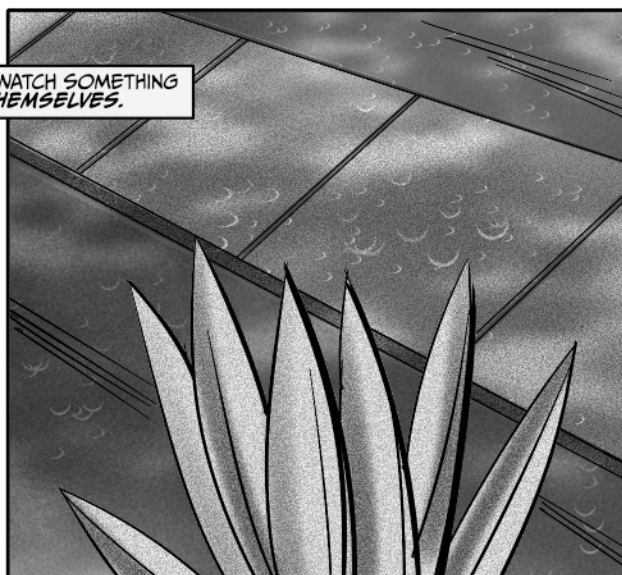
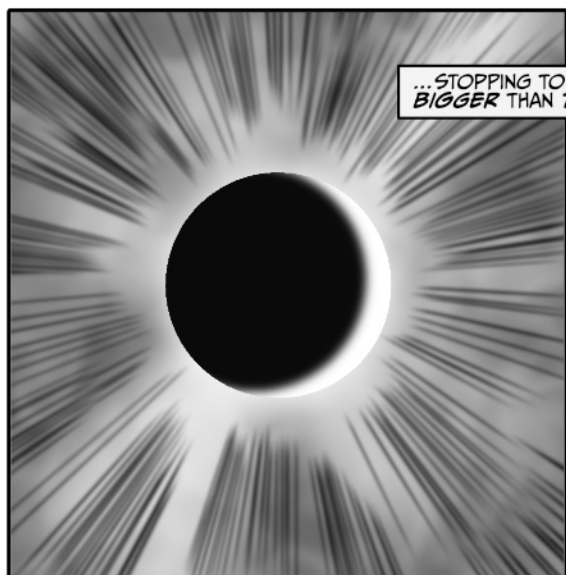


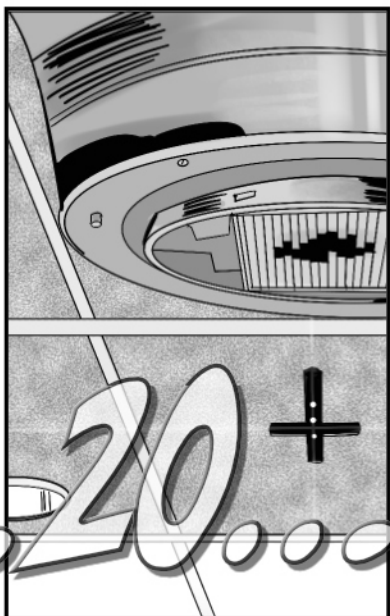
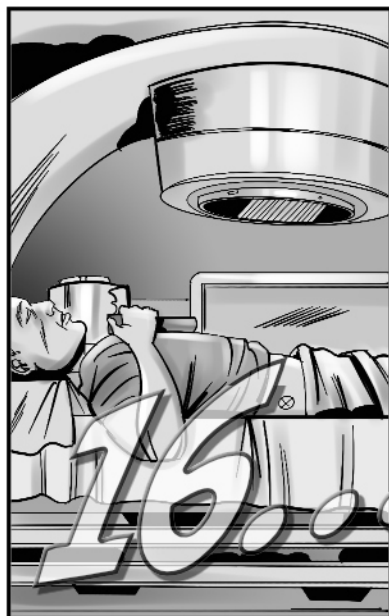
...AND WE HAD BROUGHT THEM WITH US FOR OUR STAY AT THE *HOPE LODGE*.





...FOLKS WERE ALREADY THERE,
WAITING FOR THE *ECLIPSE*.











REBECCA AND I DROVE ALL THE WAY **BACK** TO NORTH ATLANTA FOR MY FOLLOW-UP WITH MY **ONCOLOGIST**...

...UP PEACHTREE-DUNWOODY, TO **SAINT JOSEPH'S**...

...A **TERRIBLE** DRIVE FROM ATHENS.



MOST OF IT WAS GOING OVER MY **BLOOD TESTS**...

...AND EXPLAINING HOW I'D BE CHECKED **EVERY 3 MONTHS**.



BUT AT **THE END** I HAD AN INTERESTING CONVERSATION.

SO...
WHAT'S MY
PROGNOSIS?



YOUR
PROGNOSIS
IS **GOOD**.

...I HOPE.



I KNOW **THAT**
ISN'T EXACTLY
SCIENTIFIC, BUT
IT'S WORKED **SO FAR**.



SO HOW AM
I DOING
NOW?

I'VE SURVIVED
RADIATION
THERAPY...

...AND I'M
DOING *EVERY-*
THING I CAN TO
RECOVER.

I FRANKLY
DON'T
KNOW.

I'M EATING
HEALTHILY, EXERCISING
REGULARLY, AND LIVING
MODERATELY.

BUT I *REALLY* WON'T
KNOW WHETHER THE
THERAPY WAS
SUCCESSFUL FOR A
YEAR OR SO.

BUT *THIS* WAS
THE TREATMENT
THAT I COULD
LIVE WITH...

...AND I HAVE
HOPES THAT MY
50/50 CHANCES
WILL WORK OUT.

WE'LL SEE...

SO...
THANKS FOR
READING THIS.

I HOPE
YOU GOT
SOMETHING
OUT OF IT.

THE END?

Thanks!

There are quite a few folks I'd like to thank.

First I'd like to thank **everyone** who reached out to me after my diagnosis and expressed their concern and care for my well-being. I know it's awkward and difficult to say the right thing to someone experiencing any medical problem, but especially cancer.

Thanks for your kind words.

I'd like to thank my doctors, both at **Emory/Winship** as well as **Athens Area Urology**, who first diagnosed me back in December of 2023. Medical science in the United States is amazing, and I've been constantly impressed with the quality of the care I've received during this period.

My only complaint is with the *business* part of medical care in the United States; mostly because of the greed and/or indifference of the insurance industry. There is a special ring of hell awaiting those in **that** business.

Speaking of care, I'd like to thank the radia-

tion technicians at **Winship Radiation Oncology** who unfailingly greeted me and made me comfortable for all the EBRT sessions I went through. Thank you to Isaac, Greg, and Meagan.

I'd like to thank the **American Cancer Society** for allowing Rebecca and me to stay at their Hope Lodge while I was getting treatment in Atlanta. They make what is a difficult time for patients and their loved ones just a little easier.

I'd like to thank my daughter Brigid, for reading all the medical reports and making sense of it all. Sorry you have to deal with this.

Lastly, and always, I want to thank the love of my life, my soul-mate, and my best friend; my wife Rebecca. I'm also sorry that you have to deal with this nonsense, but you do it with such grace, wit, and love. Thank you.



Getting Diagnosed with Prostate Cancer

Getting diagnosed is a long, drawn out process. The normal path to diagnosis is:

First you get a worrying PSA test. If you're over 50, that means one where the value is greater than 4. Because it might be elevated for any number of reasons, like sexual activity or certain exercise, doctors usually have you retest a month later to make sure it's not a fluke.

If the second test is still high, they might recommend that you have either a DRE (digital rectal exam) or a pelvic MRI. The problem with a DRE is that it requires a skilled practitioner, and could be inaccurate. If the MRI shows troubling areas (called "lesions," and scored on the Pi-Rads scale - 4 or 5 are concerning), then a fusion-guided biopsy, guided by that MRI, is used to actually diagnose cancer. Without a MRI, the samples are taken randomly, which is less accurate. Pathology on samples will determine if cancer is present.

If the biopsy finds cancer, this might be followed by a PSMA/PET scan to determine spread. After that, cancer can be "staged," that is, given a value denoted by Roman numerals (like IV).

Resources

If you're newly diagnosed with prostate cancer (PC), or are trying to find out more about the symptoms or treatment of the disease, here are several web-based information sources I've found useful:

cancer.org - The American Cancer Society - a great place to learn about diagnostic tests, staging, and treatment.

healthunlocked.com/advanced-prostate-cancer - a great forum for those already diagnosed with PC, or their caregivers. A place to find support from others. I check in here regularly to get answers. Part of Malecare.org (below).

malecare.org - web portal for lots of resources, including **canceracademy.org**, **blackprostatecanceralliance.org**, **lgbtcancer.org**, **cancergraph.org**, **vitawaves.org**, and **cancermatch.org**.

onclive.com/clinical/prostate-cancer - a site that apparently is geared towards oncology doctors. A little dense, but useful articles.

pcf.org - The Prostate Cancer Foundation - a good place to find out about symptoms, treatments, and diagnostics.

pcri.org - good glossary and explanation of staging and diagnostics.

prostatecancer.news - a good place to keep up on the latest news about PC treatments.

reddit.com/r/ProstateCancer/ - a surprisingly useful source of information from both those experiencing and those worried about PC.

urotoday.com - good source for the latest research and information on treatments.

Glossary of needlessly complicated medical terms

There are a lot of confusing medical terms associated with the diagnosis and treatment of prostate cancer. Here are a few I've dealt with, but there are many more. Several of these were taken directly from the **Health Unlocked Advanced Prostate Cancer website**.

ADT – Androgen Deprivation Therapy. Prostate cancer “feeds” on testosterone. Reducing “T” slows the cancer’s growth. Side-effects include hot flashes, loss of muscle tone, “brain fog,” loss of bone density, and others.

ARPI - androgen receptor pathway inhibitor.

ARSI - androgen receptor signaling inhibitors.

AS - active surveillance.

BPH - benign prostatic hyperplasia (also hypertrophy).

Brachytherapy - Therapy when radioactive “seeds” are placed in the prostate.

CRPC - castration-resistant prostate cancer.

CBCT - Cone-beam computed tomography for tracking the exact position of pelvic organs before irradiation.

CT SCAN - computerized tomography (also known as CAT scan or CT scan).

DRE - digital rectal examination.

DX - diagnosis.

EBRT - External Beam Radiation Therapy.

Fusion-guided Biopsy - this is the most accurate way to acquire samples (“cores”) of the prostate and nearby tissues in order to test for cancer cells. The earlier pelvic MRI is used in conjunction with an ultrasound probe, inserted into the rectum to target suspicious areas. Samples (4-20) are then taken either trans-rectally or trans-peritoneally. There is a 3-5% chance of infection with the trans-rectal method.

Gleason Score - a scale from (effectively) 6-10 that rates aggressiveness of cancer. 6 is low-grade and 10 is high-grade, meaning, likely to metastasize (spread).

HIFU - high intensity focused ultrasound.

IMRT - intensity-modulated radiation therapy.

MRI - magnetic resonance imaging.

Orchiectomy - removal of testicles to reduce testosterone as a form of ADT.

PiRads - a rating scale from 1-5 used to determine *likelihood* of cancer on a pelvic MRI. Pi-Rads 5 indicates “very high risk. Clinically significant cancer is highly likely to be present.”

PSA - prostate specific antigen, used as an early indicator for prostate cancer. Raised PSA can be caused by several things besides cancer.

PSMA/PET scan - a technique that uses radioactive markers to find the protein associated with prostate cancer throughout the body. The report uses the term “avidity” to measure the brightness of the areas. High avidity indicates high concentration of those proteins.

RALP - robot-assisted laparoscopic prostatectomy.

RO - radiation oncologist.

RP - radical prostatectomy.

RT - radiation therapy.

SBRT - stereotactic body radiation therapy.

SE - side effects.

TRUS – transrectal ultrasound.

WPRT - whole pelvic radiation therapy.

Enjoy this comic?



See all my comics at burnscomics.com





Where patients get
their superpowers.



malecare.org

