The topic of his thesis Risk factors for prostate cancer

I chose, because the incidence and mortality of the male population on this disease increases. According to the data listed in the National Cancer Registry The 2003 incidence of prostate cancer from 1970 to 2003 increased from 17.7 / 100,000 population to 75/100000 population (ie an increase of 1.74 / 100,000 new diagnosed per year). Along with the upward trend in incidence and mortality this neoplasm . That since 1970, rising from 14/100000 inhabitants dead 29.3 / 100,000 population of deaths in 2003 (an increase of 0.46 / 100,000 deaths per year). (Figure 2, 3) In 2003, prostate cancer was diagnosed in 3728 men (tj.11 % of all reported neoplasms). A higher number of reports was only in tumors of the skin (without malignant melanoma ) and tumors of the lungs and bronchi . Prostate cancer and even than even colon cancer (8%). When comparing the frequency of deaths neoplasms of the male population, prostate cancer stands second jointly colon cancer (each 9%). SURPASS is a neoplasm of bronchus and lung (27 % of deaths from neoplasms). (Figure 4, 5) Prostate cancer is forty years practically non-existent, but then its incidence increases dramatically to between seventy and seventy fourth year reaches its maximum. (Figure 1) An important fact is that prostate cancer can be through simple methods to detect and diagnose. They help in the readily available methods, between which currently include digital palpation of the prostate, laboratory measurements prostate-specific antigen, in its free and overall shape, and transrectal ultrasound probe, which allows biopsy sampling. Generally the measuring levels of prostate screening specific antigen should be conducted in men over fifty years. My aim was to demonstrate the relationship between prostate cancer and

other serum markers which were cortisol - 1, prolactin, testosterone, follicle stimulating hormone, luteinizing hormone, estradiol, dihydroepiandrosterone and sexy hormons binding globulin