

# Prostate cancer is one of the most common male cancers in South Africa - how would you deal with a diagnosis?

According to the National Cancer Registry (NCR) of South Africa, prostate cancer is the most commonly diagnosed cancer among men in South Africa.



Source: Supplied. James White, head of sales and marketing at Turnberry Management Risk Solutions.

In 2020, it accounted for more than 22% of all male cancers, with the average age of diagnosis being 65 years old.

While prostate cancer is more common among older populations, it can affect men of any age, and although the disease is often treatable, the success of treatment and survival rate depends heavily on an early diagnosis and access to appropriate treatment.

The last thing anyone wants to think about after a diagnosis is how they will pay for the treatment, or if they can even afford it, which is why gap cover has become an essential weapon in the fight against cancer.

## Key points about prostate cancer

While the exact cause of prostate cancer is unknown, there are several risk factors that increase a man's likelihood of developing the disease. These include age, family history, and lifestyle factors such as diet and exercise.

However, if it is caught early, prostate cancer can often be successfully treated, so it is important for men to get regular check-ups and prostate-cancer screenings starting at age 50 (or earlier if they have a family history or other risk factors).

Regular screenings can help detect prostate cancer before it has a chance to spread, giving men the best chance of a favourable outcome.

It is also important to know that help and support are available. Prostate cancer can be a difficult diagnosis for men and their families, but there are many resources available for support, including support groups like the Machi Filotimo Cancer Project, as well as online forums, and counselling services.



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These resources can help men and their families cope with the emotional and practical challenges of a prostate-cancer diagnosis and treatment. When it comes to the financial side, it is important to understand your medical-aid scheme and plan option, and how treatments will be covered.

## Shortfalls and PMB conditions

Prostate cancer is a Prescribed Minimum Benefit (PMB) condition, which means that medical-aid schemes in South Africa are required by law to provide cover for diagnosis, treatment, and care, in line with that which is available at a state hospital. However, this does not mean that medical-expense shortfalls will not occur.

Co-payments may still apply for certain aspects of treatment and making use of a non-Designated Service Provider (DSP) may attract penalties. Depending on the scheme and plan option a patient has, there may also be other limitations on the cover received for cancer treatment.

For example, a PMB will cover the treatments that are available as per the protocols of a state hospital, including surgery, chemotherapy, immunotherapy, radiation, and hormone therapy. There are also next-generation biological cancer drugs that are used to successfully treat prostate cancer while being minimally invasive and having fewer side effects.

These drugs, however, are not part of the basket of PMB care, and will be covered according to the cancer benefits of a patient's medical-aid scheme and plan. There is significant potential for shortfalls here, as these drugs are expensive, are not often fully covered, and need to be administered multiple times to be effective.

## A significant gap

As with all cancers, early detection saves lives, and the sooner a patient can start to get the treatment they need, the better their prognosis. However, having to think about the financial implications can add strain to an already stressful situation. Having the right gap-cover policy can be invaluable in ensuring that you can receive the best treatment, quickly, to give you the highest chance of surviving and thriving after a prostate-cancer diagnosis.



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At Turnberry, prostate cancer claims make up a significant 17% of all cancer-related claims, and the amounts claimed for are substantial sums of money. In 2022 alone, we paid out several high-value claims related to prostate cancer – a shortfall

of R29,530 from a total bill of R84,889.50; a shortfall of R31,496.60 from a bill of R47,244.90; a claim of R54,555.50 from a total charged amount of R84,899.50; a claim of R53,722 from a total bill of R80,583; and a shortfall claim of R26,765.86 from a total bill of R39,392.80.

Without gap cover, these patients would have had to fund these shortfalls out of pocket, which could have significantly impacted their financial wellbeing long after they received a clean bill of health.

## **Always talk to your broker**

Medical-aid schemes and the various plan options within the schemes vary in the coverage they provide as well as the way in which their cancer benefits are structured. In addition, different gap-cover policies have different coverage options, which means that it is important to talk to your broker or financial advisor to find the best gap-cover policy to augment your medical-aid cover.

Ultimately, gap cover is a small price to pay for the peace of mind it offers: that you will be covered for cancer treatments and that the financial burden of shortfalls will not fall on your shoulders, or on those of your family members either.

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