When cancer comes back after treatment, or after a period of time when the cancer couldn’t be detected, it’s called recurrence or recurrent cancer. It means that even though you were treated and thought to be cancer-free, some cancer cells survived.

Sometimes a person develops a new cancer that is not related to the first cancer. This is called a **second primary cancer**. This is not the same as recurrence. A second primary cancer is a totally new cancer.

**Recurrent cancer**
The recurrent cancer might come back in the same place it first started, or it might come back somewhere else in the body. When cancer spreads to a new part of the body, it’s still named after the part of the body where it started. For instance, prostate cancer might come back in the area of the prostate gland (even if the gland was removed), or it might come back in the bones. In either case it’s a prostate cancer recurrence. It may be called recurrent prostate cancer. The cancer in the bones is treated like prostate cancer.

### What are the types of recurrence?
There are different types of cancer recurrence:

- **Local recurrence** means that the cancer has come back in the same place it first started.
- **Regional recurrence** means that the cancer has come back in the lymph nodes near the place it first started.
- **Distant recurrence** means the cancer has come back in another part of the body, some distance from where it started (often the lungs, liver, bone, or brain).

If you have a cancer recurrence, your health care team can give you the best information about what type of recurrence you have and what it means to have that type. They can also talk to you about your options for treatment and outlook (prognosis).

**What you might feel**
When cancer comes back, you will probably have lots of different feelings. You may feel sad and scared. You might feel more cautious, guarded, and less hopeful than before. You may be disappointed in your body and your health care team. It’s important to talk about your feelings so your cancer care team and others can help.
Making decisions
When recurrence happens, there are many reasons why certain types of treatments may or may not be offered. It’s important to remember everyone is different. Talk with your doctor and cancer care team about your treatment options and trust them to help you make care decisions.

Talk with your loved ones about the options you have been given, along with the decisions you have made or are thinking of making.

You may feel like you want to get a second opinion. You might want to see if other cancer centers can offer you something different. You might want to look into a clinical trial. Or you might decide not to get any more treatment. Whatever you decide, it’s important to be as comfortable as possible with your decision.

Treatment decisions are based on:
• Type of cancer
• When it recurs
• Where it recurs
• How much it has spread
• Your overall health
• Your personal values and wishes

If you decide to keep getting treatment, you will need to think about how likely it is that the treatment will help you. Will it make you feel better? Will it help you live longer? In many cases, your doctor can help you decide what therapy is best for you. Remember to check your insurance coverage when considering different options.

Whether or not you want cancer treatment, you should always get supportive or palliative care. This type of care focuses on managing symptoms in people with a serious illness like cancer. It can be given at any point during your care and through your entire cancer experience.

Tell your friends or loved ones what they can do to help. You might be able to cope better with their support and understanding.

For cancer information, day-to-day help, and emotional support, call the American Cancer Society at 1-800-227-2345 or visit us online at www.cancer.org. We’re here when you need us.