



Newsletter **December 2018** – Issue 180

Next Meeting: **Tuesday 18 December 2018**

Prostate Heidelberg provides information, education and support for those affected by Prostate Cancer. At our meetings we:

- Show respect to members, speakers and guests.**
- Allow people to speak and other attendees to listen.**
- Respect confidentiality.**

Next Meeting Tuesday 18/12/18

Guest Speaker

A/Prof Nathan Lawrentschuk

“How genetics is impacting therapy now and in the future.”

Associate Professor Nathan Lawrentschuk is a urological surgeon and oncologist in the UroOncology Service at the Peter MacCallum Cancer Centre. He also has appointments at The University of Melbourne, Department of Surgery and Olivia Newton-John Institute for Cancer Research at the Austin Hospital, Melbourne

Following this meeting, all members are invited to attend our annual Christmas lunch at the Ivanhoe Hotel

Guest Speaker Tuesday 19/2/19

Cathie Pigott, Project Manager, Advance Care Australia

More details in next newsletter.

Last Meeting General Discussion

At our last meeting we had one of our biggest turn-outs on record with 36 people present, including 6 new members. Only a small number of men with PCa join support groups and it’s great to see so many coming along to our local gathering.

All new members had time to introduce themselves and discuss their journeys and we look forward to their ongoing participation in Prostate Heidelberg.

2019 Subscriptions

Due to increased running costs we are increasing annual subscriptions to \$20, \$10 for new members joining after July 2019.

Pay at your next meeting, by mail to PO Box 241, Ivanhoe 3079 or directly into the Prostate Heidelberg bank account: BSB 083-256; Account 583244292 (include your name in the details)

Where do our subscriptions go? Each year we use a portion of our subscriptions to purchase group membership for Prostatepedia. This is judged to be one of the best technical/medical publications in the world relating to prostate cancer. All financial members of Prostate Heidelberg receive a free copy of this publication every month - which is good value considering an individual subscription to Prostatepedia costs \$US 55.00 per year.

Each alternate month we endeavour to have a specialist speaker. We show our appreciation to these speakers by presenting them with a token of appreciation and a certificate - this is also paid for out of our annual subscription, as is our regular morning tea..

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One thing to bear in mind – all subscriptions paid to Prostate Heidelberg are used judiciously - no person within the organisation receives payment of any kind for their time or services rendered - all committee members are unpaid volunteers.

Focus on Clinical Trials.

EXERCISE THERAPY: Counteracting mental health issues in men with prostate cancer through exercise

Trial Sponsor: Australian Catholic University, Fitzroy

Trial ID: ACTRN12616001329459

The objective of this study is to explore the efficacy of a targeted exercise intervention as a mental health care service for prostate cancer patients. In particular the aim is to a) examine whether a tailored exercise intervention can help manage psychological distress in men with prostate cancer and b) evaluate the cost-effectiveness of the program to promote mental health in men with prostate cancer.

Who is it for? You may be eligible to join if you are a male aged 18 years and over and experiencing psychological distress after a prostate cancer diagnosis. Trial details: Participants in this study will be randomly (by chance) divided into two groups. Participants in one group (i.e. Exercise intervention group) will attend a 3 month physical exercise intervention program that involves resistance (i.e. lifting weights) and aerobic exercise (e.g. walking, jogging, cycling) undertaken 3 times per week at various community based fitness centres/gyms throughout Melbourne . Exercise sessions will take approximately 60 minutes and will be conducted in small groups under the supervision of an accredited exercise physiologist. Participants in the second group (i.e. Usual care) will maintain usual care for 6 months and will then be offered the exercise intervention. All participants will be required to complete a number of questionnaires at baseline, 3 months and

6 months, in order to assess mental health and quality of life. They will also undergo fitness tests and dual-energy X-ray absorptiometry (DEXA) scans to evaluate changes in physical fitness levels and body composition.

The physical exercise intervention will involve a 3-month, group-based, supervised exercise program delivered in community fitness centres/gyms in Victoria (Hawthorn Leisure Centre, Fitzroy LC and Coburg LC). Prior to commencing the program, each participant will receive a consultation with an exercise physiologists (EP) in order to individualise the exercise prescription to their specific needs according to their prostate cancer and general health history, physical abilities and personal preferences.

For more information, visit this web page.

<http://www.australiancancertrials.gov.au/search-clinical-trials/search-results/clinical-trials-details.aspx?TrialID=371058&ds=1>

Editor's Note:

I participated in this trial earlier in 2018. Although I do not suffer from significant psychological distress, I found the exercise component of this trial to be extremely valuable in mitigating side effects of ADT. After 3 months of the intensive exercise program I achieved some great results:

- Increase in bone density
- Increase in muscle mass
- Increase in cardio-vascular fitness and increased strength.

These indicators normally deteriorate over time whilst on ADT and I highly recommend this program to any members of our Support Group.

Getting The Most From Our Medical Appointments

Many of us feel that our medical appointments are rushed to meet our health care professionals' busy schedules. But you should never walk away feeling unsatisfied after a medical appointment,

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and the Prostate Cancer Research Institute has published guidelines to help us get the most out of each visit.

1. Always obtain and keep copies of your medical records.

2. Take things a step at a time and do your research. This is your life and your health, so you want to make the best decisions for yourself. Talk to your doctor about what you have researched, and don't be afraid to do more research on treatments your doctor discusses with you.

3. Ask your doctor for the time to discuss any questions and concerns you have. Don't be afraid to ask questions. You should never leave the doctor's office feeling confused. Sometimes it's helpful to prepare your questions and write them down before the visit. It can also be helpful to bring someone with you who can take notes while you are talking with your doctor. If nobody is able to go with you, write down answers and information your doctor gives you, as information overload can make it difficult to process things verbally in the moment.

4. Don't be afraid to ask your doctor to back up his recommendations. You should always speak to your doctor respectfully, but there is nothing wrong with asking him or her to show studies with current cure rates and complication incidences. You need to know all of the information regarding any treatment you choose, including how successful the treatment is and potential risks and side effects.

5. Keep a journal of the way you feel and anything relevant to your condition and treatment. This includes side effects, energy levels, any positive changes you notice, any change in sleep patterns, emotional changes, etc. If you're not sure if something is relevant, write it down!

6. Be honest with your doctor. Your medical professionals can only help if you

are being completely honest. For example, the amount of prostate cancer patients who suffer from erectile dysfunction and incontinence is estimated to be much higher than the actual percentage reported. The reason is, many men are embarrassed to talk about these issues. However, if a man isn't honest with his doctor about these side effects, he will never have the chance to learn about all of the options available to help him with both issues. Communicating honestly helps your doctor to monitor your health and provide better treatment options. Some things may be difficult to discuss, but your doctor is here to help you.

2018 ASTRO: SPPORT Trial: ADT With or Without Pelvic Lymph Node Radiation in Prostate Cancer

Published: 30 Oct 2018

Source: www.ascopost.com

The first report of a large international clinical trial shows that, for men who show signs of prostate cancer after surgical removal of their prostates, extending radiation therapy to the pelvic lymph nodes combined with adding short-term androgen-deprivation therapy (ADT) to standard treatment can extend the amount of time before their cancer spreads. These findings were presented by Pollack et al at the 60th Annual Meeting of the American Society for Radiation Oncology (ASTRO).

Men with prostate cancer who are initially treated with prostatectomy often face signs of recurrence, usually signaled by a rise in the level of prostate-specific antigen (PSA) in the blood. Radiation therapy to the region of the prior prostate surgery (surgical bed) is standard, but only effective at keeping PSA low longer than 5 or more years in 60% to 70% of patients. While a rise in PSA after prostatectomy signals that the cancer is still present, it does not indicate where the cancer is located. The NRG Oncology/RTOG 0534 SPORRT clinical trial is the first randomized trial to show that radiation

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therapy to treat the pelvic lymph nodes in addition to standard prostate bed results in significant incremental gains for these patients.

"We looked specifically at men with prostate cancer who began to show signs that the cancer was not completely eradicated after prostatectomy," said Dr. Pollack. "Adding hormone therapy and pelvic lymph node treatment substantively increased the proportion of patients who remained free from disease progression, to the point that we could report the data after an early interim analysis. The degree of the effectiveness of the combination is surprising, but makes sense when you consider other more contemporary evidence using newer positron-emission tomography (PET) scanning methods showing that pelvic lymph node recurrences are more common than previously appreciated."

Distinguishing Fatal PCa from Manageable PCa Now Possible

Published: 18 Oct 2018

Source: www.sciencedaily.com

Scientists at the University of York have found a way of distinguishing between fatal prostate cancer and manageable cancer, which could reduce unnecessary surgeries and radiotherapy.

A recent study showed that more than 25 men were being unnecessarily treated with surgery or radiotherapy, for every single life saved. It is believed that success rates could be hindered as a result of treating all prostate cancers in the same way.

A team at the University of York and the University of British Columbia, Canada, however, have designed a test that can pick out life-threatening prostate cancers, with up to 92% accuracy. The team analysed more than 500 cancer tissue samples and compared them with non-cancer tissue to search for patterns of a

chemical group that is added to part of the DNA molecule, altering gene expression.

Professor Norman Maitland, from the University of York's Department of Biology, said: "Unnecessary prostate treatment has both physical consequences for patients and their families, but is also a substantial financial burden on the NHS, where each operation will cost around £10,000.

"Cancers that are contained in the prostate, however, have the potential to be 'actively monitored' which is not only cheaper, but has far fewer negative side-effects in patients with non-life threatening cancer."

"The challenge in prostate cancer is how to look at all of the patterns within a cell, but home in on the gene activity that suggests cancer, and not only this, what type of cancer -- dangerous or manageable? To put it another way: how to do we distinguish the tiger cancer cells from the pussycat cancer cells, when there are millions of patterns of chemical alterations going on, many of which will be perfectly healthy?"

The team identified 17 possible genetic markers for prostate cancer. Dr Davide Pellacani, who began these studies in York, before moving to the University of British Columbia, said: "Using computer analysis, not only could we see which tissue samples had cancer and which didn't, but also which cancers were dangerous and which ones less so. "Out of almost a million markers studied, we were able to use our new tools to single out differences in cancer potency." To take this method out of the laboratory, the team are now investigating a further trial with new cancer samples, and hope to involve a commercial partner to allow this to be used for patients being treated in the NHS.

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2019 Meetings: 10:00am -12:30pm

Tues 19 Feb Guest Speaker Cathie Pigott
 Tues 19 Mar
 Tues 16 Apr
 Tues 21 May
 Tues 18 Jun
 Tues 16 Jul
 Tues 20 Aug
 Tues 17 Sep
 Tues 15 Oct
 Tues 19 Nov
 Tues 17 Dec including Xmas lunch

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 Janis Kinne, Membership
 Spiros Haldas, Library
 David Bellair, Web site
 Paul Yates, Newsletter
 Michael Meszaros

Internet Resources

Use the internet to find questions to ask your specialist. It should not be trusted to find answers for your personal case. The web is general. Your specialist specifically knows you.

Our members have found the following **websites** to be useful.

Prostate Cancer Foundation of Australia

www.PCFA.org.au

For guides and help.

Australian Cancer Trials

www.australiancancertrials.gov.au/

Information on the latest clinical trials in cancer care, including trials that are currently recruiting new participants.

USA Prostate Cancer Foundation (Guide)

www.PCF.org/guide/

PDF guide for men newly diagnosed with prostate cancer

Us TOO International PCa Education (USA)

www.UsToo.org

USA Prostate Cancer support groups information and newsletter.

Cancer Council Victoria

www.CancerVic.org.au

For general help and to understand services supporting men with cancer.

Ex MED Cancer program

<http://www.EXMedCancer.org.au/>

A Melbourne-based best-practice exercise medicine program for people with cancer.

ProstMate (PCFA)

www.ProstMate.org.au

The companion for those impacted by prostate cancer, particularly to record all your results.

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Beyond Blue

www.BeyondBlue.org.au

HELPLINE – 1300 22 4636; *for help with depression or anxiety.*

Continence Foundation of Australia

www.Continence.org.au/

HELPLINE – 1800 33 0066. *For assistance with incontinence and for aids (such as pads).*

Australian Advanced Prostate Cancer Support Group

www.JimJimJimJim.com

For men diagnosed with advanced metastatic prostate cancer.

PCRI Prostate Digest (USA)

<https://pcri.org/insights/>

Prostate Cancer Research Institute supports research and disseminates information that educates and empowers patients, families, and the medical community

PAACT Newsletter (USA)

<http://paact.help/newsletter/>

Patient Advocates for advanced Cancer Treatments.

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