

# THE DIGITAL EXAMINER



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More information at [www.pccncalgary.org](http://www.pccncalgary.org)

Dear Friends

It's good to be back working directly with and for you, the members PCCN Calgary.

I am fortunate to work with a board of directors made up of dedicated and caring individuals who strive to make this the BEST prostate cancer support group in Canada. We are already the second largest group in Canada and with your suggestions for areas of improvement we will achieve that "BEST" distinction.

We need to hear from you about what you want from the meetings and from the organization in general. For example, more medical speakers, more time for informal conversations with others, What do you want to read about in the Digital Examiner? I want to hear from you! Call or email with your ideas. I'm looking forward to seeing you at our regular meeting June 12 and at our special meeting (details below) on June 25th.

Bob Shiell, Executive Director

PCCN Calgary

## Dr. Mark Moyad returns to Calgary

June is an exciting month for PCCNetwork Calgary., not only do we have an interesting speaker for our regular meeting June 12 but on Monday June 25 PCCN Calgary is very proud to host Dr. Mark Moyad. This will be the second time that Mark has spo-

ken to our group and I know that you will want to be in the audience to hear him, either again, or for the first time. His topic, "Supplements and Diet from A to Z What works and What is Worthless" is both highly entertaining and very educational. Because we expect a large turnout for this free lecture we are changing locations and moving back, for June 25th only, to the auditorium at Foothills Hospital. This 300 seat venue has the latest video and audio resources and will ensure that all in attendance will be able to see and hear the presentation. Mark is coming to us after being a feature speaker at the Canadian Urological Association conference being held the previous weekend in Banff. Mark is Director of Preventive and Alternative Medicine at the University of Michigan Medical Centre. He has maintained a consulting practice on complementary medicine for the past 10 years. He is the author of over 100 articles and 5 books and arguably, no doctor has educated more physicians and other health-care professionals



Dr. Mark Moyad

around the world on the subject of diet and dietary supplements. **Don't miss this special meeting. 7:30 PM Monday June 25th, Foothills Hospital Auditorium. This is a free special event hosted by PCCN Calgary.**

**PCCN Calgary  
Has TWO meetings  
this Month!**

**Regular Meeting  
7:30 PM on  
Tuesday  
June 12 2012  
At Venu1008  
1008 -14th St. SE  
In Inglewood  
Good Company  
Good Information  
Good Snacks  
Good Free Parking  
Speaker:  
Jennifer Herzog –  
"An introduction to  
access through  
movement"**

**Special Meeting  
Monday June 25th  
7:30 PM at  
Foothills Hospital  
with  
Dr. Mark Moyad**

**Printing and  
distribution of  
The Digital  
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*Thanks for your  
support!*

## More PSA Controversy

Routinely screening men for prostate cancer with PSA tests can result in far more harm than good, says a U.S. expert panel in a recommendation against the practice that is sure to fuel continued debate over the issue.

In May, the U.S. Preventive Services Task Force released its final recommendation, advising against routine PSA blood tests to detect possible prostate cancer, the third most common cause of cancer death in North American males after lung and colorectal cancer.

Having an elevated level of PSA, or prostate-specific antigen, can flag the presence of cancer. But it can also be a sign of a benign enlarged prostate or infection, and most men who have a biopsy in response to an abnormal PSA test don't end up having cancer.

Often when prostate cancer is found through screening, the tumour is small and too slow-growing to be harmful, and many men end up dying of another cause. Yet there's no way of knowing which tumours are potentially deadly — requiring aggressive treatment — and which are not.

Almost all men with PSA-detected prostate cancer opt to receive treatment. Besides complications from the biopsy, there can also be serious adverse effects from treatment.

"It's important for doctors and patients to understand that our current approach to screening for prostate cancer does not serve men well," said task force chair Dr. Virginia Moyer.

Basically out of 1,000 men who are screened, one man will not die of prostate cancer who otherwise would have died of prostate cancer," said Moyer, a professor of pediatrics at the Baylor College of Medicine.

"The recommendation is that men not be routinely screened for prostate cancer using PSA," she said from Houston. "We came to that conclusion because the science now is that there is at most a very small benefit — and that is actually not a certain benefit."

The advice applies to men of all ages, but not to those

who have been diagnosed with or are being treated for prostate cancer.

As part of its research review, the panel considered two large trials of PSA screening in men without any symptoms to assess the test's life-saving benefits. The first trial, conducted in the U.S., found no drop in prostate cancer deaths. The second, conducted in seven European countries, found about one death in 1,000 was prevented in men aged 55 to 69 years, mostly in two countries.

But research also shows screening can lead to significant harms. Almost 90 per cent of men with PSA-detected prostate cancer undergo early treatment with surgery, radiation or hormone-deprivation therapy.

Up to five of every 1,000 men treated will die within a month of the surgery and from 10 to 70 men in 1,000 will suffer such life-long effects as urinary incontinence, sexual impotency and bowel dysfunction.

"It's not just that your personal risk is higher," Moyer of individual men. "It really means that across a population, you're asking for a pretty significant sacrifice."

But Dr. William Catalona, medical director of the U.S. Urological Research Foundation, believes the task force has underestimated the benefits and overestimated the harms of PSA screening.

In an accompanying editorial, Catalona and his co-authors argue that the panel — which he said does not include urologists or cancer specialists — based its recommendation on flawed studies with inadequate follow-up time.

Catalona suggested that if PSA testing is done "in an intelligent way," prostate cancer deaths could be cut in half. This year, 28,000 American and 4,000 Canadian men are expected to die of the disease.

**Prostate Cancer Canada also supports widespread PSA testing.**

**"We know that if prostate cancer is detected early, the number of guys that can be cured of prostate cancer is in the 90 per cent range," said Stuart Edmonds, senior vice-president of research for the advocacy organization. "We encourage men over**

## Our meeting place is Venu1008, 1008 14th St. SE in Inglewood—free parking

**the age of 40 to initiate a conversation with their family physician at their annual checkup to provide PSA testing and a digital rectal examination.”**

Dr. Marcello Tonelli, chair of the Canadian Task Force on Preventive Health Care, agreed that men concerned about their risk of developing prostate cancer should discuss the potential benefits and harms of PSA testing with their physicians.

Tonelli said the Canadian task force last issued guidelines on PSA screening in 1994, but they “are quite consistent with these new recommendations from the United States.”

### What to expect from PCa

**Personal Care:** A major concern for men who are treated for prostate cancer is how the disease and treatment will affect their day to day life. It's important to know what to expect during and after treatment so you are prepared to make a decision on how you want to deal with the issue. New and better treatments are saving more lives every day. However, treatments can have side effects and you need to know the facts. It's important to keep in mind that different treatments can present different side effects, so it is important to talk to your doctor about this.

•**Fatigue** A daily lack of energy associated with excessive whole-body tiredness and not relieved by sleep.

•**Pain** Not usually a major effect of treating local prostate cancer. However, advanced prostate cancer can cause pain, particularly when metastasized to the bone. Chemotherapy can also cause pain, anemia and nausea.

•**Breakthrough Pain** Pain is one of the most common and feared symptoms associated with cancer. While it may not be a major effect of treating local prostate cancer, between 70 and 85 percent of all men with advanced prostate cancer experience pain related to cancer.

Some of these individuals may work with their oncologist to manage any persistent background pain, but many still struggle with a poorly understood and frequently misdiagnosed condition: breakthrough pain in cancer

•**Bone Pain or Weakness** Weakness and increased porousness in bone, can be caused by hormone therapy. Cancer that has metastasized to the bone can also cause pain.

•**Depression** Occasional feelings of sadness, anger and anxiety are normal for people going through a major challenge like cancer, but sometimes, these feelings just won't go away. Feelings that persist may be a sign of a serious condition, and should be discussed with your doctor.

### Spam Warning!

**15 years ago when email was a new exciting way to communicate**, spam was a cheap way for people to advertise without delivering a flyer to your home's mailbox. Countless millions of dollars have been invested in Anti-spam technology with a lot of success however Anti-spam technology walks a tight-rope between filtering too much or too little. Having to hit delete on an occasional spam email is much less bothersome than having to call for IT support to rid your computer of something nasty.

The majority of spam messages today are not the 1990's variety. Today's spam is carefully constructed to slip through email server defenses with a common purpose: Not to sell, but to steal. Messages from FedEx, UPS, Hotmail, an unexpected PDF or attachment from the office scanner, from PayPal, from Facebook, from your bank or your mom's bank, a free iTunes card, delivery notification from Canada Post, and even emails that look like they're coming from friends or relatives with suspicious URLs. Delete them All. Don't even read them.

*So Why Do I Get These? – Please Make Them Stop!*  
Unfortunately, there are thousands of smart software engineers around the world who for different reasons have found themselves in the employment of organized crime, hacktivist organizations, and rogue nation states. Their common goals: deceive and steal.

Next time you receive a text message on your phone with a URL, don't click on it. Google results with suspicious URLs, don't click blindly. It's all the same. Be suspicious and a little paranoid and you will save yourself, your computer, and your wallet from some big headaches.



PCCN Calgary's 4th Annual Show and Shine is on July 1st at Grey Eagles Casino. Registration is from 9am to noon and the show runs from noon to 4PM. There will be prizes and trophies in judged vehicle classes. Fun for the whole family.

We are looking for volunteers to help make this event a success. If you can spare some time on July 1st and want to have fun while looking at some great vehicles give Ron Gorham a call at 403 730 6534. Va-room, Va-room!



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**Our website:**

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**GETCHECKED.CA**

The Man Van™ is a valuable resource offered by the Prostate Cancer Centre to provide on-site free baseline PSA blood tests for men over 40. The Man Van™ makes appearances at select events, but can also be found around the community each month. For the current schedule please visit [GETCHECKED.CA](http://GETCHECKED.CA)



**Many thanks to our many friends and supporters!**

PCCN Calgary has many generous individuals and companies who support our community work. On behalf of our 1000+ members, thank you for your generosity. With your support we will continue our good work in 2012 and onward!

**Newsletter \* General Meetings \* Hospital Visits \* One-On-One visits \* Speakers \* Website**

**Charitable Number: 86926 1602 RR 0001**

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**NOTE: It is NOT necessary to include this form, a receipt will be issued from the information on your cheque.**

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**Box 72126**

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**Canada Revenue Agency: <http://www.cra-arc.gc.ca/>  
or donate online through [www.canadahelps.org](http://www.canadahelps.org)**

**Tax Receipts can only be issued to those named on the cheque.**