

# THE DIGITAL EXAMINER

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## IT'S OUR TIME.

Local information and personal support for those diagnosed with prostate cancer.

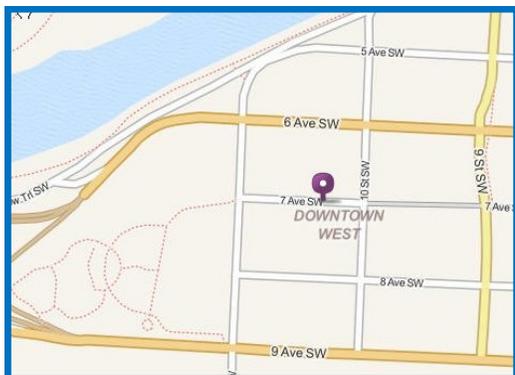
Contact  
[pccncalgary.org](http://pccncalgary.org)



### Welcome to Kerby

Starting **November 13, 2012** all future PCCN Calgary meetings will be held at **KERBY CENTRE, 1133—7th Ave. SW.**

There is free parking at Kerby, in lots on both sides of 7th Ave. Be aware that because of construction of the West leg of the LRT access is slightly more complicated than usual. When the West leg opens you will be able to take the LRT right to the door!



### Genetic Signatures

LONDON -- Scientists have found two distinct genetic "signatures" for prostate cancer that may help doctors predict which patients have aggressive tumours, and designed experimental blood tests to read those genetic signs like barcodes.

The teams, whose work was published on Tuesday in the Lancet Oncology journal, believe tests developed from the signatures could eventually be used to tell which patients need immediate treatment.

"Prostate cancer is a very diverse disease - some people live with it for years without symptoms but for others it can be aggressive and life-threatening," said Johann de Bono, who led a study at Britain's Institute of Cancer Research. "So it's vital we develop reliable tests to tell the different types apart."

Researchers in Britain and the United States found that by reading the patterns of genes switched on and off in blood cells, they could accurately detect which advanced prostate cancer patients had the worst survival rates.

While many cases can progress quickly, spreading to other organs and becoming deadly, experts say as many as half of prostate cancers are likely to remain confined to the prostate and are unlikely to become life-threatening.

The problem has always been knowing accurately, and at an early stage, which tumours are most likely to kill.

Although tests for aggressive forms of prostate cancer already exist, experts say they are only moderately accurate.

Our next meeting is at 7:30 PM  
Tuesday  
November 13th  
at Kerby Centre

We welcome  
Dr. Dean Reuther

Warriors and Active Surveillance groups meet at 6:30 PM

*"Information you can use, free parking, refreshments, peer-to-peer support and fellowship."*

Thanks West Canadian and Janssen for your support in printing and distributing the Digital Examiner.



## PCCNC meets at Kerby Centre on the second Tuesday of the month.

De Bono said scientists can learn more about prostate cancers by the signs they leave in blood. This allowed his team to develop a test potentially more accurate than those available now and easier for patients than taking a biopsy, he said.

"Our test reads the pattern of genetic activity like a barcode, picking up signs that a patient is likely to have a more aggressive cancer. Doctors should then be able to adjust the treatment they give accordingly," he said in a statement.

\$25,000 for 25



Thanks to efforts of Calgary Real Estate Board members who voted for your support group, PCCN Calgary was one of the winners in the recent CREB 25 for 25 charitable event. As one of the top 5 winners in our category of Community Enhancement, PCCN Calgary will be receiving a grant of \$25,000 to be used to allow us to continue our good work. The official presentation will take place at the CREB Christmas luncheon December 13th. We sincerely thank everyone who voted for us and of course to CREB for their wonderful community spirit in providing these grants.



### Why men feel less manly after PC

Men with prostate cancer often experience erectile dysfunction as a side effect of their treatment, and many find this to be upsetting to the point where it undermines their wellbeing. Moreover, men's distress about ED often does not improve over time — in some men, it worsens.

A new study sheds light on the causes of this prolonged distress. While some researchers have thought that the severity of a man's ED is linked with how distressed he feels, the new findings show that regardless of men's ED severity, they are much more likely to be distressed when they feel they've lost their masculinity as a result of treatment.

Not all men experience this feeling of lost masculinity, said study researcher Talia Zaider, a clinical psychologist at Memorial Sloan-Kettering Cancer Center in New

York City. But those who do are most at risk of feeling deeply troubled, embarrassed or ashamed about their ED.

A feeling of lost masculinity is an aspect of prostate cancer treatment that's not often talked about, Zaider said. "Gender norms work against men," and can keep them from discussing it, she said.

In the study, about one-third of men who had been treated for prostate cancer in the last year reported feeling their masculinity was diminished, and that they had lost a vital part of their identity, Zaider said.

A better understanding of how men respond to their sense of a change in their identity could help researchers find better ways to help men recover, the researchers wrote in their study, published online Sept. 18 in the *Journal of Sexual Medicine*.

About 242,000 men in the U.S. will be diagnosed with prostate cancer in 2012, and 28,000 will die of the disease this year, according to estimates from the National Cancer Institute. More than 9 in 10 prostate cancers are diagnosed in early stages, and these men are likely to live for a long time after treatment.

This optimistic outlook on survival means that researchers are looking closely at factors affecting men's quality of life after the treatment, Zaider said.

Treatments can affect men's sexual, urinary and bowel functioning, but impaired sexual functioning is the most common long-term complaint of men after treatment, according to the study.

Zaider and colleagues interviewed 75 men, whose average age was 60, who had received prostate cancer treatment in the previous year.

The men answered questions about their level of erectile function, how happy they were with their sex lives, the degree to which they felt a loss of masculinity, and the amount of "marital affection" they felt in their relationship (all men in the study were living with a spouse or partner). The men's spouses were also interviewed.

"Men who felt they'd lost their masculine identity were very likely to be stressed by their ED. The two seemed to go closely together," Zaider said. "That link was there whether they had severe or mild ED."

## Our meetings feature medical speakers and peer to peer interaction. Join us!

The researchers also found that among men who felt a loss of their masculinity, those in relationships with a high degree of affection were less likely to feel distress over their ED.

But women don't always understand their husbands' feelings. "I've worked with couples, and when the man talks about how upset he is about his loss of erectile function, the wife says, 'but you're alive, and we're OK,'" Zaider said. "For men, it's not just about their function — it signifies a loss of who they are. There are feelings of incompleteness."

The findings make a case for involving men's partners in interventions aimed at helping men cope with their distress, she said. The researchers have begun a trial to test the effectiveness of such an intervention.

"Perhaps in the context of a strong, affectionate and communicative relationship, men can revise their ideas about what makes them a man and, in turn, adjust better to ED," Zaider said.

Health Canada has posted a notice in conjunction with a recent announcement by the health minister on the plan to publish an administrative list of clinical trials authorized by Health Canada. The list aims to include administrative information about each trial for which a No Objection Letter (NOL) is issued pursuant to a Clinical Trial Application (CTA) for the study of a drug in patients, and will provide information to patients, healthcare providers, and the public about clinical trials that have been authorized by Health Canada.

Its noted that further details will be forthcoming, including an opportunity for stakeholder consultations and updates will be communicated to stakeholders as progress is made.

### Green Tea and Cancer

Men with prostate cancer who drank green tea had less prostate tissue inflammation, linked to cancer growth, and other changes than those who didn't drink it, says Susanne M. Henning, PhD, RD, "We were able to show the green tea polyphenols (antioxidants) reached the prostate tissue and they did modify inflammation of the prostate," she says. Polyphenols are antioxidants that protect against cell damage.

Henning's team assigned 79 men with prostate cancer scheduled to undergo surgery to drink either six cups of brewed green tea or water daily. They did so for three to eight weeks, depending on when their surgery was scheduled. Before and after the study, Henning obtained urine and blood samples. She collected samples of prostate tissue after the surgery. She reported on the 67 men who finished the study. Levels of prostate-specific antigen, or PSA, were lower after the study in those who drank green teas. An indicator of inflammation, called nuclear factor-kappaB, was also reduced in those who drank green tea compared to those who didn't, Henning found. Inflammation is linked to cancer growth.

"We were not able to inhibit tumor growth," she says. But the study length may not have been long enough to show that; a longer-term study is needed, she says.

Other research has found that green tea may slow prostate cancer. An Italian study found that men who had a precursor to prostate cancer and drank green tea were less likely to get prostate cancer, Henning says. More study is needed, however, before making any diet recommendations

### Founder's Award



Helene Vassos, COO, PCC; Bob Shiell PCCN Calgary; Steve Jones CEO, PCC.

At the recent PCCN National Leaders Conference held in Regina October 3 to 6, PCCN Calgary's Executive Director, Bob Shiell was awarded the Founder's Award in recognition of his 15 years service to both local and national prostate cancer organizations.



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Our **November 13** meeting at 7:30 PM welcomes Dr. Dean Reuther who will update us on Calgary prostate cancer programs and upcoming treatments for advanced disease.

The PCCN Calgary Warriors meet at 6:30 PM as do those interested in Active Surveillance. All meetings are at Kerby Centre. Signage will direct you.

**If you have had salvage radiation after surgery you are urged to attend the Warriors meeting at 6:30PM. A new Warrior will benefit from your knowledge.**

**A pre-meeting (no-host) dinner and social hour will be held at 5:00 PM at Lord Nelson Restaurant, 1020 8th Ave S.W. You're invited to come and mingle over food and drink with fellow members in a relaxed atmosphere. No reservation is required, just come.**



The ManVan is a valuable resource offered by the Prostate Cancer Centre to provide on-site baseline PSA blood tests for men over 40. The ManVan 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)

**Meet Steve Belway, a director of PCCN Calgary**



Hi, my name is Steve Belway and I have been a director with PCCN Calgary for close to a year now.

However, I have also had a strong relationship with the group that dates back to the late '90's. I have recently worked in the pharmaceutical industry for over 20 years, where I have a great deal of experience in the oncology arena, particularly prostate cancer. My work experience has encompassed medical research, professional development, sales, marketing and healthcare education.

More recently, I have completed a certificate program in Nonprofit Management at Mount Royal University and am looking forward to a career change in directing a health related, nonprofit organization. In September of this year I was selected to be a member of the national advisory committee of the Prostate Cancer Canada Network. I feel privileged and honoured to be able to serve two very strong and reputable organizations.

While I am not personally a prostate cancer survivor, I have been touched through many close friends, relatives and relationships who have had the disease. I am also the spouse, son and son-in-law of three very special women in my life who are survivors of breast cancer. Serving on this board allows me the opportunity to give something back. I have also had the opportunity to serve on boards with the Calgary Booster Club and Toastmasters International, and been a volunteer with numerous more organizations.

On a more personal note, I have been married to my wife, Tamara, for over 12 years. We have two young children, Aidan and Danielle who keep us busy with Boy Scouts, soccer, volleyball, dance and basketball. I have spent most of my life living and going to school in Calgary and pleased to be involved with a group that is such a strong part of this city's community.