



# 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)



Our next general meeting is at 7:30 PM Tuesday

July 9th 2013 at Kerby Centre

Come hear Dr. Neil Fleshner (video presentation)

**Flood Update!**  
Kerby Centre was not affected by the recent flood and should be functioning normally. It is always wise to check our website for the latest information. [www.pccncalgary.org](http://www.pccncalgary.org).

Support for all our work is made possible by contributions from the following companies

and individual members like you.



Thank you all, we can't do it without you.

Our July 9th guest speaker: Dr. Neil Fleshner



epidemiology. He earned his MPH degree from the School of Public Health at Columbia University and completed his oncology training at Memorial Sloan Kettering Cancer Center. His current projects include 2 randomized trials of nutritional intervention in prostate cancer as well as laboratory work assessing oxidative biomarkers and cell cycle regulation in prostate cancer cells exposed to micronutrients. Dr. Fleshner is an avid music lover and father of three. He has authored of over 100 scientific papers.

His topic, Treatment for Advanced Prostate Cancer will be of interest to Warriors and all members.

### Prostate Cancer Patients May Prolong Lives with Healthy Fats

Men with early stage prostate cancer may live longer if they eat a diet rich in heart-healthy nuts, vegetable oils, seeds and avocados, researchers said.

Their analysis of 4,577 men found those who reported eating vegetable fats were less likely to develop fatal tumors or die from other causes than those with diets high in animal fats and carbohydrates. The study, published in JAMA Internal Medicine, is the first to analyze fat consumption after diagnosis and the risk of death.

There are several possible explanations for why healthy fats may slow the progression of prostate cancer and boost survival, said lead researcher Erin Richman, a post-doctoral scholar at the University of California, San Francisco. Nuts and vegetable oils increase levels of antioxidants, which protect against cell damage, and reduce inflammation and oxidative stress that's related to aging, she said.

"Based on this study, combined with extensive literature on cardiovascular disease, it's appropriate to recommend that men with prostate cancer consume a heart healthy diet

PCCN Calgary enjoys many advantages being associated with Prostate Cancer Canada. One major benefit is the opportunity to share video presentations with groups across Canada.

As you know we have been posting our videos on line for many years and they are well used by individuals and groups.

In July our meeting will feature a video presentation by Dr. Neil Fleshner as originally presented last month to PCCN Brampton.

Neil Fleshner is Head of the Division of Urology at the University Health Network (incorporating Princess Margaret Hospital) and Professor at the University of Toronto. Aside from surgical practice, Dr. Fleshner conducts research on urologic cancer prevention with an emphasis on prostate cancer. Dr. Fleshner is certified in both urology and

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

with unsaturated fats that comes from nuts, healthy oils like olive and canola, seeds and avocados," she said. "I don't think we need more research to make the recommendation, though we do need it to better understand the biology of prostate cancer."

Unsaturated fats are heart healthy, and previous research shows they also help patients with advanced prostate cancer.

While one in six men will be diagnosed with prostate cancer, making it the most common type of tumor, most don't die from it. There are currently 2.5 million men living in the U.S. with the cancer today, according to the American Cancer Society.

The researchers examined men participating in the Health Professionals Follow-up Study who were diagnosed with prostate tumors between 1986 and 2010. During the quarter-century of research, 1,064 men died, mainly from heart disease.

Those who reported eating an additional serving of oil-based dressing each day were 29 percent less likely to die from prostate cancer, with a 13 percent lower risk of dying from any causes. A daily serving of nuts cut prostate cancer death by 18 percent and death from any cause by 11 percent.

The research isn't a randomized trial and doesn't conclusively prove that men with early stage prostate cancer can reduce their risk of dying by changing their diet, wrote Stephen Freedland, from Duke University Medical Center in Durham, in an editorial. The only proven link to death from prostate cancer is obesity, he said.

"Avoiding obesity is essential," he wrote. "Exactly how this should be done remains unclear."

The data suggest that substituting healthy foods such as vegetable fats for unhealthy foods, such as carbohydrates may have a benefit.

### Sleep Problems May Double Risk for Prostate Cancer

Washington: Men who have sleep problems, including difficulty falling asleep and staying asleep, may be at twice the risk for prostate cancer, a new study has warned.

"Sleep problems are very common in modern society and can have adverse health consequences," said Lara G Sigurdardottir, at the University of Iceland in Reykjavik.

"Women with sleep disruption have consistently been reported to be at an increased risk for breast cancer, but less is known about the potential role of sleep problems in prostate cancer," she said.

The team investigated the role of sleep in influencing prostate cancer risk. The researchers followed 2,102 men from the prospective Age, Gene/Environment Susceptibility-Reykjavik study, which involved an established, population-based cohort of 2,425 men aged 67 to 96.

Upon enrolment into the study, the participants answered four questions about sleep disruption: Whether they took medications to sleep, had trouble falling asleep, woke up during nights with difficulty going back to sleep or woke up early in the morning with difficulty going back to sleep.

Among the participants, 8.7 percent and 5.7 percent reported severe and very severe sleep problems, respectively. None of the participants had prostate cancer at study entry.

The researchers followed the participants for five years, and during this period, 6.4 per cent were diagnosed with prostate cancer. After the researchers adjusted for age, they found that compared with men who reported no problems with sleeping, the risk for prostate cancer increased proportionately with reported severity of problems falling and staying asleep, from 1.6-fold to 2.1-fold.

Further, the association was stronger for advanced prostate cancer than for overall prostate cancer, with more than a three-fold increase in risk for advanced prostate cancer associated with "very severe" sleep problems.

To rule out the possibility that the problems with sleeping were because of undiagnosed prostate cancer or an enlarged prostate, the researchers reanalyzed the data after excluding men with symptoms of sleep disturbance that might be indicative of nocturia (waking up during the night to urinate). The results remained unchanged.

According to Sigurdardottir, these data should be confirmed with a larger cohort with longer observation times. "Prostate cancer is one of the leading public health concerns for men and sleep problems are quite common," she said. "If our results are confirmed with further studies, sleep may become a potential target for intervention to reduce the risk for prostate cancer," she added. The study was published in *Cancer Epidemiology, Biomarkers & Prevention*, a journal of the American Association for Cancer Research.

### Should Older Men Pass on Getting Prostate Cancer treatment?

The advice to detect and treat cancers at the first opportunity may not apply to older men with prostate tumors, according to the latest study.

With a government-backed group advising that most men no longer need regular screening for prostate cancer with the prostate-specific antigen (PSA) blood test, researchers now say that older men who are diagnosed with the disease should not always get surgery or radiation treatment.

That's because for most men, having a low to moderate risk of prostate cancer is not a major red flag for early death. The cancer is typically so slow-growing, that many of these men will die from other causes, which means the

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

benefits of treatment do not always outweigh the risks. Surgery, radiation and radioactive seed implants can cause disorders such as erectile dysfunction and urinary incontinence. And since it can take many years for the effects of the treatments to emerge, the survival advantage is low in most cases in which the tumors aren't aggressive.

In the new study, published in the journal *Annals of Internal Medicine*, led by researchers at the University of California Los Angeles (UCLA) Department of Urology looked at the 14-year survival of 3,000 men diagnosed with prostate cancer between the years 1994 and 1995. Older men with low to intermediate cases of prostate cancer, who also had at least three other health problems like diabetes, hypertension, congestive heart failure and arthritis, were significantly more likely to die from a cause unrelated to their cancer.

The 10-year risk of dying from these other causes among men aged 61 to 74 was 40%, and for men over 75, it climbed to 71%. The 14-year risk of dying from low or intermediate risk prostate cancer was 3% for men between 61 and 74, and 7% among men over 75. For men with high-risk prostate cancer, the risk of death from the cancer was 18% at the 14-year mark.

"The take home point from this study is that older men with multiple underlying health problems should carefully consider whether they should treat these tumors aggressively, because that treatment comes with a price," said lead study author Dr. Timothy Daskivich, a UCLA Robert Wood Johnson fellow in a statement.

(Determining which types of prostate cancer are aggressive and which are of lower risk is also becoming easier. Earlier this month, *TIME*'s Alice Park covered a new genetic test for identifying the most aggressive forms of prostate cancer. She explains:

Watchful waiting is a common strategy for treating prostate cancer, since in about 40% of cases the tumors are so slow-growing that they don't require additional, invasive biopsies or treatment and men with the cancer are more likely to die of other causes.

But based on analyses of tissue from men whose prostates were surgically removed as a precaution even if they were deemed to be low-risk, anywhere from 15% to 20% of these low-risk cases actually turn out to involve tumors that were more aggressive. As a result, the tumors were mischaracterized by available predictive methods such as the blood-based prostate specific antigen (PSA) test and imaging to search for hidden growths.

As these types of tests become more available, it may be possible to help more men avoid unnecessary surgery, and the complications that could come along with those procedures, say the study authors. The added information should also help patients with peace of mind in knowing that their "watching waiting" strategy is the right one, as contrary as it may seem when it comes to cancer.

## Movember gives \$5 Million to Vancouver Prostate Cancer Research Team



Rocco Rossi (left) president and CEO of Prostate Cancer Canada, speaks with Dr. Ralph Buttyan of the Vancouver Prostate Centre after presenting Buttyan's research team with \$5 million raised through the Movember Foundation.

Buttyan's team of 22 co-researchers will focus on a particularly lethal strain of prostate cancer that is resistant to treatment. The Vancouver Prostate Centre is part of Vancouver Coastal Health and the University of British Columbia.

The Movember Foundation has raised awareness—and more that \$439 million—during the month of November since 2003 with its moustache growing contests and other events, currently in 21 countries.

[GETCHECKED.CA](http://GETCHECKED.CA)

The ManVan™ 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)





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**Vintage Cruisers Calgary!**

If you are looking for an excuse to have a nice lunch out on Wednesdays, meet some interesting guys and gals and look at some great vintage cars than Vintage Cruisers Calgary is the club for you! No fees, no executive, just fun!

VCC meet at Grey Eagles Casino every Wednesday from June to September at 1 PM for a discounted buffet lunch, then a short tour to an automotive related destination. More details on our website at [www.pccncalgary.org](http://www.pccncalgary.org) or contact

Ron Gorham at **403 730 6534** or

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The PCCN Calgary team raised over \$5000 during the Safeway Father's Day Walk Run.. Shown here, Dan Kimber, Rob Pentney, Willem Smink and team captain Steve Belway.

**Meet Rod Tondevold, our newest director**



My wife Verda and I moved to High River, Alberta from Surrey, BC in February 2013. Verda and I were born and raised in Saskatchewan and have lived in the Northwest Territories, many communities in Saskatchewan and Ottawa. Along with the experience of living in a variety of communities I have a varied and extensive background that will be an asset to me as a member of the PCCA Board. My formal education is in Agriculture, Biological Sciences and Adult Education.

I worked for the Federal Department of Fisheries as a Fisheries Officer (enforcement) in the NWT in the early 1970's. I was with a large agricultural cooperative for over 18 years, managing electoral districts, which included recruiting and training of elected officials; planning and facilitating events and resourcing meetings ensuring proper processes and rules of order were practiced. A large part of this was managing the decision making processes, implementing board/management roles and responsibilities and relationship building.

In 1993 I was selected to participate in an Executive Interchange program between Saskatchewan Wheat Pool and the Federal Department of Agriculture in Ottawa. In British Columbia, I managed a fund raising program for a major charity, managed grants for a Community Foundation and a variety of other interesting and challenging jobs.

As a volunteer I have had involvement with Scouts, Church, Kiwanis, Credit Union Board, sports groups and many other activities and organizations.

I was diagnosed with Prostate Cancer in January, 2013. So I am new at this experience. During my first visit with a Urologist in Calgary I found information on PCCNC. The information I was able to find as a result was valuable to me and my wife as we met with Doctors to seek the best solution to this situation. I felt that I should contribute in any way that I can to support PCCNC. Being a Board member is the way that I think I can best contribute to the organization.