# The Digital Examiner



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PROSTAID Calgary is self-funded. Help us continue our good work by donating on-line to PROSTAID Calgary www.pccncalgary.org



February is the month of love and it also marks the official kick off of the 2016 racing season. **PROSTAID Calgary** and our prostate cancer awareness message will once again be shared with racing fans and motorsports enthusiasts across Alberta via the Dark Side Racing Top Fuel Dragster. Our first event of the season is the 50<sup>th</sup> Annual World of Wheels being hosted February 19 – 21 at the BMO Centre. PROSTAID Calgary is looking for volunteers to help out at our booth. More information can be found on page 3. Thank you for your support! Visit the **PROSTAID Calgary** website to see our full schedule of awareness events: http://prostaidcalgary.org/n darkside.php



PROSTAID Calgary would like to share a new initiative with our members: Prostate Cancer Canada has partnered with the Canadian Breast Cancer Foundation and launched their Kiss2Cure fundraiser. Visit http://kiss2cure.ca for more information. \*Send Kelly a photo of you and a loved one kissing and we'll share the pictures on our PROSTAID Calgary website and on our Facebook page.

(executive.director@pccncalgary.org)

PROSTAID Calgary relies on the generosity of the community to keep our programs running. Donating is easy...Just give Kelly a call 403-455-1916 or email executive.director@pccncalgary.org or visit

http://prostaidcalgary.org/c\_donate.php

Kelly Fedorowich

**Executive Director** 

February	v 2016

Number 197

Tuesd	ay,	Feb	oruar	'y 9	, 20	16
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- 5:00 PM Moxie's Grill & Bar 888 7th Ave SW, Calgary AB
- 6:30 PM Newly Diagnosed & Active Surveillance Group Room 311 at Kerby Centre
- 6:30 PM Warriors (Advanced Disease) Room 318 (Board Room) at Kerby Centre
- 6:30 PM Wives, Partners & Caregivers Room 313 at Kerby Centre Diane Smith will be joining us for a Qigong demonstration.
- 7:30 PM General Meeting Room 205 (Lecture Room) at Kerby Centre

#### GM Topic: 2015 PCRI Conference Attendees' Reports

Every September (prostate cancer awareness month), the PCRI (Prostate Cancer Research Institute) Conference brings hundreds of patients, caregivers and physicians together for a weekend of interactive sessions and lectures from experts in the medical community. **PROSTAID Calgary** had 5 members attend the PCRI Conference in Sept 2015 and they will be joining us this month to share their experiences. Our GM's (General Meetings) are open to the public and free. Cookies, fruit and refreshments are served. Join us at the Kerby Centre at 1133 7th Avenue SW, Calgary AB T2P 1B2. Parking is FREE at the Kerby Centre in

Parking is FREE at the Kerby Centre in lots on both sides of 7th Ave. The WEST LRT stops at the Kerby Station, right at the front door of the Kerby Centre. Ladies, family members, and caregivers are always welcome!

## Prostate Cancer – Treat the Cancer not the Gland

Professor Mark Emberton is the Director of the Division of Surgery and Interventional Science at University College London, Honorary Clinical Director of the Clinical Effectiveness Unit at the Royal College of Surgeons of England, and Professor of Interventional Oncology. Dr. Emberton talks about the outcome of recent clinical studies concerning Magnetic Resonance Imaging (MRI) of prostate for the detection and biopsy of prostate cancer.

This is a summary of the highlights of Dr. Emberton presentation. You can view Dr. Emberton's 18-minute talk on YouTube at <u>https://www.youtube.com/watch?</u> <u>v=t6\_OH9VQWTg</u>

A study using randomized controlled trial shows that none (0%) of the 130 men who had a negative MRI for prostate cancer (PCa) had any Gleason pattern 4 identified on saturation biopsy in which 48 needles sampled the prostate. None these men had any clinically significant disease. In other words, a normal MRI of the prostate can show 100% of the time whether there is any clinically significant PCa. This has been shown to be the case in many separate studies. It is expected that further studies will show that a normal MRI will be able rule out PCa with close to 100% probability, therefore avoiding a biopsy of the prostate. If the MRI shows positive for PCa, there is a 9/10 chance that PCa is present as confirmed by biopsy. Using MRI-targeted biopsies versus non-MRI biopsies reduces the total cores required.

Characteristic	MRI- Targeted Biopsy	Template Prostate Biopsy*
Total number of cores	932	7184
No. of cores per pa- tient	4-6 (median 5)	22-53 (median 30)
No. of cores positive for cancer compared to total cores	356 (38.2%)	(13.5%)

\*Template prostate biopsy uses an ultrasound probe to locate the prostate.

From these and other studies he describes, Dr.

Emberton draws several conclusions:

There is very little benefit in subjecting a man with a normal, well-read MRI to a biopsy.

An MRI should be done before a biopsy in all men if you wish to achieve any or all of the following:

- Miss fewer significant cancers

- Diagnose fewer men with insignificant cancer The costs savings are very significant in reducing unnecessary biopsies. It is estimated that using MRI to identify PCa would reduce biopsies by 300 000 to 500 000 per year in Europe and likely more in the United States. *Source: Global Congress on Prostate Cancer in Rome, February 2015*.

## Dr. Shelley Spaner Responds to Dr. Emberton's Findings:

**PROSTAID Calgary** contacted Calgary radiologist, Dr. Shelley Spaner who has kindly responded to our inquiry about prostate MRIs. Dr. Spaner is Associate Clinical Professor at the University of Calgary and a radiologist with RCA Diagnostics. She spoke at our September 9, 2014 PROSTAID Calgary meeting which can be seen on our web site, video archive under the title *Imaging of Prostate Cancer*.

Here is her reply.

Thank you for asking me to respond to Dr. Emberton's presentation. There is so much work being done on prostate magnetic resonance imaging (MRI) currently. It is truly a hot topic in radiology, urology, and oncology. New peer reviewed studies on the benefits and limitations of MRI are popping up in the medical literature monthly. In December 2015 alone, a Pub Med search brings up 116 new articles!

On the imaging side much of the new found enthusiasm for Prostate MRI relates to the newest version of PIRADS (Prostate Imaging and Reporting Data System) which was released in January 2015.

#### www.acr.org/~/media/ACR/Documents/PDF/

QualitySafety/Resources/PIRADS/PIRADS%20V2.pdf

In Calgary we have incorporated the techniques and structured reporting outlined by this document over the last ten months or so.

The conclusions shared by Dr. Emberton are not widely held in our community at this time. They may come to be true in the years to come, but the consensus is not there yet. The work being done is promising - but not yet fully validated.

These two very recent articles - one in the radiology literature and one from the urology literature help to show a slightly tempered enthusiasm for the conclusions drawn by Dr. Emberton.

Detection of Prostate Cancer: Multiparametric MR Imaging Models Developed by Using Registered Correlative Histopathologic Results. Metzger GJ, et. al.

#### **Digital Examiner Page 3** Tuesday of every month.

Radiology. 2016 Jan 13:151089. [Epub ahead of print] PMID:26761720, and

Validating multiparametric MRI for diagnosis and monitoring of prostate cancer in patients for active

<u>surveillance.</u> Sahibzada I, Batura D, Hellawell G. Int Urol Nephrol. 2016 Jan 12. [Epub ahead of print] PMID:26759330.

Currently we do not have resources in Alberta to replace random core biopsy for appropriately screened men with MRI. We may some day. We are very selective in the patients we image with prostate MRI. These patients include: pre-operative prostatectomy patients, patients with rising PSA who have a negative biopsy (MRI can help to target the next biopsy), and patients for whom therapy has failed.

We are not currently using prostate MRI for active surveillance patients - but we may in the future. This is an area that we are targeting for research projects. Fusion biopsy equipment is not currently available in the region or privately. We have done about 15-20 MRI targeted biopsies in the last 7 months in conjunction with the urology service - the results are preliminary but positive. It is exciting to see the potential for MR Imaging in the diagnosis and management of prostate cancer. I definitely share Dr. Emberton's enthusiasm.

#### Chemical found in marine sponge shrank prostate tumors in mice

The first drug developed at the B.C. Cancer Agency to reach human clinical trials is derived from a Papua New Guinea marine sponge.

It's taken about 20 years of experimentation, but as of today (Dec 3, 2015), oncologists in cities around North America, including Vancouver, will start recruiting men with advanced prostate cancer for the trial using the study drug referred to as EPI-506.

Marine sponges contain numerous chemical defenses, so they have been a rich source for drug development during the past few decades. There are already a number of chemotherapy and other pharmaceuticals developed from sponges or their synthetic versions.

Dr. Malcolm Moore, president of the BCCA, said the drug discovered in Vancouver is unique from anything previously created. He hailed the BCCA milestone as a one-in-1000 event since only one out of 1000 promising drug candidates tested in animals reach this stage of human trials. About 3700 men in B.C. will get prostate cancer this year and a third of them will go on to develop metastatic disease involving the spread of cancer, usually to the bones. Relapses occur when cancer becomes resistant to what is called androgen ablation; that is, surgery and/or drug treatment meant to stop production of male hormones (testosterone) that fuel the growth of tumors.

In an emotional speech at the announcement of the trials Wednesday, Marianne Sadar, who has worked on the research for nearly two decades, praised her collaborator, University of B.C. chemistry professor Raymond Andersen, for helping her identify anti-tumor properties in the *Geodia lindgreni* sponge to then isolate, reproduce and synthesize into a drug.

Her study published in the journal Cancer Cell in 2010 showed that in laboratory mice, the drug (then called EPI-001) shrank prostate tumours without any apparent toxic effects.

Sadar also heaped praise on a group of golfers who, for 15 years, have organized the annual charity Country Meadows Golf Classic tournament, directing all the proceeds to Sadar's research laboratory.

Their efforts brought in up to \$100 000 a year for her research. The research by Sadar's lab has also been funded by donations (\$2.6 million) to the B.C. Cancer Foundation as well as grants from the U.S. National Cancer Institute, the U.S. Department of Defense Prostate Cancer Research Program and the Canadian Institutes of Health Research. Dr. Kim Chi, an oncologist at the BCCA who is a co-principal investigator for the North American trial, said in the past five years, there have been a handful of new drugs approved that buy men with metastatic prostate cancer more time, but not a cure.

"If this one works," he said, referring to EPI-506, "it could be a billion-dollar drug."

Source: Pamela Fayerman, Vancouver Sun

### Volunteer Opportunities 50th Annual World of Wheels BMO Centre at Calgary Stampede Park

Friday Feb. 19 3pm - 10pm Saturday Feb 20 10am - 10pm Sunday Feb 21 10am - 6pm Are you available to join us as a volunteer? Please contact Kelly 403-455-1916 or executive.director@pccncalgary.org *Thank you for your generous gift of time!* 



# PROSTAID Calgary www.prostaidcalgary.org

	What we do:			
Ń	<ul> <li>Help men and their families deal with prostate cancer</li> <li>Provide support</li> </ul>	<ul> <li>Educate and inform</li> <li>Build awareness</li> <li>Advocate</li> </ul>		
POB	ate Cancer Canada Ne xx 72126, RPO Glenmore Landin Phone: 403-455-1916 Email: i: : www.pccncalgary.org YouTub	ng, Calgary, Alberta T2V 5H9 info@pccncalgary.org		

### A Woman's Guide to Prostate Cancer

Receiving a cancer diagnosis is stressful enough – sorting through treatment options and seeking a second or third opinion can be overwhelming for the prostate cancer patient and loved ones.

That is why Women Against Prostate Cancer has updated their popular booklet, A Woman's Guide to Prostate Cancer Treatment: Supporting the Man in Your Life, to educate you and your family about the variety of prostate cancer treatments that are available and some of the factors to consider when choosing a treatment path.

Copy the link below into your browser to download the free PDF, or email Kelly and she'll send you the link: http://www.womenagainstprostatecancer.org/wp-content/uploads/2015/12/WAPC-Prostate-Cancer-Treatment-Guide-12-2015.pdf

## Prostate Cancer Survey from Dr. Reda Alhajj and Gabi Jurca

#### http://prostatecancer.alhajj.ca/FirstSurvey/

The purpose of the study is to find interesting correlations between various demographic factors and prostate cancer. The researchers conducting the study are from the Database Lab at the University of Calgary, which is supervised by Dr. Reda Alhajj (alhajj@ucalgary.ca) and Dr. Jon Rokne (rokne@ucalgary.ca). The collected data will not be shared with anyone outside of the Database Lab research group. If you have any questions about the study, please

do not hesitate to contact our group.

"Like" PCCN Calgary on Facebook https://www.facebook.com/pccncalgary

#### **PROSTAID Calgary Knowledge Library Addition**

**Prostate Disorders: Fall Issue 2015** In This Issue:

Choosing the Right Surgeon for You

Statins ad Advance Prostate Cancer

Jonny Imerman On the Value of One-On-One Cancer Support

Successful Treatment of Erectile Dysfunction Books from our Knowledge Library are available for loan to our members and can be checked out at our monthly General Meetings.



## What is Step Up Challenge?

Climb the tallest towers in Canada's largest cities with the Step Up Challenge! Not only will you be racing up 5 skyscrapers but you will also be helping lead the way to a better tomorrow for Canadians affected by prostate cancer. But don't do this vertical hurl alone; teams of five will be challenged to climb 5000 feet while raising a minimum of \$5000. Register today and throw down the gauntlet as you challenge your colleagues to stair-climb to the top! https://secure.e2rm.com/registrant/LoginRegister.aspx? eventid=185991&langpref=en-CA&Referrer=direct% 2fnone



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