

PROSTATE CANCER ACTION GROUP (S.A.) INC

Affiliated with
Prostate Cancer Foundation of
Australia



ABN 26 499 349 142

NEWSLETTER *MEN'S HEALTH MATTERS*

The views expressed in this newsletter are not necessarily those of the Group. This newsletter is produced for the benefit of members of this Group, for general information, and articles are not intended as professional advice. This Group does not provide professional advice, nor does it endorse any particular product or service. It is recommended that any person needing advice on any health matter should consult their health professional without delay.

FIND US AT www.pcagsa.org.au
AUGUST 2007

Chairman's Report August 2007

2007 has seen the completion of 10 years since the inception of our Group. I believe members have made a valuable contribution and in many ways lead the way on the awareness of prostate cancer in South Australia. We have travelled throughout the State in our efforts to create awareness and can be justifiably proud of the large numbers that have attended the various functions organised. It is very important the Group remains viable as there is still much we can achieve.

Awareness Evenings

Adelaide Metro Area

The presentation, sponsored by Prostate SA, will be held on **Wednesday 19th September** at the Sturt Football Club – Oxford Terrace, Unley from 7.00pm. – 9.30pm. Prof. Willis Marshall will be the key speaker. Other speakers have not been confirmed but will probably include a session on diet, 2 prostate cancer survivors, a support person and a segment on support groups.

This is a free evening and as is the case with all awareness presentations, partners, families and friends are all welcome to attend.

Put the date in your diary – don't miss it.

RSVP by Friday 14th September to

The Cancer Council Helpline 13 11 20

3 Presentations involving the Freemasons

Following discussions held at the close of July these events are likely to proceed but dates have yet to be confirmed. However, we are now aiming for 2 events in the latter part of this year and one early in 2008.

Tail End Charlie

As previously mentioned a Chamberlain Tractor will undertake a 38 day journey around Australia to mark the 50th Anniversary of the 1957 Mobilgas Round Australia Rally. The tractor will be in Adelaide on 21st August. One of the sponsors of the re-enactment is Bunnings and we are hoping to meet the tractor at a Bunnings store and raise funds by way of collection tins. Attempts will also be made to get an article and photo in the Advertiser.

When times are advised support group people are urged to be in attendance to greet the tractor.

PCFA assistance for SA Groups

Strategy Meeting

Norwood Hotel 10am. Monday 6th August

(Report by Ray Power)

The meeting was arranged by Andrew Giles, CEO of Prostate Cancer Foundation of Australia to determine the requirements of support groups in South Australia

Attendees:

City of Onkaparinga Group:

John Shields & Phyllis Shields

Barossa/Gawler Group:

Alan Hall

Adelaide PSA Group

Phil Davis & John Mayes

Format:

The session was conducted by Karen Foster of Foster Hill, a PR & Marketing Agency and was a comprehensive review of the needs and requirements of the support groups in South Australia.

Topics covered included:

- Background to support groups
- Adelaide and regional groups
- Roles of support groups, Prostate SA, Prostate Cancer Foundation of Australia
- Activities
- Strengths, weaknesses and opportunities
- Newsletters
- Awareness evenings
- Five year forward plan
- Marketing
- Adelaide based professional office

The discussions were open, frank and all attendees contributed. The concerns and challenges facing the support groups were listed and minutes of the meeting will be distributed. Andrew was a listener rather than a participator.

Following discussions with Karen Foster, after the meeting, it appears that her agency has not been engaged and the session was a trial to access the requirements of the support groups and for Andrew to determine the suitability or otherwise of Foster Hill.

The meeting was productive and I await with interest to hear Andrew's recommendation.

Prostate Cancer Control Programs Meeting 27th July

Barry Oakley and I attended the meeting as consumer representatives. Brief comments on agenda items are as follows:

Prostate SA

Brent Frewen mentioned the following recent events:

Loose Change Day

Although the amount raised was below budget Brent commented this was the first time Prostate SA had conducted this event and they are looking forward to a better result next year.

Wine Dinner at Zak's Restaurant

A very successful event that raised \$8,500.

ETSA Utilities Week-End 27th July

This was to be held the evening of the meeting and is commented on later in the report.

Examples of other events still to come are:

Boys will be Boys

Father's Day event

Classic Adelaide

GP Support

The next newsletter from the CCSA, which is distributed to most GP's and Practices in SA, will include a page on prostate cancer. Part of this is an article on support groups which I was asked to submit. The distribution date is approximately 14th August.

Cancer Council Help Line/Cancer Connect/Counselling

APCC

Dr Carole Pinnock mentioned the Annual Conference 11/12 October to be held in Melbourne and gave an update on the Lions Website.

Prostate Cancer National Call-In 13th September

Support Group members will again be asked to assist.

Prostate Cancer Support Groups

The awareness evening (involving our group) on 19th September was discussed. There will be a cross promotion with this event and the National Prostate Cancer Call-In.

Cancer brochure for aboriginal men was discussed.

Mitcham Prostate Cancer Support Group

33 attended the July meeting to hear an excellent variety of speakers arranged by Tridi Bizilis from American Medical Systems.

The guest speaker at our August meeting will be Ray Nicholson who will speak on his cancer experience and the activities of the Cancer Care Centre at Unley.

All are welcome to attend.

For more information contact 8277 3424 or 8271 0513

or visit www.psamitcham.org

Adelaide Town Hall Concert for Prostate Cancer

The City of Adelaide Concert Band will be presenting a concert in the Adelaide Town hall on Sunday 9th September commencing at 2pm. All proceeds will go to the Prostate Cancer Foundation of Australia.

The program, which is detailed later in the newsletter, includes an international soprano and is titled from “Mozart to Sinatra”.

Tickets are \$23, \$18 concession. Book at Bass.

This sounds a very enjoyable afternoon and all support group members, partners, families & friends are urged to attend.

The Band is to be commended for donating their time and expertise for prostate cancer and deserve our full support.

ETSA Utilities Blue Ribbon Weekend

14 Support and Action Group members and partners took advantage of an invitation from Prostate SA to attend a Cocktail Function and the Thunderbirds match on 27th July. At the Function, Trevor Hunt spoke briefly as a survivor.

The evening was a fundraiser for Prostate SA and raised \$3530.

This proved to be an excellent evening. Thanks to Brent and Ben from Prostate SA for arranging the tickets.

Jeff Roberts

Chairman

GAWLER SHOW INFORMATION STALL

Saturday 1st September (9.00am to 8.00pm) and Sunday 2nd September 2007 (9.00am to 5.00pm)

Our Site is No. 10 in the TRADE HALL

This is shown on the site plan as “Stone Pavilion, trade area D”, and is situated almost behind the Show Office

Closest entry point is Gate 3, near the corner of Jacob Street/Patterson Terrace and Nixon Terrace. The Showgrounds can be found by turning left from Murray Street (Adelaide Road) into Jacob Street. There is very limited parking available on the Showgrounds, and it is most likely that members will need to park in adjacent streets. Set-up can be achieved on Saturday morning, between 6.30am and 8.30am, Display must be ready for the public at 9.00am, and all vehicles cleared from the area.

**NO SITE CAN BE DISMANTLED UNTIL AFTER 5.00pm SUNDAY
RAFFLES, LOTTERIES, SALES OF BINGO TICKETS, etc. NOT PERMITTED
FURTHER DETAILS AND A SITE PLAN CAN BE OBTAINED ON THE GAWLER SHOW
SOCIETY Inc. WEBSITE www.gawlershow.org.au**

The Gawler Show is the largest Agricultural Show in S.A., and attracts crowds of up to 30,000 persons over the two-day period. This Show has such attractions as the Gawler Ute Show Muster, a Tasting S.A. pavilion, historic machinery display, fireworks display (Saturday night), and Saturday night entertainment by “Chunky Custard”.

EAT YOUR BROCCOLI

OSU STUDY FINDS STRONG ANTI-CANCER PROPERTIES IN CRUCIFEROUS VEGGIES

It turns out Mom was right - you should eat your broccoli.

But what Mom may not have known is why broccoli is so healthy, and how its lesser known, younger offshoot may be a powerful anti-cancer agent.

Researchers at the Linus Pauling Institute at Oregon State University have found that sulforaphane - a compound found in cruciferous vegetables such as broccoli, bok choy and brussels sprouts - has strong anti-cancer properties.

Even more promising results have been found in broccoli sprouts. The tiny, thread-like broccoli sprouts sold at stores next to alfalfa sprouts have more than 50 times the amount of sulforaphane than found in mature broccoli.

While many cruciferous vegetables have sulforaphane, broccoli and broccoli sprouts have the highest amount and thus could be a major player in the prevention of prostate and colon cancer.

Emily Ho, a researcher with the Linus Pauling Institute and an assistant professor in the Department of Nutrition and Exercise Sciences at OSU, will describe these dietary inhibitors for cancer prevention at the conference on "Diet and Optimum Health", organized by the Linus Pauling Institute.

Ho's main area of research is on the dietary prevention of prostate cancer. The Asian diet could be a key in this prevention.

White males born in the United States have dramatically higher rates of prostate cancer than Asian men. But when Asian men live in the U.S. for five years or more, their rates of prostate cancer rise significantly, Ho says.

Past studies in Ho's lab have focused on dietary elements in cancer prevention such as green tea and soy. In her new study, which was published in the Journal of the Society of Experimental Biology and Medicine, Ho and her colleagues at Linus Pauling Institute looked at cruciferous vegetables.

While many cruciferous vegetables have sulforaphane, broccoli and broccoli sprouts have the highest amount and thus could be a major player in the prevention of prostate and colon cancer.

Ho said drugs classified as histone deacetylase (HDAC) inhibitors are being looked at as potentially preventing cancer. She said their research shows that these same effects of inhibiting HDAC might be obtained by consumption of cruciferous vegetables.

"I would say if you're at all worried about cancer or at high risk of cancer, especially of prostate or colon cancer, then increasing your dietary intake of broccoli and other vegetables could be a good idea," Ho said. "It certainly can't hurt. And drugs can have negative side effects and be difficult to administer."

While Ho said the research is not at the point where she can make a specific recommendation on how much broccoli or bok choy to eat, she personally tries to have two servings of cruciferous vegetables a day.

In human subjects, just eating some broccoli sprouts on top of a bagel with cream cheese resulted in HDAC inhibition.

"The compound in broccoli may be one of the strongest anti-cancer fighters we have," Ho said.

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Marriage is a three-ring circus: Engagement ring, wedding ring, and suffering.

NEW GUIDELINES OUT ON PROSTATE CANCER

by Don Finley | San Antonio Express-News | 05.21.2007

The first new guidelines in a dozen years for the treatment of prostate cancer were released Monday, and they state that for most men whose cancer hasn't spread to other parts of the body, four types of treatment- including watchful waiting - are all worthwhile options.

Men need to decide what treatment they want based on potential side effects and quality-of-life issues they hold dear, said Dr. Ian Thompson, a San Antonio urologist who headed the national panel that updated the guidelines for the American Urological Association. The recommendations were unveiled at the association's annual meeting in Anaheim, Calif.

"A lot of patients will say, 'Well, doc, what would you do?'" said Thompson, chairman of urology at the University of Texas Health Science Center. "I try not to answer that, because that then presumes that my priorities are more important than the patient's. So I then try to take them back and say, let's talk again about what really matters to you."

Prostate cancer tends to grow slowly, and older men with the disease - and 60 percent to 70 percent of men 80 and older have cancer cells in their prostates - often die of other causes first. The lifetime risk of a man dying from prostate cancer is about 3 percent.

The patient's life expectancy, overall health and the aggressiveness of the tumor should be taken into account when deciding on a treatment, the guidelines state.

The four standard treatment options include surgical removal of the prostate, two types of radiation - external beam radiation therapy or the implantation of radioactive seeds into the gland - and careful monitoring of the tumor.

Surgery and radiation come with varying risks of complications that include incontinence, bowel problems and impotence.

"What you get from the guidelines essentially is the message that if you're in a low-risk group, everybody appears to do well independent of what was done, and similarly if you're in a high-risk group, everybody seems to do similarly poorly no matter what treatment was done," said Dr. Anthony D'Amico, a panel member and professor of radiation oncology at Harvard Medical School.

While no strong evidence points to any of the four as greatly superior, Thompson said patients should consider a few caveats. First, a recent study of 700 Scandinavian men found that patients who had surgery had a slightly lower death rate after 10 years than those who had their cancer closely monitored.

However, there were some differences between the Scandinavian patients and the typical American patient, he said, noting the Scandinavian cases "tended to be more aggressive tumors than we generally see in the United States."

Another caveat is that recent improvements in radiation therapy allow for higher doses than before, with better results. And with intermediate- and high-risk patients, adding hormone therapy to radiation improves survival.

Fortunately, Thompson said, the fact that most prostate cancers are slow growing means that men can take time to make a decision that's right for them.

"People oftentimes take more effort buying a car than they do in making a decision for their prostate cancer."

\$4m SHOT IN THE ARM FOR ALTERNATIVES

Adam Cresswell, Health editor 23jun07

ONE of the biggest discrepancies in modern healthcare - that herbal and other alternative treatments have little of the formal scientific evidence demanded of prescription drugs - will be tackled after the federal Government announced a \$4 million grant to establish a new National Institute for Complementary Medicine.

The new institute, to be based at the Campbelltown campus of the University of Western Sydney, will work out the priorities for future research projects looking at so-called natural therapies, which are thought to be soaring in popularity in Australia. Announcing the grant last week, federal health minister Tony Abbott said Australians now spent about \$1 billion each year on complementary and alternative medicines, such as vitamins, homeopathic medicines and traditional Asian medicines.

Two in three Australians are estimated to use some form of complementary medicine or treatment each year, including vitamins, herbal treatments, mineral supplements and other therapies.

The \$4 million grant comes on top of the \$5 million the federal Government announced late last year it would give the National Health and Medical Research Council for specific research projects in complementary medicine.

News of the latest grant has been welcomed by other complementary medicine experts. Professor Marc Cohen, president of the Australasian Integrative Medicine Association which promotes the use of proven complementary medicines in mainstream medical practice, said the new institute "promises to provide research outcomes directly relevant to many National Health Priority areas, as well as increase Australia's capacity to contribute to the world's knowledge of many widely used medicines".

"While the majority of the Australian community regularly use some form of complementary medicine, to date there has been a severe lack of funding supporting high quality research in this area, and much of this use is not guided by scientific research," Professor Cohen said.

Interim director of the new institute is Professor Alan Bensoussan, currently director of the UWS CompleMED Research Centre, who played a central role in setting up the NICM. Professor Bensoussan told Weekend Health that there were "a huge number of areas" for the institute to look at, but that initially it would divide its work into four key steps. The first of these would be working out the most pressing priorities for research, to ensure limited funds were not being dissipated by duplicated effort.

"We have a large number of relatively strong but disconnected researchers across the country that compete for the small funding available," Professor Bensoussan said. "We need to identify national priorities in this area, where we think the opportunities exist, and to co-ordinate research. We hope by the end of this year we will have determined the kinds of priorities where the best investments can be made."

The second key step for the NICM would be to increase collaboration and networks between different research centres and individuals, and links with researchers in the traditional medical fields. The other steps would be to increase and nurture the pool of expertise in the complementary medicine field, and finally - once results start flowing through - to disseminate research findings to health professionals and the community.

Professor Bensoussan said that Chinese public hospitals routinely used a large number of herbal medicines to treat patients, even for serious illnesses such as cancers, liver disease and kidney disease.

The herbal treatment artemisia - which has been developed into powerful anti-malarial treatments - was just one example of successful alternative treatments.

"What we need to do is get a handle on some of these forms of medicine that are available overseas, and look closely at building up evidence around these medicines to see whether they can be used in our own population," he said.

"There are indigenous medicines available all around the world, and what we need to do is look at some of the claims around these medicines, so we can see how they might be incorporated into conventional healthcare. "For some of these medicines, the evidence will stack up, but for others it won't."

The UWS CompleMED Research Centre already has a herbal analysis laboratory, and will soon have a herbal pharmacology laboratory which together can identify compounds in herbal medicines and test their effects.

Just this week CompleMED announced a trial to test if the Chinese herbal formula Jiangtang Xiaozhi is an effective treatment for pre-diabetes, the reduced tolerance of or ability to metabolise sugar in the blood.

Although pre-diabetes can exist undetected for years, and by the time it progresses to type 2 diabetes, about 50 per cent of patients will already have tissue damage.

(© The Australian)

ALTERNATIVE THERAPIES

by Jacqueline Head </health/bio/head_j.htm>

Have you ever found yourself questioning conventional Western medicine? Looking for something more "natural" to help ward off the inevitable winter cold? Chances are that like 60 per cent of the Australian population, you've tried some form of alternative medicine at some point, whether it be herbal medicine, acupuncture, or aromatherapy.

But how often do you question the safety or quality of something that is natural? Surely natural products are the healthier, safer alternative? Health Matters takes a look and finds that although complementary medicine can be an extra helping hand in treating a wide range of conditions, it can also be a case of ?buyer beware?.

What is alternative medicine?

Alternative medicine, often referred to as "complementary medicine", includes a long list of therapies - herbalism, acupuncture, traditional Chinese medicine, aromatherapy, iridology, homeopathy, and many more. The term 'complementary' is preferred by many practitioners because they don't see themselves as a "substitute" for conventional medicine, but something that can be used alongside it.

Many, but not all, natural treatments are traditional therapies that have been used and developed over hundreds of years, but were largely removed from the market early last century, after the discovery of penicillin. Antibiotics provided the most effective treatment ever known for the infectious diseases that were the biggest killers at that time.

Only in the past couple of decades have alternative therapies become popular again. Most have not yet undergone scientific evaluation. But any substance that is active in the body, and thereby of healing value, also carries a potential risk of side effects.

Regulation and safety

The main problem with complementary medicine is the "unknown". Some herbal medicines can cause minor side effects such as skin rash, upset stomach and headaches; others have been shown to interfere adversely with pharmaceuticals; while some alternative medicines used for stress, insomnia and anxiety contain kava, a member of the pepper family, which is suspected, though not conclusively proven, to trigger liver damage in some people. (As a precaution, there is a limit to the amount of kava allowed in preparations listed in Australia.)

When buying a herbal product, especially remedies that are made up in the shop from raw products, you cannot always be assured of the quality, safety, and sometimes even the ingredients.

Your best bet is to consult with a qualified practitioner, rather than buy products off the shelf. Practitioners will order their herbs from suppliers with a reputation for providing high-quality products, and should check if you are taking any other herbs or medications to make sure there are no harmful interactions.

Regulation of medicines in Australia is the responsibility of the Therapeutic Goods Administration<<http://www.health.gov.au/tga/index.htm>> (TGA). In 1999 the TGA established the Office of Complementary Medicine, which focuses on tightening regulations concerning these products, and recalls faulty or potentially dangerous products.

The regulation of practitioners is the responsibility of state governments, and so far only Victoria has implemented formal regulations. There is a strong push towards national regulation, however, and some professional associations, such as the Australian Acupuncture and Chinese Medicine Association <<http://www.acupuncture.org.au/>>, have been created to help people choose a reputable practitioner.

From 2002 in Victoria, practitioners using the titles Acupuncturist, Chinese herbal medicine practitioner or Chinese medicine practitioner must be registered with the Chinese Medicine Registration Board <<http://www.cmr.vic.gov.au>>, and consumers in that state wanting to obtain a practitioner should contact the board. There is a searchable list of registered practitioners on the board's website.

To further ensure safety with complementary medicine, you should tell your GP about all the products you are taking. At the moment only one third of people taking complementary medicine actually inform their GP.

Below is information on two of the more popular forms of complementary medicine, herbal medicines and traditional Chinese medicine.

Herbal medicine

Background. The use of herbal medicine goes back thousands of years, with the earliest written records dated at 2800 BC in China. Currently around 80 per cent of the world's population relies on herbal and complementary medicine, and it is estimated to be a \$1 billion industry in Australia alone.

What can they be used for? Herbal medicines can be used to treat a range of illnesses, although they are mainly used for colds and allergies such as hay fever. Herbs can also be used to boost immunity and levels of stamina. "Hairy root" herbal products, such as Echinacea, are believed to contain preventive elements that can help ward off winter colds.

Is it safe? It is important to remember that herbs contain chemicals and properties that in some cases can be as potent as pharmaceuticals. Herbal medicines can also interfere with prescribed medicines. St John's Wort, for example, disrupts the action of several drugs, including immunosuppressive drugs like indinavir, the blood-thinning drug Warfarin, and probably the contraceptive pill.

There are several things you should check before taking herbs, minerals, or vitamins.

1. Consult your GP if you are pregnant, have a kidney disorder or are already taking prescribed medicines; and whenever visiting your doctor inform them of any herbal products you are taking.
2. Check the product for a TGA licence number (AUSTL ****), and take note of the concentration of active ingredient it contains.
3. Do not take herbal remedies for an extended period, and check the dosage. For example, it is recommended you do not take Echinacea for more than eight weeks consecutively, and studies suggest that taking more than 2000mg of vitamin C per day can cause kidney stones.
4. If you are due to undergo surgery make sure you stop taking any herbal medication at least two weeks beforehand. Some products have a blood-thinning effect which can cause bleeding, and in the case of heart surgery in particular, they may affect the ability of the heart to start after it's been on the bypass pump.
5. Never use herbs alone to treat serious medical conditions or persistent symptoms, and stop taking herbal medication immediately if you experience side effects such as skin rash, nausea, or headaches. You may wish to inform the Australian Adverse Drug Reactions Committee
<<http://www.health.gov.au/tga/adr/>> if you suffer side effects.

Do they work? There are conflicting reports on the effectiveness of herbal medicine, and in most cases there is not enough evidence to say for sure. Some have been shown to help alleviate some conditions, but often researchers are still unclear as to why. Herbs are a complex mixture of many chemicals, making it hard to determine what particular elements in one herb may have an effect.

However, more and more research is being done on herbal medicines, and a team from the University of Sydney <<http://www.usyd.edu.au/>> is currently compiling a comprehensive herbal database for both consumers and medical professionals, which should help to make choosing herbal medicine easier and safer.

Traditional Chinese medicine

Philosophy. Traditional Chinese medicine (TCM) has been refined over 3,500 years, and combines herbal medicine, acupuncture, therapeutic massage, and dietary and exercise therapy. The basic principle underlying TCM is that illness or disease is caused by an imbalance in the body, or in the body's relationship to its environment.

Treatment involves addressing this imbalance as well as relieving the symptoms; and whereas western medicine may look at three people with similar symptoms and attribute to them the one disease, Chinese medicine may look at the same three people and identify a different cause in each.

What is it used for? Chinese medicine practitioners claim their therapy can be used for almost anything - from acne and allergies to pain and PMS. Most practitioners, however, will tell you that Chinese Medicine's strength is Western medicine's weakness: chronic conditions such as irritable bowel syndrome, colds and flu, headaches, insomnia, chronic fatigue syndrome, skin diseases, infertility and allergies.

Chinese herbal medicine: There are over 5000 herbal medicines listed in the "Chinese Materia Medica", and about 400 of these are commonly used. Herbs primarily consist of dried plant parts (such as cinnamon twigs, bark, ginger and mandarin peel), although animal extracts are occasionally used. Preparations are created by boiling and draining to form a strong-tasting tea, which can either be drunk or applied externally, depending on the condition.

Acupuncture: Acupuncture is generally used for the treatment of pain. It involves the use of fine needles, placed at specific points along pathways of 'Qi' - vital energy - in the body. This is based on the concept that blockage of "Qi" creates pain; acupuncture is used to remove these blockages so that the pain is relieved. It is often recommended for people with muscular and skeletal disorders.

Is it safe? The TGA and the Australian Medical Association urge caution about Chinese herbal medicine, particularly because it uses raw substances. The TGA has issued a warning <<http://www.health.gov.au/tga/docs/html/aristol.htm>> about "Aristolochia", a herb which can cause renal failure and cancer. Due to a communication error, an importer was bringing in the deadly herb and labeling it as Clematis, which is used in Chinese medicine. About two samples out of 100 in Australia were found to contain "Aristolochia". Always check labels for a TGA licence number, and only go to practitioners that are registered with a formal association such as the Australian Acupuncture and Chinese Medicine Association <<http://www.acupuncture.org.au/>>.

Does it work? Around one quarter of the world's population uses Chinese medicine, and acupuncture in particular is increasingly recognised as a legitimate medical practice in Australia. However, Chinese medicine definitely works better for some conditions than others, and it cannot replace Western medicine, especially surgery and many pharmaceuticals.

The future

The number of people using alternative therapies is rising, and this will no doubt influence conventional medical practices. Already about one-fifth of doctors practice or study complementary medicine, and about half are interested in pursuing it further. Universities and colleges around Australia are also offering courses in herbal and Chinese medicines, meaning that future practitioners will be better qualified, and consumers better informed, about complementary medicine.

More info

- * Complementary medicine - Health Library A-Z
<<http://www.health.gov.au/health/library/compmed.htm>>
More stories and transcripts about complementary therapies.
- * Australian Therapeutic Goods Administration
<<http://www.tga.gov.au>>
Australia's regulatory authority for medical products.
- * Kava fact sheet - Therapeutic Goods Administration
<<http://www.tga.gov.au/cm/kavafs0504.htm>>
A summary of what's known about the possible risks of kava.
- * Pharmacy Guide - Herbal Medicines
<<http://www.library.usyd.edu.au/subjects/pharmacy/links/herbalmedicines.html>>
A collection of links put together by the University of Sydney.
- * Australian Acupuncture and Chinese Medicine Association Ltd
<<http://www.acupuncture.org.au/>>
A professional association of acupuncture and traditional Chinese medicine practitioners.
- * Acupuncture.com.au - Australian Acupuncture Forum
<<http://www.acupuncture.com.au>>
Australian Acupuncture News, Information and Discussion.
- * Chinese Medicine Registration Board of Victoria
<<http://www.cmr.vic.gov.au/>>
Contains searchable list of registered practitioners. Also investigates complaints.
- * National Herbalists Association of Australia
<<http://www.nhaa.org.au/>>
A professional association that represents practitioners of herbal medicine.

[This is the print version of story <http://www.abc.net.au/health/cguides/alternative.htm>]
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REPORT FROM THE CHIEF EXECUTIVE OFFICER: AUGUST 2007

The past three months have been as exciting and hectic as we have come to expect within the PCFA. Some of the highlights include:

1) Research

The PCFA is excited to announce a major new grant program into prostate cancer research. All the details are on the website but the timetable for the first grant round is:

- o 10 August - Advertising placed and scheme launched
- o 14 September - Applications Close
- o 17 September - Research Committee receives applications
- o 19 October - Research Committee Meets in Melbourne
- o 1 November - Review by National Board

The Research Committee is now fully formed and operational. It comprises what I believe to be an outstanding group of scientists and clinician-scientists with the appropriate range of expertise to review and rank applications for funding to the PCFA. The members and their qualifications are:

Prof John Mills (Chair) is a specialist physician, medical scientist and businessman. He holds a BS (Hons) from the University of Chicago and an MD (Hons, with specialization in microbiology) from Harvard Medical School. His clinical training, in infectious diseases and pulmonary medicine, was at Boston City Hospital and the University of California, San Francisco. He holds Fellowships in the American College of Physicians, the Royal Australian College of Physicians and is an Associate Fellow of the Royal College of Pathology of Australasia. He has been actively involved in patient care since 1966, and currently retains a small clinical practice at the Alfred Hospital. He holds professorial appointments at UCSF, Monash University and RMIT. Prof Mills has been actively conducting medical research since 1961, and has over 175 peer-reviewed publications reporting original research, plus numerous reviews, book chapters and edited texts. His research interests have been very broad and are reflected in his publications. He has been on the editorial board of several journals, the recipient of a number of prestigious awards, and actively involved in research review and administration. Since 1992 Prof Mills has been increasingly involved in biomedical business, and he is currently an Executive Director of TissuPath P/L, a specialist cytogenetics and histopathology practice in Hawthorn with a special interest in uropathology and prostate cancer.

Prof Jerry Adams is currently Joint Head of the Molecular Genetics of Cancer Division of the Walter and Eliza Hall Institute of Medical Research in Melbourne, Australia and Professor of Molecular Genetics at the University of Melbourne. After undergraduate studies at Emory University in Atlanta, Georgia, he did PhD studies at Harvard University with James D Watson (1962-1966) and post-doctoral studies with Frederick Sanger (1967-1968) at the Laboratory of Molecular Biology in Cambridge, where he met Suzanne Cory, who became his career-long collaborator. After further molecular biology studies in Geneva, Switzerland, in 1972 Adams and Cory both took positions in the Walter and Eliza Hall Institute. Their work was initially on the genetic basis of antibody diversity, but since 1982, Adams and colleagues have focussed on the genetic basis of cancer. Following their seminal discovery that cell death (apoptosis) is impaired in cancer cells, they have concentrated on the role of apoptosis in cancer, the mechanisms that control cell death and potential ways of exploiting the apoptotic machinery to improve therapy. His research has led to over 200 scientific publications, collectively cited over 18,000 times, and has been recognized by a number of awards, most notably by his election to the Australian Academy of Science (1986) and the Royal Society (1992).

Professor Robert Alexander ('Frank') Gardiner is an academic urologist with the University of Queensland based at Royal Brisbane & Women's Hospital where is appointed as Consultant Urologist. He has academic appointments locally at the Queensland Institute of Medical Research, Queensland University of Technology and Cancer Council Queensland, and also holds a number of senior positions in national and international professional organizations. He collaborates widely in his research interests which are centred on prostate cancer.

A/Prof Howard Gurney is the Director of the Department of Medical Oncology at Westmead Hospital in Sydney. He is a medical oncologist with sub-specialty interests in genitourinary and upper gastrointestinal tract cancers. He helped establish a large multidisciplinary prostate cancer management team in Western Sydney involving urologists, radiation oncologists and medical oncologists. He has a strong track record in clinical and translational research, particularly in anti-cancer drug disposition and novel methods for dose calculation. He has been an investigator on over 50 clinical trials and has over 50 peer-reviewed publications.

A/Professor Susan Henshall is Group Leader of the Prostate Cancer Group in the Cancer Research Program at the Garvan Institute of Medical Research, Sydney. She is a past PCFA Young Investigator and is currently a Cancer Institute NSW Fellow. She holds conjoint academic appointments with the University of New South Wales and Georgetown University in the United States. Her main research focus is the identification of genes and pathways whose expression changes can predict the development of aggressive

life-threatening prostate cancer or resistance to chemotherapy used for the treatment of advanced stage prostate cancer.

Professor Robert Newton is Director of the Vario Health Institute and Professor of Exercise and Sports Science at Edith Cowan University. He leads a research team investigating the impact of exercise, nutrition and psychological interventions on symptom experience, fatigue, body fat, muscle mass, bone density, physical performance, quality of life and psychological wellness of prostate cancer patients. Professor Newton is an accredited exercise physiologist and directs the “Cancer Survivors Program” at the Institute which provides lifestyle support to people with cancer.

2) Awareness

Commonwealth Bank Of Australia Rural Men’s Health Initiative

The South Australia leg of our partnership with CBA went well although in the end we could only do three of the planned five events. The events were:

- Victor Harbor on the 20th June. Dr Kim Moretti was the guest urologist on the night and he gave a great presentation to a rather small crowd of 36. However everyone who was there appreciated the presentation – as well as the talks by Trevor and Coralie Hunt from our support group.
- Murray Bridge on the 25th June. Dr Adrian Porter was our guest urologist to a bigger crowd of 54. They were a very interactive crowd and also enjoyed the speech from one of the PCFA Ambassadors Dean Wall and Support Group leader Jeff Roberts. Local Member of Parliament Bob Such also spoke.
- Port Pirie on the 3rd July. Dr Richard Wells was the guest urologist and we have 94 people attend.

These events gave us the opportunity to undertake some extensive advertising across South Australia to promote the PCFA brand. As well as local press advertising PCFA received excellent radio coverage – as well as posters in every CBA branch in the state.

The initiative now moves to Western Australia, Darwin, and Queensland.

Melbourne Football Club and Undie Mundie

The world’s biggest pair of underpants were unveiled on the MCG on the Queens Birthday Long Weekend (Monday June 11) as part of an event dubbed ‘Undie Mundie’ – to focus attention on the risk of prostate cancer for Australian men.

- Three giant pairs of men’s underpants – measuring 13.1 x 10.6 metres each – were specially manufactured by Bonds and were unveiled around the ground’s centre square before the Melbourne-Collingwood AFL match. As you know an Australian male dies from prostate cancer every three hours, and symbolically we had 3 pairs of the world’s biggest undies at the MCG. Undie Mundie also marked the first day of International Men’s Health Week, and the stunt, while humorous, contained a serious message.

Barry Collins Fund

To coincide with one of my visits to Adelaide in July I was invited to speak at the monthly meeting of the Barry Collins Fund. This is a wonderful and diverse group of people who get together every month to have either a wine tasting or a dinner to both celebrate excellent SA wines and the memory of the late Barry Collins. His widow Ann arranges the function and over the past 7 years they have raised in excess of \$25,000 for PCFA. Around 50 people attended the dinner in Adelaide and they were a wonderful audience.

Angry Anderson Launch

In the lead up to International Men’s Health Week we launched – with the Australian General Practice Network (AGPN) and Blundstone - a series of three hard-hitting community service announcements encouraging Australian men to talk to their doctor about prostate health.

- The community service announcements featuring Angry Anderson are inspired by Peter Wells, the Rose Tattoo guitarist who sadly lost his hard-fought battle with prostate cancer last year. Not long before Peter passed away, he asked his friend and band-mate Angry Anderson to help spread the important message about prostate cancer.
- During the three, thirty-second community service announcements, Angry talks about his mate, the disease, how the risk of developing prostate cancer dramatically increases with age, and the importance of talking to your doctor about prostate cancer.
- The launch was at the Establishment Bar in Sydney with a round 90 invited guests – including most of the PCFA key corporate partners.

A copy of the advertisement will be posted to you.

Perth Men Health Forum

This event was held at the University Club at the University of Western Australia, Crawley, from 9:00am until 4:00pm, with a total registration of 178 people. In attendance were delegates, sponsors, volunteers, agencies, presenters, PCFA Support Group members, Ambassadors, Board members and staff, many of whom travelled from rural areas.

- The inaugural Forum for PCFA WA was specifically designed to incorporate a wide range of men's health information delivered in short sessions. This strategy was to determine which topics were well received and what needed to be covered in subsequent Forums. Prostate cancer diagnosis, pathology, treatment and personal experiences, along with lifestyle and exercise, were presented in the morning session.
- Lunchtime saw the first exposure of the giant underpants in WA. Wesley College students and several delegates assisted with the 'Undie Wave' orchestrated by Jo Fairbairn and captured by Network Ten news.
- During the course of the afternoon there were three time-slots of concurrent sessions. The topics included Erectile Dysfunction, Work Life Balance, Stress Management, Incontinence Prevention and Solutions, Bowel Health, Heart Disease, Women and Prostate Cancer Testosterone Replacement, Complementary Therapy and Type 2 Diabetes. Health Promotion students from ECU and Curtin assisted during the day with registrations, information regarding sessions and Pit Stop Fast Track health checks.

Urological Society of Australia and New Zealand MasterClass.

This was the first of these meeting for several years and PCFA provided \$20,000 sponsorship for the event. It was a well attended meeting – and the event organisers – Dr Andrew Kneebone and Dr Manish Patel - went out of their way to acknowledge the generous support of the PCFA at the Conference Dinner.

Heritage Golf Day

This is the second year that PCFA is a major recipient of funds from this major golf day held by Heritage Financial Services. In addition to an expected \$30,000 in income Heritage also purchased a Henry Buck tie for every player. Graeme Johnson and Jo Fairbairn represented the Foundation.

Sanctuary Cove International Boat Show

This was the first time that the Sanctuary Cove International Boat Show had a chosen charity partner. It was thanks to the efforts of Former National Director Don Baumber and also Jo Fairbairn that we secured this great partnership.

- In addition to a stand – which was manned by members of our support groups in Queensland - the PCFA was asked to provide a speaker for the major breakfast on the morning of the 25 May. Former National Director and current NSW Board Member Lindsay May – who this year was the handicap winner of the Sydney to Hobart – was an obvious choice and gave a great presentation. While not a fundraising event in its first year it was a great awareness event at what is major event on the international boating calendar.

Tour de Cure

This amazing 10 day event in which 20 push bike riders peddled from Brisbane to Sydney to raise \$300,000 to be split between PCFA, NBCF and Canteen was a fantastic event for PCFA. Not only did we do all we could media wise to support this event in each of the towns they came into but also members of our support groups were there to show support.

- To acknowledge is great achievement we hosted a cocktail function at KPMG's Sydney office on the 12 July. About half the riders and their key supporters attended what was a fun and informal evening arranged by Wendy Farrow (NSW Manager).
- The Tour de Cure event people aim to raise \$2,000,000 over four years to be split amongst the three charities – and if year one is an indication of what they can achieve then it will be a great series of events.
- Sincere thanks to outgoing KPMG National Chairman Doug Jukes for sponsoring the event and to Chris Hall for hosting.

ANZIIF (Australian and New Zealand Institute of Insurance and Finance):

The PCFA was very fortunate to be the charity of the 2007 ANZIIF luncheon thanks to the input of David Sandoe.

- 350 people attended this great event in the grand ballroom of the Four Seasons on 13 July. The guests speakers were Buddha and David Sandoe. It was a great event for PCFA. Although Wendy Farrow (NSW Manager) undertook a great deal of the support work – most of the hard work – getting people to attend, auction prizes etc – was done for us by the wonderful team at ANZIIF.
- The event raised in excess of \$30,000 for PCFA.

3) Advocacy

The main focus of our advocacy in recent months has been supporting the listing of Taxotere on the PBAC. Some of the activities that I undertook included:

- An information pack was delivered to every Federal Parliamentarian (House of representatives and Senate) with information on PCFA and our support of International Men's Health Week. The pack contained a letter from me, background notes on key issues, a copy of Prostate News, a PCFA pin as well as a media release template that politicians could use to promote prostate cancer awareness in their local electorate. The outcome was positive with an excellent speech in the House by Kerry Bartlett and also a series of media stories.
- 12 June - Briefing of the Federal Parliament Health and Aging Committee on prostate cancer at Parliament House Canberra. This was much better attended than I had anticipated – especially as there are so many demands on the time of our parliamentarians. However 14 member of the committee attend this private luncheon to hear about the work of the PCFA. I gave the PCFA's standard presentation on prostate cancer and was supported by Maurice and Shelia Duke who are members of our ACT Support Group
- 21 June – Briefing for partners of member of the Government. This again was successful function held as a private luncheon in Sydney.

In the background we ran out a series of 5 Media releases over three week – resulting in some excellent coverage, ranging across TV, radio and press.

4) Support

Support Groups

Recently the PCFA has hosted

1. the annual face-to-face meeting of the NSW Chapter of the Support and Advocacy Committee in Sydney
2. a meeting with the leader of the all the groups in South Australia to develop a plan for building on the strength of those groups.

Carers

PCFA partnered with community organisations Can-Survive, Carers Victoria, National Ovarian Cancer Network, the Continence Foundation of Australia and Brainlink to host a community outreach initiative to recognise the growing needs of people caring for a family member or loved one with a chronic illness or disability.

- **The Support Forum for people who Care** aimed to provide practical information, skills and resources for carers. The project was designed to demonstrate that working together; community organisations with a shared commitment to the day could eliminate cost duplication and share resources to provide to a broader consumer audience. A shared vision exists within the project team to replicate this day around regional Victoria and nationally.
- 120 people attended the Forum with 70% women and 30% men. The average age of the carers attending was 56 years for women and 63 years for men. 50% of participants are caring for a person with a disability; 42.9% are caring for a person with a chronic illness; 7.1% are caring for an elderly person. 99% of respondents would recommend attending this type of day to other carers.
- Common themes of why participants found the day valuable included: mutual support, a chance to say things without fear of upsetting those you care for, to learn about resources available, to exchange ideas, for good fun and time out. 90% of respondents indicated they were highly satisfied with the day. Respondents said they gained information and knowledge and new ideas. Other comments included providing direction where the assistance they need can be found. One respondent replied that the day provided hope, confidence and strength to carry on. Other feedback included a feeling of support, shared ideas and not being alone, meeting other carers, excellent speakers, professionalism, interesting workshops. Needs identified included additional support services available for the carer and their family, not just the person with the chronic illness and a place for carers to meet for support.
- Jo Fairbairn was one of the key note speakers at the Forum.

Publications

- The PCFA Scientific Reference Group has recently approved the content of:
 - A GP educational program on understating PSA testing. The program was developed by Dr Tom Shannon (a member of the WA Board) with support from Debra Royle (WA Manager)
 - A GP Active Learning Module (that has 30 points allocated to it by the RACGP) on erectile dysfunction. The program was developed by Tom Shannon. It is supported by Elli Lilly – but endorsed by the PCFA and RACGP
- PCFA involvement in the revised version of the Treat ED (Erectile Dysfunction) brochure is continuing. A draft of the brochure will be send to the PCFA Scientific Reference Group later this month.
- PCFA involvement in a joint initiative between the Continence Foundation of Australia and the Urological Society of Australia and New Zealand to develop a publication on the issue of incontinence for men following treatment for prostate cancer continues. A raft of the brochure will be send to the PCFA Scientific Reference Group later this month
- A new DVD on what men can expect after a prostate cancer diagnosis has been developed by David Westbrook. The draft has been sent to the PCFA Scientific Reference Group for comment

Scientific Reference Group

Following my listing of the Scientific Reference Group in the June issue of Prostate News some concerns were raised about the fact that the Committee consisted only of Urologists. As such the committee have been extended to include a medial oncologist, a radiation oncology and public health expert. The full list of the new groups – which meets under my co-ordination is:

- Professor Tony Costello (Urologist)
- Professor Mark Frydenberg (Urologist)
- Dr Bill Lynch (Urologist)
- Dr Manish Patel (Urologist)
- Dr Gail Reisebiger (Radiation Oncologist)
- Professor Mark Rosenthal (Medial Oncologist)
- Dr Tom Shannon (Urologist)
- Associate Professor Suzanne Steginga
- Associate Professor Phillip Stricker (Urologist)
- Dr Peter Sutherland (Urologist)
- Dr Peter Swindle (Urologist)
- Dr John Yaxley (Urologist)
- Dr Henry Woo (Urologist)

5) General PCFA Issues

Partnerships

- PCFA is continuing to develop positive partnership with:
 - Urological Society of Australia and New Zealand
 - Continence Foundation of Australia
 - Ted Whitten Foundation
 - Cancer Council of Victoria

- Jo Fairbairn and I had a very positive meeting with Professor David Hill (CEO) and his key staff on ways we can work together.
 - Prostate South Australia
 - I meet with some of the team from prostate South Australia on a recent trip.
 - Andrology Australia and APCC
 - The Chairman has meet with the Chairman of Andrology Australia
 - Prostate Cancer Foundation of New Zealand (PCFNZ)
 - Rotary
 - A small working party made up of all the Rotary Representatives on the National and State Boards has been formed to leavege this major partnership We have meet once so far via teleconference to oversee our activities with Rotary and ensure consistency across the country.

6) Income

Some recent success of our fundraising have been a round:

- The mail out to Mr Argus's corporate database
- The June issue of Prostate News

Our major donors since the last Board meeting have been:

COMPANY	DONATION	REASON
The Movember Group Pty Ltd	\$2,527,772	EVENTS
Mazda Foundation	\$55,000	TRUSTS
Private Donor	\$50,000	MAJOR GIFTS
Ekco Investments Pty Ltd	\$50,000	WYLLIE FELLOWSHIP
Heritage Golf Day	\$30,569	EVENTS
The Baker Foundation	\$30,000	ROTARY
ASX Limited	\$25,000	ARGUS APPEAL
Amadeus Energy (Spinifex Holdings)	\$25,000	WYLLIE FELLOWSHIP
Dr Alastair Tulloch	\$25,000	WYLLIE FELLOWSHIP
Brian Gardner Motors	\$25,000	WYLLIE FELLOWSHIP
Australian Pensioners Insurance Agency	\$22,000	CORPORATE
Private Donor	\$20,000	MAJOR GIFTS
Private Donor	\$20,000	MAJOR GIFTS
Pacific Brands Pty Limited	\$15,000	CORPORATE
Private Donor	\$15,000	WYLLIE FELLOWSHIP
Sunseeker Australia	\$12,500	WYLLIE FELLOWSHIP
Paul Ainsworth Charitable Foundation	\$10,000	TRUSTS
Private Donor	\$10,000	MAJOR GIFTS
Pratt Foundation	\$10,000	EVENTS
Smorgon Steel Group	\$10,000	ARGUS APPEAL
RobMeree Foundation	\$10,000	TRUSTS
Private Donor	\$7,800	PROSTATE NEWS
Australian Steel Institute	\$7,000	PROSTATE NEWS
Macquarie Funds Management	\$6,500	EVENTS
Atteris	\$5,819	WYLLIE FELLOWSHIP
Eli Lilly Australia Pty Ltd	\$5,500	EVENTS
In Memorium	\$5,050	IN MEMORIAM
Oncura	\$5,000	CORPORATE
Rayskm Pty Ltd	\$5,000	PROSTATE NEWS
GJP Investments Pty Ltd	\$5,000	ARGUS APPEAL
Lew Foundation	\$5,000	ARGUS APPEAL
Alfred & Jean Dickson Foundation	\$5,000	TRUSTS
Private Donor	\$5,000	PROSTATE NEWS
Berwick Opportunity Shop Inc	\$4,000	PROSTATE NEWS
Melbourne Football Club	\$3,892	EVENTS
Rotary Club of Dalkeith	\$3,500	ROTARY
A'Mews Restaurant	\$3,150	EVENTS
Standard Communications Pty Ltd	\$3,000	PROSTATE NEWS
MQ Financial Services	\$3,000	EVENTS

Andrew Giles
Chief Executive Officer
August Report 2007



CITY OF ADELAIDE CONCERT BAND

Presents

"Mozart to Sinatra"

for



**The Prostate Cancer
Foundation of Australia**

Featuring

Guitarist *Jorge Tirota*

International Soprano *Samantha Rogers*

Vocalists *Nina Moseby & Geoffrey Whitman*

The City of Adelaide Pipe Band

**SUNDAY 9th SEPTEMBER, at 2 pm
Adelaide Town Hall**

Tickets \$23.00 Concession \$18.00

Book at BASS

Supported by the Adelaide City Council and Land S.A.



**Prostate Cancer Call-in
13 September 2007, 6-9pm
Tel: 13 11 20**

From 6-9pm on Thursday 13 September 2007 The Cancer Council South Australia will host the eighth annual Prostate Cancer Call-in.

Anyone living in South Australia can call 13 11 20 for the cost of a local call and speak to a professional about prostate cancer, and related issues.

Medical professionals will be on hand to answer questions or concerns about prostate cancer, including those relating to early detection, risk factors, treatment and management of this disease. Alternatively, click onto the Lions Australian Prostate Cancer website, www.prostatehealth.org.au and 'Ask Andy'.

NEW GENETIC CAUSE IDENTIFIED IN PROSTATE CANCER DEVELOPMENT

SANTA MONICA, Calif., August 6, 2007 - Data from a new study implicates a specific genetic change as an underlying cause of prostate cancer development, according to a report published August 1, 2007, in *Nature*. The finding revealed that prostate cancer really is a set of different cancers that are "turned on" by a common "master switch" gene.

The ground breaking work at the University of Michigan focuses on a specific type of genetic mutation known as a gene fusion, in which pieces of two adjacent chromosomes fuse together. The study, carried out in prostate cancer cell lines and animal models, received critical initial funding from the Prostate Cancer Foundation (PCF), the world's largest philanthropic source of support for prostate cancer research.

"The PCF played a key role in providing funding for the animal models in the prostate cancer gene fusion described in this study," noted lead author Arul M. Chinnaiyan, MD, PhD, Director, Michigan Center for Translational Pathology and the S. P. Hicks Endowed Professor of Pathology at the University of Michigan. Chinnaiyan has reported publicly that without the PCF funding the work could not have happened. "Continued support in this area will help us understand how these potentially causal molecular alterations in prostate cancer can be therapeutically targeted in the future. We are grateful that, in addition to their previous funding, the-Prostate Cancer Foundation has recently issued a \$1 million challenge to our team to raise a total of \$2 million to accelerate this pioneering research."

Chinnaiyan's team has found six genes 'that fuse with two others, 'called ERG or ETV1, to cause prostate cancer. The genes act as a switch, much like a light switch. When they studied lab-grown prostate cancer cells, they found these genetic changes accounted for 60 percent to 70 percent of human prostate cancer.

The University of Michigan is involved in developing a new prostate cancer test that has been licensed to San Diego-based Gen-Probe Inc., They are working on a screening tool to detect gene fusions in urine. The tool could one day supplement or replace the prostate specific antigen, or PSA, test currently used to screen for prostate cancer.

Knowing which gene fusion is involved is essential to understanding and predicting how to treat the disease. The PCF is currently funding additional research on these gene fusion questions.

"The PCF finds talented investigators with novel approaches and gives them 'venture capital' to test out their ideas," said Jonathan W Simons, MD, Chief Executive Officer and President of the PCF. "We are proud to have helped Dr. Chinnaiyan jump start his research .and to have played a role in spurring an entirely new avenue for prostate cancer research. We look forward to working with Dr. Chinnaiyan and his team on further exploring the significance of this discovery in the coming years." (*from Prostate Cancer Foundation*)

NEWS FROM THE CHAIR REPORT TO SAC

SUPPORT AND ADVOCACY COMMITTEE

Discussion on our views and requirements resulted in the following Board decisions for action:

- One additional professional staff member would be employed to support our activities
- Funding was allocated for Lobbyist services in Canberra in support of advocacy action, e.g. supporting Taxotere applications for inclusion on approved lists for government funding through PBS
- Allocation of funds raised by Cbus for Support Group activities. The second in-person SAC conference this year – to be held in Adelaide – would be funded from that source

MOvember

Three of MOvember's four Directors joined the Board around 8.00pm. The considerable funding received by PCFA in 2007 as a result of the 2006 MOvember event will be significantly exceeded, to the budget figure of \$5M in 2008. This magnificent donation is a major enabler for significantly increased activity and service provision by PCFA commencing right now.

Discussion on MOvember's expectations and PCFA commitment has now resulted in a MOU being signed by both parties that will guarantee funding for a further 3 years.

We understand that building on its success in Australia, the MOvember organization is expanding its activities – initially into the US, the UK, Spain and Canada, in support of Prostate Cancer activities in those countries.

Women and cats will do as they please, and men and dogs should relax and get used to the idea.

MONEY ISSUES STRAIN MARRIAGE AFTER PROSTATE CANCER TREATMENT

By Anne Harding

FRIDAY, June 29 (Reuters Health) - For men with prostate cancer, lost work income and increased health care costs can have a damaging effect on their marriage, Swedish researchers report.

It's likely that the expenses involved in treating prostate cancer have an even larger impact on marital quality for men living in countries where health care is much more expensive than it is in Sweden, for example the United States, Gunnar Steineck of the Karolinska Institutet in Stockholm, the study's lead author, told Reuters Health.

He and his colleagues sought to identify factors affecting the marital quality of men diagnosed with prostate cancer by surveying 426 men between the ages of 50 and 80. All had been diagnosed with the disease in 1999, and were still living in late 2002.

Nearly 40 percent said that having prostate cancer had worsened the quality of their marriage. Men who reported spending more money due to the diagnosis, who accounted for 46.2 percent of the group, were 50 percent more likely to report reduced marital quality. The 55.4 percent who said their income had shrunk after being diagnosed were also at 50 percent greater risk of lowered marital quality.

And the 46.3 percent of men who developed erectile dysfunction after being treated for prostate cancer were nearly four times as likely to say their marital quality had fallen due to the disease.

For men with prostate cancer, lost work income and increased health care costs can have a damaging effect on their marriage

percent of men who developed erectile dysfunction after being treated for prostate cancer were nearly four times as likely to say their marital quality had fallen due to the disease.

Men younger than 70 were more likely than older men to say their marriages had gotten worse after their prostate cancer diagnosis, as were those who reported being depressed or having urinary leakage.

Couples may be able to keep their marriage healthy by discussing potential issues related to the disease soon after a prostate cancer diagnosis, Steineck said. "There are many causes and reasons for you to get depressed mood and have problems in your marriage," he said in an interview. "It might be wise to go through them one by one just to clarify your situation."

He added: "The code word today is empowerment -- you can use this to improve your own situation."

SOURCE: /BJU International/, June 2007. Reuters Copyright © 2007 Reuters Limited. All rights reserved. NewsPulse <<http://www.prostatecancerfoundation.org/subscribe>>

NATIONAL REFERENCE GROUP FOR PROSTATE AND TESTICULAR CANCERS

Our National Reference Group for Prostate and Testicular Cancers met in Sydney on 13th June. Members identified barriers and issues across many areas of the continuum of care, particularly the lack of screening, treatment issues and psychosocial support for men with these cancers and their caregivers.

Cancer Australia is using the advice provided by the National Reference group and will work collaboratively with existing programmes and stakeholders where possible to improve outcomes nationally for men with prostate and testicular cancers. (from Cancer Australia Connections, Aug, 2007)



AN IMPORTANT MESSAGE FOR BLOKES

**Prostate Cancer Call-in
13th September 2007, 6-9pm**

For the cost of a local call anywhere in Australia, talk to our experts about risk factors, early detection, treatment and support
www.prostatehealth.org.au

Call The Cancer Council Helpline

13 11 20

The Southern Fleurieu Cancer Support and Resource Group Inc. has a new home at 2 George Main Road, Victor Harbor (behind the Christian Gospel Centre and Victor Harbor Library/Civic Centre).

The new building is "theirs", and they will no longer have to share premises with other organizations. With all necessary facilities and room to locate all of their equipment, they are extremely pleased, and have many plans for future uses for the building. Opening times are Monday - Friday, 10.00am to 4.00pm. Visitors are welcome, and I am sure that they would welcome any of our members who may be on a day-trip to Victor Harbor.

Their Spring Garden Festival will be held on 14th, 21st and 28th October, and 4th & 11th November - consisting of 15 private gardens open for public visitation.

Newsletter compiled by
Trevor Hunt