



Prostate Cancer
Foundation
of Australia

PROSTATE SUPPORTER

The newsletter of the Prostate Cancer Support
and Action Groups of South Australia

May 2008

<http://www.prostate.org.au>

Call to trigger new lobbying campaigns

To voice the concerns of prostate cancer sufferers, support groups have been asked to raise issues for national lobbying.

PROSTATE Cancer Foundation of Australia ambassador Dean Wall is in the process of contacting all the known prostate cancer support groups in Australia, to catalogue their primary concerns for issues that require lobbying.

His quest for information starts with a request to all South Australian group members through the *Prostate Supporter* newsletter.

At the national group's Support and Advocacy Committee meeting earlier this year, Dean was asked to solicit from support groups and their members any matters that they felt were worthy of activism, along similar lines as last year's successful campaign for reinstating prostate cancer treatment drug Taxotere to the federal Pharmaceutical Benefits Scheme.

Dean is requesting all support groups to consider potential



Dean Wall

lobbying issues within discussions at meetings during the next few months. One example of a pertinent issue that Dean offers is lobbying for the reinstatement of Caverject injections to the drugs covered under the Pharmaceutical Benefits Scheme.

Any matters that support groups agree should be identified for action should be sent to Dean, who will refer them to the national committee for consideration.

Dean Wall's postal address is 1 Hillside St, Greenhill, SA 5140, and his email address is: ddoutside@picknowl.com.au

Support group commences in Kingston South-East

AN inquiry from Bob Hancock through the Cancer Council of South Australia has led to the formation of a new prostate cancer support group in Kingston South-East.

Prostate Cancer Federation of Australia Ambassador Dean Wall traveled to Kingston in April to conduct a presentation for the Lions Club of Kingston, at which he stressed the important role that support groups play through all the phases of the prostate cancer journey, from detection, diagnosis and treatment to the subsequent impact on the lives of sufferers and their families.

A general health-oriented support group already existed in Kingston, which met only periodically and offered nothing specifically focused on prostate cancer.

Dean was able to supply literature and advice to encourage and facilitate the formation of a local group.

The inaugural meeting of this new Kingston and Districts Prostate Cancer Support Group will take place on May 8 in the Kingston Emergency Services building.

in brief...

A NATIONAL conference focusing on prostate cancer issues is being planned for November in the Gold Coast by the Prostate Cancer Foundation of Australia. The inaugural Australian Prostate Cancer Conference (and Men's Health Forum) is an event that organisers hope will stretch over two or three days, with contributions from international researchers and government authorities. More details will be published in this newsletter as they become available.

CONTRIBUTIONS to these newsletters from all Support Groups and members are welcomed; send items and images by email to prostate-news@fosterhill.com.au

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99
or visit the website www.prostate.org.au

**COMING
EVENTS****ACTION GROUP
MAY MEETING**

The next Prostate Cancer Action Group meeting will be held in the upstairs meeting room, Cancer Council SA building, 202 Greenhill Road, Eastwood, at 5.30pm on Tuesday May 13. Enter via the back stairs. New members are most welcome.

JUNE – International Men's Health Week is being staged from Monday June 9 to Monday June 16.

NOVEMBER – The inaugural Australian Prostate Cancer Conference (and Men's Health Forum) will be conducted from Saturday November 15 to Monday November 17. The conference will be held on the Gold Coast (location to be advised).

Also, get ready to grow a Mo in November to help raise funds for prostate cancer research.

• For more information about the Action Group, visit the South Australian Prostate Cancer Action Group's dedicated website, with detailed archives containing its newsletters, at <http://www.pcagsa.org.au>

Action group speaks loudly with wise words

The Mt Lofty Prostate Cancer Awareness events continue to draw crowds, as Jeff Roberts and Dean Wall report.

IN the continuing two-year series of prostate cancer awareness evenings in the Mt Lofty region, the fifth event was held in the Stirling RSL clubrooms on April 23. Organised by the Prostate Cancer Action Group and sponsored by the Masonic Lodge as part of their men's health initiative, the event attracted more than 60 people – an excellent outcome, especially considering this was the second event held in this venue within the past year.

Urologist Dr James Aspinall, and Dr Graham Lyons, from the University of Adelaide, spoke at the meeting. Dr Aspinall presented an excellent overview of prostate problems, focusing particularly on prostate cancer, while Dr Lyons spoke on dietary factors influencing health, emphasising the role of dietary selenium in combatting prostate cancer.

Prostate cancer sufferers Bill Toop and Barry Ferris also addressed the group, speaking of their experience of the disease and their journey through diagnosis, treatment and their subsequent adapted lifestyle.

Bill provided an outstanding and especially powerful insight when he declared that he rejected ownership of the cancer. "I don't have prostate cancer, I have a prostate which has cancer problems," he said, "and I'm going to do

Figures show alarming lack of prostate progress

A New South Wales report on the Incidence, Mortality and Prevalence of Cancer offers some fresh statistics on prostate cancer. Prostate cancer has increased from representing 12 per cent of all male cancers in 1992 to 31 per cent in 2005. It is now estimated that one in seven men will develop prostate cancer by the age of 75.

The report also shows that the total NSW research spend on all urogenital cancers (including prostate cancer) was \$3.6 million in 2006, while \$8.6 million was spent on breast cancer in the same year. It's little wonder that not much progress is being made with prostate cancer.

The details of this report can be viewed online at www.cancerinstitute.org.au

everything necessary to get rid of them."

The session concluded with an active and animated question time, while a range of selenium enriched products that Dr Lyons had on display also created great interest.

More than 500 people have now attended prostate cancer information events presented by the Action Group, though it would be great if more people could make time available to assist the group deliver further awareness events throughout the State.

FOUNDATION DAW PARK

DOCTOR Carole Pinnock has received a research grant from Foundation Daw Park – established in 1990 to

provide funding, facilities and equipment to support world-class medical research and patient care at the Repatriation General Hospital. Dr Pinnock's project is "Prostate Cancer: Unmet needs of men and families using an online helpline".

NATIONAL CONFERENCE

THE Gold Coast will be the location for the first Prostate Cancer Conference and Men's Health Forum.

Organisers sat that many clinicians, speakers and researchers from around the world, corporate partners and government authorities will be called on to participate and contribute. More details will be published as they come to hand.

Prostate Cancer Support and Awareness: ADELAIDE GROUP

COMING EVENTS FOR 2008

The Adelaide Group meets on the third Monday of each month, in the Park View Room of the Fullarton Park Centre, 411 Fullarton Rd, Fullarton.

Monday May 19th

Guest speaker will be Dr Mary Brooksbank, director of the Palliative Care Unit at the Royal Adelaide Hospital.

Monday June 16th

Guest Frances Combe, President of the SA Voluntary Euthanasia Society, will speak about medical wills, health wishes, voluntary euthanasia as an option of last resort, and the prospect of this being enacted in SA with defined safeguards.

Monday July 21st

General discussion evening concerning prostate cancer.

Monday August 18th

Guest speaker will be urologist Mr Denby Steele, who will give a lecture on Brachytherapy and the latest developments in this field.

• For more information, visit the Adelaide Group's dedicated website at www.psaadelaide.org or contact group president Phil Davis (phone 8263 2217), or secretary Ian Fisk (phone 8296 3350).

Dietary advice to aid cancer conditioning

Consuming plenty of fruit and vegetables is a simple way of helping to fight prostate cancer, as Phil Davis reports.

THE Adelaide Group's April meeting, which attracted 40 members, featured an excellent powerpoint presentation by Belle McCaleb, a qualified naturopath, herbalist, nutritionist, counsellor and registered nurse. She has worked as a registered health professional for more than 20 years, and since 2003 has worked at the Cancer Care Centre (76-78 Edmund Ave, Unley, phone: 8272 2411).

Belle's presentation on nutritional medicine that is appropriate for prostate cancer support reflected what mothers have been saying to children for generations – eat plenty of vegetables and fruit, because they are good for you.

Belle emphasised that organic produce, especially vegetables, are low in kilojoules, high in fibre and packed with vitamins, minerals and antioxidants.

Most people don't consume sufficient amounts, though eating a great variety of vegetables will reduce your risk for many of the chronic diseases.

Prostate cancer appears to be more strongly linked to diet and nutrition than any other cancer.

The effect of dietary factors may be related not only to the likelihood of developing the disease, but perhaps also affects the rate at which the disease progresses.

WHAT FOODS INHIBIT PROSTATE CANCER

1. A plant-based diet, especially cruciferous vegetables – PSA doubling time increased from 6.5 to 17.7 months over a four-month plant-based diet and stress management intervention. Men who consumed 28 servings of vegetables weekly had a 35 per cent decrease in prostate cancer compared to men eating 14 serves.
2. Omega 3 fatty acids – Fish oil has protective effects against breast, colon and prostate cancer. A diet high in fish oil slows prostate cancer growth.
3. Lycopene and carotenoids – Prostate cancer inhibitors. A major source is cooked tomatoes, also found in watermelon and other vegetables.
4. Quercetin – Inhibits expression of prostate cancer cell androgen receptors, in vitro; found in garlic, onions, apples and other foods.
5. Sunlight (Vitamin D) – High calcium intake may lift prostate cancer risk by lowering Vitamin D levels.
6. Zinc – Essential for normal healthy prostate.
7. Green Tea – Inhibits growth in vitro and in vivo, has induced cell cycle arrest and apoptosis (programmed cell death) of human prostate carcinoma cells.
8. Curcumin – Potent inducer of apoptosis in androgen dependent and independent prostate cancer cells.
9. Pomegranate juice – Markedly slows the progression of prostate cancer.
10. Selenium – A mineral offering preventative and treatment roles, generally deficient in Australian soils and in our food.

WHAT TO AVOID

1. High meat and dairy intake – An association exists between meat, fat and dairy with prostate cancer and its progression.
2. High calorie intake – It may not be fat but high energy intake that is the critical factor.
3. Obesity – An association exists between body size/body fat and prostate cancer.
4. Omega 6 fatty acids – Stimulates androgen sensitive and insensitive prostate cancer cell lines.

COMING EVENTS FOR 2008**MAY 7 MEETING:**

Guest speaker Cynthia Edwards from the Cancer Council SA will talk about Bowel Cancer.

INFORMATION DAY:

Many thanks to all those who helped at the booth for the Prostate Cancer Information Day at Seaford Shopping Centre on Wednesday April 30. Further information days will be conducted through the Onkaparinga region this year, and continued help from members will be appreciated.

PREVIOUS MEETING:

At the March meeting, vice president Malcolm Ellis, also president of the Association of Prostate Cancer Support Groups SA, informed that a visit to one of the Country Support Groups will be on the agenda for the next Association meeting.

• For more information, visit the City of Onkaparinga Support Group's dedicated website at www.pcsog.org

• Special thanks to the City of Onkaparinga Support Group sponsors: Southern Primary Health Woodcroft, Port Noarlunga-Christies Beach RSL Sub Branch, Thaxted Park Golf Club Inc, The Original Open Market, and to all who provide valuable support to our group – especially the City of Onkaparinga Council.

Goodings spreads good news on cancer support

A high-profile cancer sufferer shared his positive outcomes with a keen audience, reports Group President John Shields.

On a wild and woolly night, a good crowd attended the Onkaparinga group's April meeting to hear the story of a very special cancer survivor, Channel 7 newsreader Graeme Goodings.

Graeme, a board member of ProstateSA, spoke openly about his bowel cancer journey, commenting (to much laughter) that while bowel and prostate cancer are not the same, they are in the same "neighbourhood, almost on the same street".

He was first diagnosed by chance, after serious indigestion caused him some agony. During a run of tests in hospital, and a later colonoscopy, colon cancer was discovered. His reaction to the diagnosis was familiar to many cancer sufferers – disbelief.

Being a journalist and inquisitive by nature, he wanted to find out as much as possible about bowel cancer, and sought multiple treatment options from two surgeons, two radiotherapists and three oncologists. As Graeme and his wife are involved with complementary medicine, they had to find experts who were comfortable with him using both complementary and conventional treatments.

Graeme underwent a six-hour operation, though the hospital staff had him up for a shower within eight hours of the operation. The three-



Graeme Goodings

week recovery time involved having a tube insertion in his stomach. He lost 17kg and was left looking gaunt and drawn.

He emphasised the necessity in believing your chosen treatment, and the importance of using the power of the mind to work through the treatment.

A strong diet and exercise regime also greatly assisted Graeme's tolerance of his radiation treatment.

Graeme spoke of a talk he witnessed by Professor Robert Newton from Western Australia* on the benefits of exercise for physical recovery – during treatment, after treatment and continuing through your life.

His studies showed the weight bearing exercise proved of great benefit to cancer patients recovery rate and also the

chances of re-occurrence, seemed to be reduced.

Graeme had to use a colostomy bag for six months, and after it was removed had many instances of rushing to the toilet.

Graeme's advice now to all men facing cancer threats is simple: become an expert in your disease, because doctors have many other patients and can't know everything about your disease, but you can.

He suggests doing research on the Internet, to read extensively, be proactive by asking questions, (and keep asking them until you get a satisfactory answer), and to keep a diary of your disease history, noting all questions and answers.

Graeme has recovered successfully, but still has a problem with some foods, such as red wine, with his body quickly telling him what he could not eat.

"Cancer is a journey," said Graeme. "If you are diagnosed with it, you are certainly not the first and are not going to be the last. We can all find strength in each other."

* *Presentations by Professor Newton and Graeme Goodings are featured on the Surviving Cancer in Rural & Regional Australia DVD, which is available from the Onkaparinga Support Group's library.*

Mitcham Prostate Cancer Support Group

Encouraging speedier action on incontinence

We squeezed them all in at the Mitcham group's April meeting, and the crowd agreed it was worth it. An excellent presentation with powerpoint visuals from guest speaker Dr Samantha Pillay enlightened us all on continence matters.

Dr Pillay, the only practicing female urologist in South Australia, focused her presentation on male incontinence after prostate surgery, but also discussed incontinence issues that affect women.

She reminded us that at birth we are all incontinent. Through early childhood, we are required to control the release of our bladder – and unfortunately, as many of us get older, the incontinence problem returns.

Beyond such age-induced occurrences, incontinence is common among men who have undergone surgery for prostate cancer.

However, statistics identifying this problem are not accurate, with different research results indicating anything from 1 per cent to 60 per cent of men suffering incontinence after surgery.

Delays in treating incontinence occur for several reasons. Men don't seek treatment as soon as they should because they are waiting to recover from surgery, waiting for subsequent cancer treatments, didn't have incontinence treatments discussed or offered, and are embarrassed by the condition.

Incontinence has a profound impact on sufferers, affecting their self esteem and quality of life, daily activities, work behaviour, intimacy; social activities and general health.

Dr Pillay explained that several surgical and non-surgical treatment options

are available to sufferers, such as injections and surgically implanted urinary slings and artificial sphincters, together with non-surgical treatments directed at behavioural and dietary modifications.

Dr Pillay's excellent 45-minute presentation and subsequent question session answered many queries that group members had about this problem.

In other matters at the meeting, several members provided updates on their current situation which was received with great support from the other members.

• For further information about this Prostate Cancer Support Group, phone Mitcham group chair Terry Harbour on 8271 0513, Jeff Roberts on 8277 3424 or visit the Mitcham group's dedicated website at www.psamitcham.org

COMING EVENTS

THE next monthly meeting of the Mitcham Support Group will be held on May 22, in the Colonel Light Gardens RSL Clubrooms, at 4 Prince George Parade, Colonel Light Gardens.

Guest speaker will be Dr Lloyd Evans spoken before to our group and he gives excellent presentations not only on health related matters, but other topics of interest.

JUNE: The guest speaker will be Dr Graham Lyons, a research scientist with the University of Adelaide, presenting a talk on the relationship between diet and Prostate Cancer.

AUGUST: Availability problems with the venue has forced a change to be August meeting date, which will now be held on Thursday August 21.

• For more information, visit the Mitcham Group's dedicated website at www.psamitcham.org

Research findings and news items from around the world ... Submitted by Trevor Hunt

Progress through new prostate cancer tests

A STUDY of 10,000 men, including 2500 Australians, has identified seven new genetic mutations linked to an increased risk of prostate cancer.

The findings, by British and Australian researchers, could one day lead to a genetic test to predict which men are susceptible to the most

aggressive and deadly forms of the disease.

Graham Giles, from the Cancer Council Victoria, who led the Australian team, said the results were exciting.

"[They] will help us to more accurately calculate the risk of developing prostate cancer and may lead to the development of better targeted

diagnosis and treatment," he said. Two other studies, which have also published in the journal *Nature Genetics*, identified at least three other new genetic mutations linked to the disease.

John Hopper, of the University of Melbourne, said that compared with other common cancers such as

breast and lung cancer, very little is currently known about how prostate cancer develops in the body.

"These results will greatly improve our knowledge of this important disease," Professor Hopper said.

• Source: *The Sydney Morning Herald*, 12/2/08.

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McLaren Districts Prostate Cancer Support Group

Big benefits about regular exercising discussed

FOR the April meeting of the McLaren Districts Group, local physiotherapist Patrick Fitzgerald delivered an interesting talk on the benefits of maintaining a healthy body and general health for people aged over 50.

A focus was put on the benefits of regular vitamin D intake that can be obtained from walking 15 minutes a day in the sunshine, accompanied by some form of calcium intake. Such activity can help prevent or delay the onset of osteoporosis in the elderly.

Regular exercise can also help prevent falls that become quite common among the elderly. Exercising against gravity helps maintain muscle density and endurance. Maintaining good balance can be achieved through simple exercises done regularly, such as standing on one leg to put on trousers rather than sitting down to perform this task, or by spending a few minutes each day standing on a pillow.

Group members enjoyed the opportunity to discuss numerous health topics. A scientific explanation was

offered for that eerie feeling that many people experience in joints when a change of the weather is anticipated. Discussion also included such topics as the cause of sciatica, pain in scar tissue and pelvic floor exercises to help control incontinence before and after radical prostatectomy surgery.

For the group's next meeting, local chiropractor Dr Joseph Charles will distinguish the differences between the work of a physiotherapist and a chiropractor.

Bryan Hearn
Group organiser

COMING EVENT

Thursday May 22

The McLaren Districts group will next meet in the Administration building at the rear of the McLaren Vale & Districts War Memorial Hospital, Aldersey St, McLaren Vale, at 7pm on Thursday May 22. Anyone planning to attend should contact Bryan Hearn on 8323 7924 or 0410 539 274 to confirm these details and their attendance.

Barossa and Gawler Prostate Cancer Support Group

Group makes several changes for the better

AFTER 10 years, the Barossa/Gawler Group enjoyed a refreshing change to its monthly meeting format by staging it during an afternoon in a member's rear garden – at Margaret and Robert Reimann's Greenock home.

With most members no longer constrained by employment demands, daytime meetings are being trialled.

The meeting was also conducted by joint chairs Robert Reimann and Alan Hall, with a newly purchased tape-recorder taking the place of the minute secretary. These measures, and a reduced number of meetings, have allowed the group to continue servicing two regions that are experiencing significant population growth.

Guest speaker Vikki Boulton,

a dietitian working for Barossa Health, defined healthy eating as eating a wide variety of foods from all food groups, saying the biggest proportion should come from plant-based foods, with smaller amounts of meat and dairy foods.

Other foods should be eaten infrequently, such as biscuits, cakes, pies, lollies and soft drinks, as they contain far too much sugar and fat. Approval was given to wine and dark chocolate for their anti-oxidant qualities.

Wholegrain bread provides roughage and fibre, as well as vitamins and minerals that are not present in the central part of seeds used for white bread.

Consumption of fruit and vegetables should be a daily ritual – two serves of fruit



Barossa and Gawler support group members enjoy the afternoon meeting in Greenock.

and five of vegetables. Three daily serves of dairy foods that provide calcium and protein might comprise one cup each of milk and yoghurt, and a slice of low-fat cheese.

Meat provides protein, zinc and iron, but most people consume far more than the 200g maximum needed each day. Fish consumed two to three times a week provides sufficient omega fat.

To help prevent the onset of cancer and reduce unpleasant side effects of cancer treatment, Vicki suggested eating small meals more frequently and maintaining stable weight by

balancing energy input with energy output.

At the meeting, new member Barry was welcomed. Low-dose brachytherapy treatment about 18 months ago saw Barry's PSA reduce to 0.4, though his most recent test showed a significant increase and supplementary treatment is being considered.

The next group meeting on May 27 will be an open discussion to share information and ideas. A venue in Gawler is being negotiated for this meeting and arrangements will be published in next month's *Prostate Supporter* newsletter.

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or visit the website www.prostate.org.au**

Protein in soy traps prostate cancer

MEN who live in countries with high soy consumption are less likely to die of prostate cancer than men in countries with traditional western diets.

Genistein, a protein from soybeans, has been found to keep prostate cancer cells from spreading in test-tube studies.

A study led by Dr Raymond C. Bergen, director of experimental therapeutics for the Robert H. Lurie Comprehensive Cancer Center at Northwestern University in the US, shows that genistein fights human prostate cancers implanted in living animals.

The soy compound doesn't make prostate cancer go away. It doesn't even make prostate tumors smaller. But it does keep the cancer cells from spreading through the body.

Like some other cancers, prostate cancer is not deadly unless it spreads through the body -- a process known as cancer metastasis.

"These impressive results give us hope that genistein might

show some effect in preventing the spread of prostate cancer in patients," stated Bergen in a news release. "Now we have all the preclinical studies we need to suggest genistein might be a very promising chemopreventive drug."

A 2003 human study showed that when men with prostate cancer took genistein preparations, their blood levels of genistein reached concentrations that had anticancer effects in the test tube. These same genistein blood levels protected mice in the current study.

A larger clinical trial of genistein is currently underway. Other researchers are studying the compound's effectiveness in patients with breast cancer, kidney cancer, endometrial cancer, pancreatic cancer and melanoma.

Bergan and his colleagues reported their findings in the March 15 issue of *Cancer Research*.

Source: *National Prostate Cancer Coalition, US.*

Heart attack risks rise after prostate cancer diagnosis

A NEW study has suggested that men who are diagnosed with prostate cancer are more likely to have a heart attack, or what is known in medical circles as cardiovascular morbidity.

It is known that emotional stress is linked to CV morbidity and mortality – incidents such as earthquakes, the loss of a child, or even during World Cup soccer matches.

The activation of powerful emotional triggers result in physiological responses on the vascular, inflammatory and immune systems.

Such severe physiologic changes can later aggravate existing comorbidities or even initiate new ones.

For the analyses of this oncology study, the researchers made use of many Swedish registries. A cohort study was designed for men older than 30 years, which identified four million men.

In the first year after

prostate cancer diagnosis, fatal CV events among men diagnosed with prostate cancer was 15 per cent higher than those without a prostate cancer diagnosis, and non-fatal CV events were 13 per cent higher.

These relative risks decreased during more recent time periods that were studied, possibly reflecting better medical management over time.

Therefore, it was found that men diagnosed with prostate cancer are at increased risk of both CV morbidity and death within the first year after their diagnosis. Men younger than 54 years are at greatest risk.

The researchers believe the discovery of this stress-induced health risk warrants further study.

• *This study was presented by F. Fang at the American Society of Clinical Oncology 2008 Genitourinary Cancers Symposium.*

Cyberknife offers radical new treatment option

PROSTATE cancer patients in the US are being offered a non-invasive treatment option that combines surgery and radiation.

Clayton Twigg was among the first patients to have surgery performed by this new state-of-the-art robot, called the cyberknife. "The hardest part was trying to lie still for 90 minutes," Twigg said.

The device is so advanced it can target tumors in the lungs, liver, kidneys or prostate that move when a patient breathes.

A physics team maps where nearly 300 beams of radiation enter and exit the prostate.

"It allows us to conform the radiation dose exquisitely to the prostate and minimise side effects to organs next to the prostate, such as the rectum and

the bladder," says Dr Douglas Einstein, of US University Hospitals. "We do run a risk of damaging the tissue outside the prostate as well but because the cyberknife is accurate to less than one millimetre, we feel that risk is lower."

The cyberknife process is faster than conventional surgery. What normally would take eight weeks, the

cyberknife does in five days. "Patients don't have to come in everyday for two months. They can come in every day for five days and get the same equivalent radiation treatment," says Dr Einstein.

The cyberknife may also help certain patients that are not candidates for surgery.

Source: *National Prostate Cancer Coalition, US.*

Hot research uses curry to fight cancer

SCIENTISTS in Perth are using nanotechnology to tweak the anti-cancer ingredient found in turmeric, a spice featured in Indian curries, so it remains in the body and has the chance to work for longer.

Research suggests this ingredient can slow the spread of cancer and help other illnesses, ranging from heartburn to arthritis.

However, researchers at the University of WA's Centre for Strategic Nano-Fabrication say the problem is that curcumin, another ingredient used in curries, is not easily absorbed by the body.

This prompted Green Chemistry final-year student Nigel Clifford to develop mesoporous silica capsules, with tiny pores to allow curcumin to be released slowly.

The centre's director, Professor Colin Raston, says this technology could be adapted to deliver prescription drugs to patients with better results and fewer side effects.

Raston says this method would overcome a dilemma faced by doctors giving drugs in high concentrations that could be toxic to the body, while giving them below a certain concentration means they do not work.

Source: *The West Australian*, 17/3/08

Profile of a patient's courage and suffering

In March, Adelaide Support Group chair Phil Davis introduced new prostate cancer group member Peter O'Connor. This is the story of Peter's continuing journey:

PETER O'Connor, who retired 10 years ago after working at General Motors Holden for more than 43 years, visited his GP in June 2003 and was asked if he had ever had a blood test for prostate cancer. After replying "No I'm too busy" he was given the test anyway – and a PSA reading of 8 was the result.

Peter, whose father was among six of eight siblings that died from cancer, was examined by a urologist in October 2003, and again in March 2004, by which time his PSA had risen to 10.

After a third urologist visit in June 2004 showed that Peter's PSA level was still rising, a biopsy was performed (on Peter's 66th birthday) that proved positive, although a bone scan appeared clear.

A radical prostatectomy was performed in September 2004, followed by a normal recovery. Peter's first post-operative PSA test in October 2004 showed a reading of 0.87, with a January 2005 test showing 1.16.

After completing a course of external beam radiotherapy, his PSA reading dipped to 0.03 and remained stable for about a year – but in October 2006 it rose suddenly to 20.8. Bone CT scans indicated two enlarged lymph nodes.

Peter began hormonal treatment with a Zoladex

implant, which gave him hot sweats and tiredness, but by January 2007 his PSA Reading had dropped to 3.8.

In April 2007, it lifted to 4.4, so he was given Cosudex in tablet form. Peter and his wife Pat went on an overseas holiday, although side effects left him extremely tired and his right leg became swollen, even though he wore surgical stockings.

Upon returning home, Peter's PSA test indicated a reading of 10.7. He stopped taking Cosudex tablets and was prescribed (Eulexin) Flutamide tablets, though these caused severe diarrhoea. He stopped taking them after 46 days.

A PSA test in November 2007 indicated a reading of 59.6, after which he started taking Anandron (Nilutamide) tablets, which produced side effects including a reaction from light to dark and an aversion to bright lights, especially car lights at night. He managed this problem by wearing Polaroid sunglasses. He must also limit himself to one occasional glass of wine to prevent a blotchy skin reaction and asthma.

Peter's right leg has continued to swell during the day. An ultrasound in January 2008 indicated he may have a lymph gland problem, while a PSA reading dipped slightly to 48.

In February 2008, Peter visited an oncologist, who advised him he was unable to be cured, but advised that many drugs can control Prostate Cancer and that it isn't unusual to change them during ongoing treatment.

Peter's previous X-rays did indicate that lymph glands on the aorta were enlarged, and it is possible this may be where the cancer resides.

Peter is still to have a further CT and bone scan, and he remains optimistic about his future. He still works in his garden, is making efforts to keep fit and enjoys the company of his loving family and friends.

Peter is prepared to discuss his illness with anybody who is interested – and by doing this he believes it may help others with similar problems.

"It is most important to remember that we are all different, and what may happen to one person may not necessarily have the same effect or result on another," Peter says. "We should listen to each other and, above all, discuss all of our concerns with our doctors."

• For further information, contact Adelaide Prostate Cancer Support Group president Phil Davis, Phone 8263 2217 or email classic100@bigpond.com