



Prostate Cancer
Foundation
of Australia

PROSTATE SUPPORTER

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

www.prostate.org.au

OCTOBER 2008 - FEBRUARY 2009

Volume 1: Number 10

New chapter begins for SA and NT groups

A meeting of office bearers marks the beginning of a new PCFA Chapter.

SINCE early 2008, the Prostate Cancer Foundation of Australia has experienced unprecedented growth. The number of affiliated support groups has grown by 15 to 81, with applications for another 22 that plan to commence. More men are being tested and diagnosed with prostate cancer, and they are also seeking the assistance of local support groups for peer support.

To enhance support group operations, the PCFA encourages the formation of Chapters with a management team known as a Chapter Council. By the end of 2008, there will be four Chapters: Queensland, New South Wales/Australian Capital Territory, Western Australia and the new Central Australia Chapter (comprising South Australia and Northern Territory).

PCFA's Paul Redman says this development allows support groups in these states and territories to have

a single, powerful voice to enter discussions with state governments, health providers and the media. The combined memberships will also help expand networks of support groups through major awareness events, and develop strong communication processes to share experiences and deal with common issues.

In dealing with the PCFA, each Chapter will be able to present a state budget, to enable further development of support groups within the chapter.

Office bearers for the new Central Australian Chapter are: Malcolm Ellis, chair (from City of Onkaparinga PCSG); Keith Williams, deputy chair (Darwin Prosper PCSG); Ian Fisk, secretary (Adelaide PCSG); Bryan Hearn, treasurer (McLaren Districts PCSG); Jeff Roberts, councillor (Mitcham PCSG); John Baulderstone, councillor (Mitcham PCSG); Terry Harbour, councillor (Mitcham

Newsletters can also be read
online at [www.pcagsa.org.au/
pages/supporter.html](http://www.pcagsa.org.au/pages/supporter.html)

SEASON'S GREETINGS

IT MAY seem a little early to be extending Christmas cheer, but this is the final **Prostate Supporter** newsletter for 2008, with the next edition to be issued in February 2009. Most of the South Australian support groups will be conducting their final meetings for this year during November, though some groups have special Christmas events planned – please check the Coming Events columns on each support group page in this newsletter for specific details, or contact your local support group.

On behalf of the Prostate Cancer Foundation of Australia, the **Prostate Supporter** newsletter team would like to wish all readers a safe, healthy and happy Christmas and New Year, and thank you for being so supportive of this publication in its first year of production. We look forward to serving you further during 2009.

CONTRIBUTIONS from all Support Group members to the newsletters are welcome; email items and images to prostate-news@fosterhill.com.au

PCSG); Dean Wall, councillor (Adelaide PCSG). A meeting of these delegates and other group representatives was held on October 27. After assessing the constitutional difficulties of bringing the NT into the existing SA Association, it was agreed to establish the Central Australian Chapter. This enables the NT and SA to combine, and allows any other

group to join if such need arises. Other matters include thoughts for a new emblem – possibly the PCFA blue ribbon with the SA Sturt Desert Pea and the NT Desert Rose.

“There is much work still to be done but I feel that with feedback from all support group members it can be done,” says new Chapter chair Malcolm Ellis.

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

COMING EVENTS

The Action Group will be conducting an information evening at Murray Bridge on November 6, with keynote speakers being urologist Dr Adrian Porter, and Dr Graham Lyons, who will speak on dietary factors affecting the disease.

NOVEMBER: The inaugural Australian Prostate Cancer Conference (and Men's Health Forum) will be held from Saturday November 15 to Monday November 17, in the Crowne Plaza Hotel, Royal Pines Resort, on the Gold Coast.

• 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>

Taking action to inform more people

The Prostate Cancer Action Group continues its program of successful awareness evenings, as Dean Wall reports.

AT the invitation of and with great support from the Victor Harbor Apex Club and Southern Fleurieu Cancer Support group, members of the Prostate Cancer Action Group conducted a highly successful Prostate Cancer awareness evening on Thursday, October 23.

More than 100 people attended the Lutheran church hall in Victor Harbor to hear keynote talks by radiation oncologist Dr Gowda and local GP Dr Batt.

Two prostate cancer survivors – local resident Malcolm Byrnes and Action Group member Ray Power – also shared the stories of their journey through the disease.

After providing a general overview of the disease and treatment options, Dr Gowda's presentation focused on the various forms of radiotherapy

available, including external beam and both forms of brachytherapy – seed implant and high density. His talk was laced with relevant graphical statistics, as well as illustrations and photographs showing the equipment and procedures in detail.

Dr Batt's presentation explained to the audience the methodology used in diagnosis and recommended treatment options.

He gave an indication of what to expect in the surgery when seeing a doctor about problems associated with the prostate, and used a series of statistical graphs and pathway charts to explore different options.

Both keynote speakers took questions from the audience during and after their presentations. Audience participation was animated and the range of responses

revealed that the amount of interest in the topic is high.

Malcolm Byrnes, who approached the local cancer support group with the idea of hosting this type of information evening, spoke of his experience with brachytherapy under Dr Gowda, and his subsequent recovery path.

Ray Power provided a different experience for the discussion by detailing his history of surgery and post-surgery life.

The evening concluded with a brief talk about the important role played by support groups in helping patients to cope with the disease and their treatments.

The Action Group will be conducting a similar type of information evening at Murray Bridge on November 6.

And now for something completely different ... a touch of humour

• HOSPITAL regulations required a wheelchair for patients being discharged. However, one elderly gentleman, already dressed and sitting on the bed with a suitcase at his feet, insisted he didn't need any help to leave the hospital. After a chat about rules being rules, he reluctantly agreed to be wheeled to the elevator. On the way down, he was asked if his wife was meeting him. "I don't know," he said. "She's still upstairs in the bathroom changing out of her hospital gown."

• Tom proudly walks into the kitchen wearing a new pair of boots, but his wife Mabel takes no notice. Annoyed, he ducks into the bedroom and strips naked except for his boots, then returns to the kitchen. "Notice anything?" he says, Mabel, looking nonplused, replies: "It's droopin', as usual." "That's cause it's lookin' at me new boots," says Tom. Mabel thought for second. "Shoulda bought a new hat."

• A kangaroo walks into a bar and orders a beer. The bartender says, "That'll be \$10." After a few moments, curiosity gets the better of the barman and he engages in further conversation. "You know, we don't get many kangaroos coming in here." The kangaroo looks up at him and replies, "At 10 bucks a beer I'm not surprised."

• Jokes can be sent in by Support Group members to prostate-news@fosterhill.com.au

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Prostate Cancer Support and Awareness: ADELAIDE GROUP

COMING EVENTS

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 November 17

Arthur Seager will speak on diet, supplements and healthy food, and prepare a prostate-healthy meal with his wife Kathie.

The Adelaide group will combine with the Mitcham support group to have a social **Christmas dinner** on **November 21** (see details on Page 5).

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

Members decide on two support groups

While the current Adelaide Group will continue, a new support group will start in Payneham, as Phil Davis reports.

THE October meeting of the Adelaide Prostate Cancer Support and Awareness Group was pivotal in declaring its future direction, and realising how it can continue to meet the needs, issues and expectations of all members and potential members.

After some enthusiastic and spirited discussion, it was decided by attending members that two support groups would evolve and co-exist.

The original Adelaide Group will continue to be based at the Fullarton Park Centre during 2009, with some current members and secretary Ian

Fisk remaining, and additional new leaders to be elected during the first meeting for 2009, on February 16.

Some members of the Adelaide Group – including current treasurer Arthur Seager and convenor Phil Davis – will form a new support group in the north-eastern suburbs, with meetings to be held at the Payneham RSL Clubrooms, 360 Payneham Rd, Payneham.

Arrangements for the inaugural meeting at this venue and a guest speaker have been finalised: the Payneham Prostate Cancer Support and

Awareness Group is scheduled to meet at 7pm on Tuesday February 17, 2009, and will convene on the third Tuesday of each month thereafter, from February to November.

As I will be involved in forming this new prostate cancer support and awareness group at Payneham, I am stepping down from my position at Adelaide, making this my last article on behalf of its members.

I wish to thank all members for their help, humour and assistance, and wish the Adelaide group every success for the future.

Dr Pinnock offers updates on prostate patient treatment outcomes

DR CAROLE Pinnock, principal research scientist in the urology unit at the Repatriation General Hospital, Daw Park, told the Adelaide group's October meeting that her staff are monitoring about 3300 prostate cancer patients to evaluate treatment outcomes, timeliness of care for men with elevated PSA, and to develop clinical guidelines for patients with advanced prostate cancer. She gave details of three principal areas of interest:

Diet and Exercise

MAINTAINING a prudent lifestyle is crucial to prevent heart disease and prostate cancer. Regular exercise and a diet that is high in vegetables

and low in animal fat are crucial to maintain a sensible weight. Patients with lower cholesterol levels generally enjoy a quicker recovery of sexual function after surgery, and also decrease the risk of cancer relapse. Research indicates that vegetables are far more beneficial than supplements. While no association has been cited between multivitamin use and the risk of localised prostate cancer, excessive use of multivitamins (more than seven times a week) can increase the risk of advanced and fatal prostate cancer.

Cryotherapy

THIRD-GENERATION Cryotherapy (freezing of the prostate by cryoprobes

inserted into the prostate using trans-rectal ultrasound guidance) now uses argon gas during the procedure, allowing more and thinner needles to achieve greater precision. This treatment can be used as a primary treatment of localised prostate cancer, salvage therapy after radiotherapy and focal treatment.

Cryotherapy kills cancer cells, decreasing PSA levels in patients. As a developing treatment, there is no information beyond five years to detail how effective this treatment process is. Complications can include impotence for up to 90 per cent of patients; incontinence for up to 19 per cent; bladder

neck obstructions for up to 55 per cent; and stricture for up to 17 per cent of patients.

Abiraterone

THIS new drug is in phase 3 trials in Australia and other countries, and is proving effective in prolonging life for men with hormone-resistant prostate cancer. Studies indicate that androgens remaining in the prostate tissue even after androgen ablation therapy may drive the progression of prostate cancer. Abiraterone works in a hormone-resistant cell because it blocks testosterone synthesis inside the cancer cell. Although not a cure, it has lowered PSA levels in hormone-resistant men.

**COMING EVENTS
FOR 2008****NOVEMBER 5
MEETING:**

Guest speaker will be Dr David Elder, urologist. This Support Group meeting will be held in the boardroom at Noarlunga Community Hospital, Alexander Kelly Drive, Noarlunga, on Wednesday, October 1 at 6.30pm.

**CHRISTMAS
BARBECUE:**

To replace the monthly meeting during December, the support group's Christmas barbecue will be held at the home of our patron, Artie and Juli Ferguson, 21 Tenterton Rd, Christie Downs. at 11am on Sunday November 23. Please bring your own drinks.

**FEBRUARY 4
MEETING:**

The support group's first meeting for 2009 will be held on Wednesday February 4 at 6.30pm. The group members will use this occasion to catch up with each other and to share stories in a round robin discussion evening.

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

Make certain you know about your medications

The complexities of taking multiple medications need to be clearly understood, as John Shields reports.

SANDRA Buttery, peer educator from the Council on the Ageing, emphasised to the Onkaparinga group's October meeting that we must be familiar with our medications – and know if one type of medication could clash with others being taken.

If you have any doubts, check regularly with a doctor or pharmacist to clarify your medication regime. While you should never share medicines, your partner should be aware of what all your different medications are for.

Here are some other helpful medication hints:

- Be careful when purchasing medications on the web. Check with your doctor first.
- Ring Medicine Line for more information about medicines. A pharmacist will ring you within a few hours.
- Tell your doctor if you do not want generic and it will be stated on the script. When you come out of hospital, you will have generic medicines: do not double up these with your own medicines.
- The active ingredient in generic medicine is exactly the same as with brand names, though some medicines will never be issued in generic form. Companies only release medications after a lot of research, with tight guidelines that pass safety standards.
- Have a home medications review. Ask a doctor or

pharmacist to do a home visit and check all your medicines. There is usually no cost involved.

- Do not dispose of old medicines that you find. Deliver them to a chemist; they may be useful in third world countries.

- Keep a list of your medicines on the fridge, and clearly mark your ambulance membership number, in case someone has to dial the 000 emergency number on your behalf.

- Dispelling a few myths, Sandra said it is safe to eat grapefruit while taking medicine for heart/blood pressure – though not at the same time, and it is safe to drink a glass of red wine (but not a pint glass!)

- Differences between Australian and overseas medicines are negligible, as medicines made in Australia are produced to very strict standards. Be aware that the strength of some overseas medicines may not be the same as Australian products.

GROUP LEADERS SURVEY

A 10-PAGE survey of Group Leaders will be completed and returned to the PCFA before the National Conference on November 15 to 17.

**NORMANVILLE
INFORMATION DAY**

THE support group's prostate cancer information table at the Normanville shopping centre,

organised by local resident Bill Griffen, was given an eye-catching addition when Bill dressed as a patient in the operating theatre. This great idea had Bill very busy handing out information. Thanks also go to Phyllis and Rosie for helping, and Noarlunga Community Hospital for the surgeon's clothing.

ELECTION OF OFFICERS

THE election of officers for 2009 will be conducted during the Onkaparinga group's November 5 meeting. Also at this meeting, Association chairman Malcolm Ellis will give members a report on the SA and NT teleconference on October 27, which discussed proposed changes to the association constitution, to enable McLaren Vale and the Northern Territory to join, and the future of the Association.

LIBRARY ADDITIONS

THE PCFA has provided more books for our library, many being duplicate copies of what we have. The PCFA has also provided all groups with a Support Group Handbook.

CHRISTMAS CHEER

ONKAPARINGA group's Christmas barbecue at the home of Artie and Juli Ferguson on November 23 has already been paid for, thanks to \$200 donated by Artie and \$40 from Ruth Dohnt. Final arrangements for the barbecue will be made at the Onkaparinga group's

Mitcham Prostate Cancer Support Group

Brachytherapy explained

Detailing the differences between several types of treatments proved most interesting to members, as Terry Harbour reports.

RENOWNED urologist Dr Denby Steele explained brachytherapy treatment to a large October group meeting that featured several new members: Sam, Barry, Jeff and Peter (Dr Steele also spoke to the Barossa and Gawler support group in October: See their report on Page 6).

Brachytherapy was first used as a treatment for prostate cancer in 1914. In the 1990s, the use of computer software and development of better surgical techniques allowed extremely accurate placement of seeds so that the entire prostate is hit with radiation.

Low dose rate brachytherapy treatment has several positives: it is convenient, can provide a higher radiation dosage, and side effects are more favourable than other treatments, causing minimal disruption to the patient. A good cure rate has also been recorded.

Before a patient can undergo this form of treatment, several criteria must be met: a patient must have a life expectancy of more than 10 years, has a low risk disease that is low grade and low stage (Gleason 7 or less, PSA 10 or less and T1/T2 cancer), the prostate must not exceed 50cc and there cannot be pubic arch obstruction. If these criteria are not met, the operation is not covered by medical benefits and could cost the patient at least \$20,000.

Dr Steele studied this treatment at a US training course in 2003, then introduced it at

Support groups join together for a special end-of-year celebration

THE Mitcham support group's final meeting for 2008 will be in November, taking the form of a social dinner – and the function will include members of the Adelaide support group as a combined Christmas celebration.

We have booked for an evening meal at the Colonel Light Gardens RSL club rooms, 4 Prince George Parade, Colonel Light Gardens at 7pm on Friday, November 21.

There will be about 26 Mitcham support group members and partners present, and we would enjoy many more members of

other support groups to join us. The RSL provides good meals at very affordable prices. We will probably be offered a choice of several main courses, costing about \$10 to \$12 each. If you are not on a diet, desserts cost between \$4 and \$5 each.

If you would like to book a seat at the combined group Christmas dinner, please contact Ian Fisk on 8296 3350 or Jeff Roberts on 8277 3424 by November 14, or Terry Harbour on 8271 0513 (or email harbour@adam.com.au) before November 8 to confirm numbers.

Calvary Hospital. It involves greater reliance on radiation oncologists, urologists, physicists, anaesthetists and nurses due to the complexity of the treatment.

Brachytherapy treatment involves several stages: volume study to map the prostate and provide a 3D picture, then the planning team provides exact locations for seed planting before the surgeon implants the radioactive seeds. Dr Steele says a successful

operation enables a PSA drop to 1.5 or less, with a “bounce” at 12 to 18 months. DRE examinations would be normal and symptoms would be resolved.

Dr Steele explained that high dose rate brachytherapy, (HDR) is for patients with higher risk cancer. It serves as a boost to external beam radiotherapy, which is an extended treatment.

The HDR can effectively reduce the external therapy

COMING EVENTS

MONTHLY MEETINGS

The next monthly meeting of the Mitcham Support Group – the first for 2009 – will be held on Thursday February 26, in the Colonel Light Gardens RSL club rooms at 4 Prince George Parade, Colonel Light Gardens, from 7pm.

• For more information on events and group activities, visit the Mitcham Group's dedicated website at www.psamitcham.org

by a few weeks, which is of significant benefit to the comfort of patients.

Similar to the low dose rate treatment, several criteria must be met by HDR patients: the prostate must be less than 60cc, with a peak flow rate greater than 3 ml/sec and comply with at least two of these factors: Gleason of 7-8, T2B, T2C or T3 tumour, and PSA between 10 and 30.

HDR is cheaper than permanent seed procedure and has a shorter duration of side effects. Unlike the LDR treatment, where the seeds are a permanent placement within the prostate, this treatment provides high dose radiation via removable needles for a fixed time in each position.

Barossa and Gawler Prostate Cancer Support Group

Technology's continuing advances

Valuable information from a urologist keeps members informed of advancements in treatment technologies, as Alan Hall reports.

THE over-riding impression left with members of the Barossa/Gawler Group at its October meeting was that increasingly sophisticated technology is constantly being used in the treatment of prostate cancer.

Our guest speaker, urologist Mr Denby Steele, is at the forefront of the technological revolution through his pioneering work with brachytherapy.

As reported in the September edition of *Prostate Supporter*, Mr Steele is the only urologist in South Australia qualified to treat patients with temporary high dose rate brachytherapy – though this treatment is appropriate for relatively few patients, and implanting permanent low dose rate seeds is a more common procedure.

Brachytherapy is often chosen because it is a single treatment that usually requires no more than an overnight stay

in hospital, with a favourable side-effect profile and likely to cause minimum disruption to a patient's life.

Mr Steele's team, including radiotherapists, radiation physicists and radiation therapists, work closely together to refine treatment and techniques through the two stages of brachytherapy treatment.

An initial volume study, which maps out the prostate and determines the number and positions of seeds required in the treatment, is downloaded onto a computer. The computer program generates pictures showing the loading pattern of these seeds, which enables the urologist to be able to place the seeds very accurately.

Technology plays a central part in high-dose brachytherapy when the urologist simultaneously positions hollow catheters with ultrasound guidance

while viewing the scene through a telescope inserted by a cystoscopy (this ensures that the needles don't perforate the bladder or urethra). The patient is then hooked up to the selectron, which is the source of radioactivity that is transferred to the prostate.

Technological advances have also been made with external beam radiotherapy treatment, with greater accuracy now achieved through the prostate being inserted with inert gold seeds to mark precise aiming points. Previously these points had been delineated by ink markers on the skin.

A CT scan locates the gold seeds and transfers this information to a computer, which then directs the beam exactly to the required points.

New technology has virtually eliminated risks of damage to the rectum which sometimes resulted from the previous treatment method.

COMING EVENT

NOVEMBER

MEETING: The final group meeting for 2008 will be a barbecue on Sunday, November 23, commencing at 12.15pm at Kroemer Park, a council-owned facility near Kroemer's Crossing, where the Barossa Highway crosses the railway line between Nuriootpa and Tanunda. Although the venue has been changed from previous years, other arrangements will be the same: bring a salad or sweet to share, and your own meat and drinks.

- The first meeting for 2009 will be a dinner meeting at 17 Hill Street West, Angaston, on February 17. Further information will follow before the event.

Research findings and news items from around the world

Submitted by Trevor Hunt

Painkiller usage linked to lowering PSA and prostate cancer risk

POPULAR painkillers such as aspirin and Nurofen are being investigated as a way to reduce the risk of prostate cancer after research revealed they cut levels of a common biomarker for the disease.

Researchers say it is still too early to know whether the lower level of prostate specific antigen (PSA) helps middle-aged and

elderly men ward off the disease.

While reducing PSA could slash the risk of prostate cancer by reducing inflammation, doctors say it should not be assumed that a lowered level of PSA automatically means a reduced risk of prostate cancer, because PSA levels can rise initially for reasons other than cancer.

The study of 1319 men aged over 40 who undertook the painkiller study at the University of Rochester, New York, under Dr Eric Singer, found that men who regularly used non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin and ibuprofen had 10 per cent lower PSA levels.

These results were

published in the journal of the American Cancer Society in its September 8 edition.

However, little is known about the relationship between NSAIDs and PSA, so the effect on the development of prostate cancer, regardless of PSA, was still unclear.

• Source: *The West Australian*, 10/9/08.

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McLaren Districts Prostate Cancer Support Group

Winning a politician's ear about improving male health matters

Having a Member of Parliament attend a group meeting provided chances to express health concerns, as Bryan Hearn reports.

THE opening comment from guest speaker Leon Bignell, local State MP for Mawson, rang quite a few bells with the audience gathered for the October meeting of the McLaren Districts Support Group. "Men are not good at looking after themselves," he said. "If we were cars, we would get much better treatment."

Speaking on men's health services in the southern suburbs, Leon used his personal example to illustrate his point; at 42 years of age, he has undertaken prostate cancer checks, but says he has been so busy he has not followed up by checking on the results.

This highlights a serious problem for men. It is no good having relevant check-ups if men do not properly follow through by obtaining results.

Mentioning recent efforts to improve men's health services, Leon informed members about the current SA Government Men's Health policy and highlighted some concerns. He explained how funding is being directed to programs training new doctors and nurses, and that private organisations are helping to raise big amounts of money for medical research – such as the E J Whitten Foundation, which recently extended beyond Victoria into SA.

Members raised several specific problems they have

Proposed PCFA changes explained to members

• **McLAREN Districts group organiser Bryan Hearn updated members at the October meeting on matters raised at the PCFA conference held in Adelaide on September 22. A brief explanation was provided on how South Australia currently has both "The Association" (of support groups) and "The Action Group", and that it is hoped within the next year to merge these two groups to form the Central Australian Chapter of PCFA, also including groups from Alice Springs and Darwin, and possibly Broken Hill as well.** It was very pleasing to note that no members were opposed to the McLaren Districts group becoming affiliated with The Association and the ongoing discussion to establish the PCFA chapter in SA or Central Australia as proposed.

encountered in the southern region, including parking difficulties at Flinders Medical Centre and public transport issues that affect getting to and from various hospitals, which are especially difficult for the more elderly community members. Leon was asked how the public could be better informed about exactly what transport arrangements can be made to get to and from hospitals for treatments.

Leon explained that several services exist, though the public are not always aware of the details. Comment was made about the good work undertaken by the Aldinga Aero Club under the name of Angel Flights – which is further supported by Angels on the Ground, meeting flights

and providing road transport to hospitals once the passengers have landed.

After praising work currently being undertaken by a mobile X-ray testing unit to help early detection of breast cancer, McLaren Districts group leader Bryan Hearn issued a challenge to Leon – attach an annexe to this testing caravan so that men could attend, possibly in company of wives being tested, and have a blood sample taken by a nurse. These samples could then be forwarded for a free PSA blood test, with results forwarded to participants or their doctors.

Since early detection of prostate cancer goes a long way to securing complete recovery, this introduction of a convenient mobile testing unit

COMING EVENT

**THURSDAY
NOVEMBER 20**

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 November 20.

Guest speaker will be Dean Wall, who will talk about the role undertaken by the SA Prostate Cancer Action Group.

Contact group president Bryan Hearn on 8323 7924 or 0410 539 274, to confirm your attendance and meeting details.

was seen as a simple way in which more PSA testing could be accomplished. Leon said he would follow up Bryan's challenge to include PSA testing in the mobile unit and provide more information after consultation with colleagues and the relevant Minister.

Since speaking at the group meeting, Leon has responded in writing to all problems that were raised by members during his talk. A copy of Leon's response will be tabled at the next McLaren Districts support group meeting on Thursday November 20.

Cancer research innovation at Flinders University

Cows play a role in cancer prevention for humans

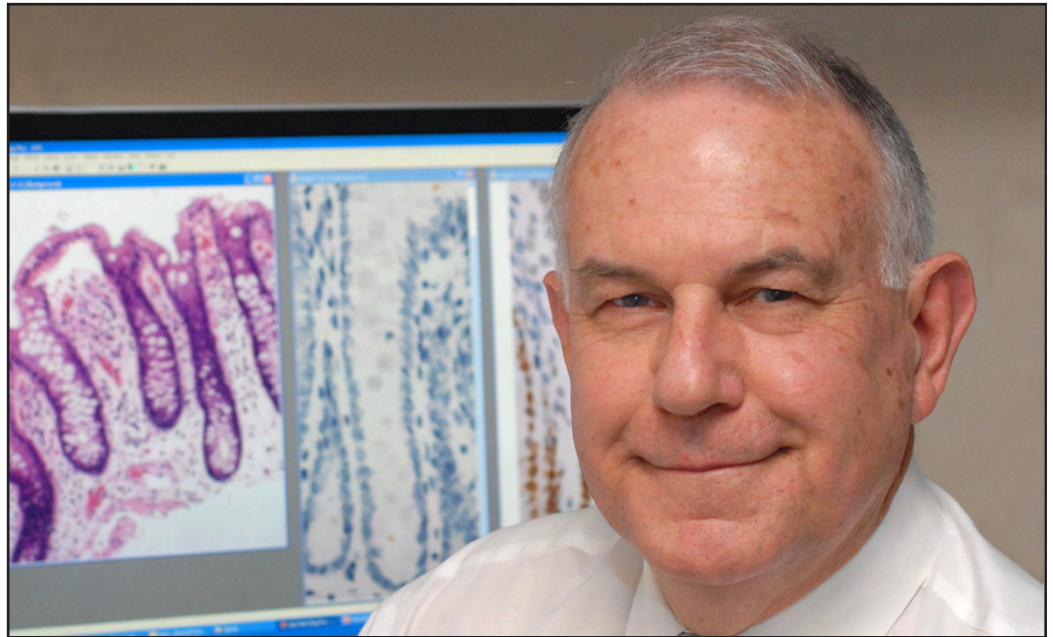
Studies on the effectiveness of selenium treatments by Adelaide scientists could produce a breakthrough on cancer treatments.

FLINDERS University researchers expect to soon have clear evidence that cows can help boost the anti-cancer properties of the natural trace element, selenium.

In a ground-breaking human trial currently underway, a research team led by Professor Graeme Young is testing the beneficial impact that selenium delivered through cows milk has in preventing bowel cancer, compared with other forms of the dietary supplement.

The latest trial followed earlier research that confirmed selenium in cows milk could lift levels of selenium in the blood. The current study, involving 20 healthy South Australians, is trying to establish the extent to which the selenium is delivered to cells in the lining of the bowel for maximum effect.

Professor Young says various chemical and yeast-based types of selenium that are currently available over-the-counter at pharmacies as dietary supplements have varying degrees of absorption and impact on the body.



Professor Graeme Young, leading a Flinders research team. Photo by Ashton Claridge

“Those forms of selenium will differ in their capacity to change someone’s antioxidant status and capacity to prevent cancer,” says Professor Young.

“It just so happens that when you feed selenium to cows and they produce selenium-enriched milk, the selenium seems to be in a chemical form that is both highly absorbable into the body and also more effective in terms of preventing cancer.

“We are comparing the milk form of selenium with a yeast-form of selenium in this human study and looking to see how readily the selenium gets into the body.

“We are also taking biopsies from the lining of the bowel to make certain that the selenium is being delivered to the cells

lining the bowel. If we can establish that is occurring, then we will be more confident that selenium is going to regulate the cells lining the bowels in humans.”

The anti-cancer impact of selenium is achieved by the way it encourages the body to rid itself of mutated cells that might otherwise become cancerous.

Previous research by the team from the Flinders Centre for Cancer Prevention and Control – which was published in the June issue of the international journal *Cancer Research* – showed that selenium-enriched cow’s milk produced a significant cancer preventing effect in mice.

The focus of the selenium research by the Flinders University team is on cancer

prevention rather than the treatment of existing cancers.

“With the approach we are taking to prevention, you probably only need to achieve a slight, subtle effect with selenium for benefit to become evident,” says Professor Young.

“We are looking for the preventative effect in healthy people – and also watching for any potential side-effects but, so far, have seen no evidence of any negative effects.

“We will be able to reach an initial conclusion as to the likely benefits of selenium by December this year.”

Source: Cancer Research – Flinders University, August 2008. This article has been reproduced with permission of Flinders University’s Marketing and Communications Office.