

P.S.A. NEWSLETTER

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A Member of the Association of Prostate
Cancer Support Groups (SA) Inc.

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NEWSLETTER NO. 69

June '06 Newsletter including a report on the June Meeting,

held at the Burnside Memorial Hospital on 19.6.06. Thank-you to our sponsors: City of West Torrens Council, the Burnside Memorial Hospital, the State funded Volunteer's Support Fund, and the Federal Government's Cancer Support Groups Grant Program.

Our next meeting will be held on Monday 17th July at 7pm in four weeks time. Our speaker will be Dr. R. Gowda, from the R.A.H., who will talk about Brachytherapy. Roll Up!

Chair: Barry Oakley

Members present 44

Apologies: Gary, Trevor and Coralie, Jeff, Brian, John, Jeff, Mirilla, Pam and Rossand John.

New Members: Phillip Stanford.

Visitors from Quorn: We were pleased to welcome two of our country members from Quorn – Quentin and Margaret. Reg loaded Quentin with plenty of our brochures, pamphlets and Newsletters to spread around Quorn. Reg has a soft spot for Quorn as he was born there. Once a Quornite, always a Quornite, he says. (So that's what's wrong with him!)

It is with regret that we announce the passing of one of our members, Rod Brooks. Rod passed away on 22nd May with advanced prostate cancer at the age of 64. We have expressed our sympathy to his wife Lyn, and family. Rod and Lyn came along to some of our meetings some years ago. He was on our Newsletter mailing list.

Volunteer Awards:

Our President Barry Oakley, and Past Chairman of the Barossa Valley P/C Support Group, Alan Hall, are the two latest members to receive "Certificates of Excellence" Awards from the Minister for Volunteers, the Hon. Jennifer Rankin, M.P. Congrats to both Barry and Alan! These awards were certainly well deserved. Reg, Barry and Margaret and Jeff and Theban were all invited to the Volunteers shin-ding at the Festival Theatre on the Queen's Birthday Holiday and were entertained by members of the Festival Cabaret Concert, "Flat on your Bacharach". There was a full house of hundreds of State-wide volunteers at the performance. After various speeches, including one from the Governor, Her Excellency Marjorie Jackson-Nelson, tea and coffee and some good South Aussie wines were served to all the guests. A good time was had by all.

Awards:

Two of our prominent Eastern State members, David and Pam Sandoe, have just been awarded the Order of Australia Medal, for their work with men with prostate cancer. David is the Co-Chair of the Support and Advocacy Committee and a Director of the Prostate Cancer Foundation of Australia (the PCFA). Both he and Pam have helped run the Sydney Adventist Hospital Prostate Cancer Support Group for a number of years. **Congrats to both!**

The Association of Prostate Cancer Support Groups (SA) Inc.:

The Chairman, Gary Bowes, reports that for various reasons, (including the fact that he had fallen over and broken two ribs and injured his shoulder), planned seminars at Port Pirie and the Barossa Valley have been deferred. It is now hoped to have a seminar at Port Pirie on 1st August and at Nuriootpa on 15th August. These seminars coincide with those Support Groups monthly meetings. Gary also reported that some cheques have been posted out to some of the groups for re-imbusement of certain expenses over the last four months. This money is from the Federal Government's Cancer Support Groups Grant Program. *(I hope there is one in the mail for us – Reg)*

The Prostate Cancer Action Group (SA) Inc.:

Jeff Roberts has reported that the PCAG (SA) is well advanced in their plans to run their next Prostate Cancer Awareness night. This will take place at Clare on Monday the 21st of August and further information will be available in our July PSA Newsletter should any members wish to attend.

Malbec Wine: Free vines Give-a-Way

Do you remember our story in the October '05 issue of our PSA Newsletter on page 3? Well it was all about Wirra Wirra "Malbec" wine which is said to have higher concentrations of reveratrol, lycopene and other anti-oxidants. All these ingredients fight cancer. We tried a couple of bottles and it was pretty good. It is not available in bottle shops, but can be picked up at the Wirra Wirra winery, McMurtrie Road, McLaren Vale, if you are down that way. The wine is used for blending with other wines. Well here's one better! How would you like to grow your very own Malbec Grapes and

make your own wine? Our member, Eric Reuschle, has been dabbling in small vineyards for years and has a quantity of Malbec grape cuttings taken from 100 year old vines. He has been good enough to offer to bring about 30 or 40 to our next meeting and those members who are interested can have some for no charge and plant them in their own back yards. They need plenty of water to get established says Eric. The only condition is that Eric, Reg, Barry, John Mayes and Ian Fisk would like a small sample of your first vintage. Thanks very much Eric!

International Men's Health Week – 12th June to 18th June

Well, the International Men's Health Week came and went. Was there anything in the newspapers, Radio or TV about it? No! Reg rang "The Advertiser" to see if he could get a small 50 word letter onto the Letters to the Editor Page "talk back". No luck! He then tried the Internet as a last resort and sure enough, the Men's Health Week received a mention on about half a dozen sites? No mention was made on any of the talk back radio programs or local current affairs TV programs to my knowledge. Doesn't anyone in the media care about men's health such as prostate cancer, prostatitis, enlarged prostates, testicular cancer or even men's breast cancer (we get it you know)? Well I am afraid to tell you the answer is No! Men's health is just not newsworthy. It seems that the only ones

that are really concerned about men's health are the men themselves who get crook (and their families) and they are all left to paddle their own canoes. Thank goodness for Support Groups! Was International Men's Health Week brought up in the Federal Parliament by the Federal Minister for Health? I doubt it! However, Dr. Bob Such, M.P. (Independent) and Member for Fisher, was able to make a speech on the subject a week or so ago in the S.A. State Parliament. He was good enough to post me a copy and we hope to print it in a future Newsletter (in the meantime, it is available at:- <http://www.parliament.sa.gov.au/dbsearch/ha-hansard.asp> search June 1 2006 for Health Issues

Thanks Bob, and Goodonya!

Thanks to our Helpers

Many thanks go to Les Belton for acting as our Librarian while John Mayes has been away. We would also like to thank those members who help put labels on our 325 PSA Newsletter envelopes before each meeting and for

assisting in arranging the seating and re-stacking the chairs afterwards. Thanks also to Barry and Margaret for organizing our suppers.

Professor Willis Marshall's Lecture

This will now be held on Monday 20th November. We also hope to have the Minister for Health, the Hon John Hill, M.P. come along on that night and give us a bit of a talk. Please make a note on your program.

Mr. Wayne Swan's M.P. Visit to Adelaide

The Shadow Minister for Health, Mr. Wayne Swan, M.P., will give a talk from 10.30am to 11.30am on Friday 30th June (this coming Friday). He will talk about his experience with prostate cancer. It will be held at the Plympton Glenelg RSL Club Rooms at 464 Marion Rd, Plympton Park. Other speakers will be Dr. Carole Pinnock, Dr. Peter Sutherland, Mr. Nick Georganas Federal M.P. and Gary Bowes. Everyone is

welcome to attend. Unfortunately unless you read this Newsletter first thing on Friday morning (if your mail arrives early) you will miss this meeting, however, Ian has put it on our web site and we have e-mailed a few of our members about it.

Program and meeting times for 2007

Should any of our new members and, of course, our older members as well, have any ideas about who they would like to have come along next year to give us a lecture, would they please let Barry or Reg know at our next two meetings. We might then be able to arrange something when working out our 2007 program of Speakers.

Some interstate Support Groups hold their winter meetings in the afternoons to save going out on cold winter nights. This is mainly from June to August. Do we want to do the same? A vote was called for and about 40 members indicated they do not want to change to some afternoon meetings. Four members wanted a change. So there you have it – no change!

All meetings will start at 7.00pm.

Another thing that has cropped up is the increasing number of members attending meetings. We think that this is a good thing, but unfortunately the lecture room at the Burnside Hospital is only designed to take an audience of 45. New members join each month, so we might have to look around for bigger premises next year. We would need something centrally located to members with easy parking and proper facilities in the hall, such as supper making facilities and TV, video/DVD, and a hall or lecture room that's not too expensive. The Committee is having a look at the situation. Any ideas, suggestions or recommendations appreciated.



What's on at the other various Association of Prostate Cancer Support Groups (SA) Inc

The Onkaparinga P/C Support Group:

Their next meeting will be held on Wednesday 5th July at 6.30pm in the Boardroom at the Noarlunga Community Hospital. Ms Rosey Sulicich. (CCSA Speakers Bureau) will make a presentation on Nutrition and Cancer Prevention and Physical Activity. Please phone John Shields on 8382 6671 for further particulars. Everyone is welcome to attend! Check their website for their newsletters and more details at:- <http://www.pcsog.org>

Mitcham Support Group Meeting 25th May

Their next meeting will be held on Thursday 27th July, Colonel Light Gardens RSL Club, 4 Prince George Parade, Colonel Light Gardens at 7.15 pm to 8.45pm when the speaker will be Lloyd Evans. Part of the Prostate Cancer Foundation of Australia DVD was viewed at the June 22nd meeting. It was viewed using a laptop, the Action Group Video projector and the Adelaide Group Public Address Amplifier, so a truly co-operative effort!

Beer joins the war on cancer

One of beer's main ingredients may thwart prostate cancer, researchers at Oregon State University say.

But a person would have to down more than 17 pints for a medically effective dose of xanthohumol, the cancer-fighting chemical found in hops, according to researcher Emily Ho.

"So the counter effects of the alcohol may outweigh any health benefits from drinking beer," she said.

German scientists have brewed a beer containing 10 times as much xanthohumol. *From The Advertiser 14.6.06*

Coffee 'protects the liver'

COULD Irish coffee be the perfect drink?

California researchers reported yesterday that drinking coffee cuts the risk of cirrhosis of the liver from alcohol by 22 per cent per cup each day. They stopped short of saying doctors should prescribe coffee for that reason.

What could cause the apparent protective effect was not clear as coffee was "a complex substance", the report said. The report did not suggest that alcohol users increase their coffee consumption or seek out drinks like Irish coffee that combine alcohol with coffee. *From The Advertiser 14.6.06*

For your Information here is a recipe for Irish

Coffee from <http://www.cooksrecipes.com>

1 cup (8-ounces) heavy cream
3 tablespoons granulated sugar
6 cups strong, hot black coffee
3/4 cup Irish whiskey

1. Using an electric mixer, beat the cream with 1 tablespoon of sugar until soft peaks form. Set aside.
2. Combine remaining sugar, coffee and whiskey.
3. Pour into mugs and top with whipped cream. Serve immediately.

Makes 4 to 6 servings.

ASMR Lectures June 8th

The Australian Society for Medical Research (ASMR) held their annual ASMR Medical Research Week® during the 1st week in June. A primary aim of the ASMR is to communicate to the general public the latest innovations in medical research at a level that is informative, interesting and easy to understand. The ASMR 2006 public lecture on "Stopping cancer in its tracks" was a great success and 5 world-class cancer experts treated the public to a fascinating evening. The evening began with an overview from Prof. Mathew Vadas (Hanson Institute) on the importance of research particularly in the field of cancer followed by an engaging introduction of what cancer is and the genetic and familial basis of cancer by Dr Graeme Suthers (Women's and Childrens Hospital). Dr Suthers had a few tricks up his sleeve to put forward his concepts. Prof. Graeme Young (Flinders Medical Centre) followed him with a lively discussion climbing up and down the food pyramid and focusing on how we can reduce our chance of colorectal cancer through diet. He also promoted the importance and benefits of regular screening to find cancers at the earliest possible stage. Prof. Willis Marshall (Royal Adelaide Hospital) highlighted, with aid of some amazing footage, real life prostate cancer tumor removal procedures and inventions such as "Key Hole surgery" that are being employed to save lives. Prof. Shaun McColl (The University of Adelaide) finished the lecture by detailing the latest innovations in basic research that will be used in the future to identify markers of early cancer and lead to novel screening targets. A lively discussion arose from the many endearing and intuitive questions from the large audience at the Palace Nova Cinema. The ASMR hopes that all enjoyed the evening by learning and understanding more about how medical research is helping the wider community, particularly those with cancer. The ASMR would like to thank the Prostate Cancer Awareness Group of South Australia for their support and also the sponsorship of the Hanson Institute and IMVS.

Nicole Pendini,

Public Lecture Sub-group leader ASMR SA

Hard times made easier

A MAN has won more than \$400,000 in a lawsuit for a penile implant that gave him an erection for 10 years. Charles "Chick" Lennon, Providence, Rhode 68, of received the steel and elastic implant in 1996, about two years before Viagra went on the market.

However, a malfunction meant the implant could not be lowered after sex. Lennon said he could no longer hug people or wear bathers because of the pain and embarrassment. "He .has become a recluse and has been struggling to earn a living," attorney Jules D'Allesandro said.

Mr Lennon cannot get the implant removed because of health problems, including open-heart surgery.

From the Sunday Mail 25.6.06

The Treasurer's Report

At Gerry's funeral, donations were made by our members, relatives and friends of the family. A total of \$1,080 was donated and has been forwarded to the P.C.F.A. in Sydney. Cynthia requested that the donations be spent on Prostate Cancer Research and has asked the PCFA that perhaps the money could be forwarded onto the Hanson Research Institute here in Adelaide.

Other donations received during the month were from

Alan James (\$100), Frank Hart (\$30), and \$20 each from Keith and Joy Gobbett, Austin Noblett and John O'Connor. Many thanks! We have just received a cheque from the Association for \$619.90 which covers our postage expenses (mainly Newsletter mail-outs) over the last two months and the purchase of the loud speaker system. This money came from the Federal Government's Cancer Support Groups Grant Program.

Make a Change for Men's Cancers

The Cancer Council SA has come up with a good idea to raise money for prostate cancer research and support programs in S.A. Just collect up all your small change around the house and take it along to any Bank SA branch or make a donation online. "The Messenger" press has come on board and distributed thousands of plastic bags with their 21st June issue of their newspaper for this purpose. Radio

Station 5AA and Channel 7 are also participating in this project. Well done to everyone involved.



Grants for Equipment – Federal Government

We noticed in "The Advertiser" on June 8th, the following item:- "Volunteer groups can apply for up to \$3,000 under the Volunteer Small Equipment Grants Scheme. The Federal Government project awards money to not-for-profit

organizations to buy equipment. Application forms are available by phoning 1800 152 259." (*So get onto the phone guys and gals if you want any new equipment for your Group. – Reg*).

Impotence Australia

We have received a letter from "Impotence Australia" announcing the availability of a new resource on the topic of sexual health and in particular, erectile dysfunction. The resource is called treatED. Their CEO, Mr. Brett McCann, has advised that the resource has been developed in two formats. The first is a downloadable PDF document that is posted on their web site www.impotenceaustralia.com.au It

has also been printed in a booklet form, which can be ordered by contacting the organization on 1800 800 614. Or you can write to Impotence Australia, 240 Riley St., Surrey Hills, NSW. 2010. The booklet is free. Our Webmaster, Ian Fisk, has put a link to the above web site on our own web site www.psaadelaide.org We have ordered some copies of the booklet for our library.

Our June Speakers

Lecture by Ms. Ellen Kerrins, Cancer Council SA.

(Lecture notes by Reg Mayes.)

Ellen gave members some details of her background. She had trained as a nurse in Melbourne and studied Oncology at the Peter McCallum Institute. Later she shifted to Adelaide and commenced working at the Cancer Council SA in an Executive and Management role.

About ten years ago in S.A., many cancer organizations joined forces to make a better approach towards prostate health and prostate cancer. Three important programs dealing with prostate cancer in which they were involved were, the Mr. PHIP project (Prostate Health Improvement Project) with the Daw Park Repatriation Hospital, the publication of the, NH & MRC guidelines for prostate cancer. The other project was assisting with the formulation of the Lions Australia Prostate Cancer Website www.prostatehealth.org.au The Australian Prostate Cancer Collaboration also developed over this time and many representatives of the CCPH are members.

Currently another project being undertaken is Prostate SA. Last year Professor Villis Marshall, Professor Wayne Tilley, Dr. Alan Stapleton and Dr. Peter Sutherland agreed to form this group and called for an Alliance with the Cancer

Council SA. Mr. Ray Blight has been working to develop the membership and direction of this organization and advertisements were recently placed in newspapers calling for a number of voluntary positions to form the Board.

High profile people with plenty of business acumen, and prominent sports people and those involved in the Arts have applied. One of the main things is to raise a large sum of money for Prostate SA's future operations. High profile leadership is required. In answer to a question from the audience, Ellen said that it is not proposed to appoint consumers i.e. prostate cancer sufferers, to this Board, but they will be certainly approached to take up various positions on sub-committees dealing with Education, Fund Raising Activities and various Research Projects. At this point in time, the Board membership positions have not been filled. It is thought that another public meeting involving Prostate SA, the Cancer Council SA and other interested parties such as the Hanson Research Institute and the R.A.H., will be called shortly.

Recently, there was a meeting with Mr. Andrew Giles, C.E.O. of the P.C.F.A. Sydney, to see how that organization



would fit in with Prostate S.A. The discussions are still ongoing.

Ellen then talked about the various ways the Cancer Council is working towards reducing the impact of prostate cancer, viz:-

- Research commitment of \$250,000.
- Cancer Helpline had 30% more calls this last year.
- Development of a Cancer Counselling Service.
- Assisting many Support Groups and people interested in better cancer outcomes.
- Cancer Connect and Living with Cancer Education Programs.
- Staying Healthy after Cancer Program.
- Raising funds for Research, Education and Support.

The GP Educational Workshops Project:

Two other important projects that the Cancer Council SA is highly involved in at the moment are the GP Educational Workshop Program and the State Wide Cancer Control Plan. The GP Workshops are designed to further educate GPs about PSA SA blood tests and Digital Rectal Examinations (DREs) so that they are best able to support men in their decision making about tests. Up-to-date information is given to GPs at these Workshops. There will be four conducted this year and the two sessions, held earlier this year, attracted about 70 GPs and proved to be very successful.

(Reg said that these Workshops are well overdue as some of this State's GPs have an appalling knowledge of prostate cancer; PSA blood tests and DRE examinations. Members have reported to him that one GP in a Southern Adelaide suburb told a man who was over 50 years of age that he would not do a PSA blood test or a DRE on him as he had no symptoms and to come back and see him later when symptoms develop. We presume when he is peeing blood, or can't pee at all, or is full of aches and pains in his bones. By then it is well and truly too late and the cancer has escaped from the prostate and gone into his bones and body. The attitude and knowledge of this particular GP is shocking to say the least. A second case involved a GP in a country town who told a man over 50 years of age, when asked for a PSA and DRE test, "We don't believe in those sorts of things", and sent the man away. Well what do you think of that? We know of course that 99.9% of all GPs are conscientious and over worked but there appears to be some exceptions to this rule – Reg.)

Dr. Linda Foreman said that from the feedback obtained, the first workshops were favourably received by those GPs who attended. *(One of our members said that he thought 70 GPs attending the workshop was a poor and very small number when compared with the 2,500 GPs practising in South Australia. What can be done to improve attendances?)* Linda said that this should be overcome with time and further publicity and education. For example, quite often one GP from a General Practice of say 10 doctors will attend and take back the information gained and talk to the other doctors about it. Also GPs Newsletters are being given prostate cancer information to print and faxes are also being used to advise GPs of any latest treatments available for prostate cancer etc. Linda said that she would insert our Association

Information Brochures and the "Be-a-Man" pamphlets in all future GP Information Packs. *(Wow! This is a step in the right direction! We made sure that Linda took away plenty of our brochures and pamphlets when she left – Reg.)*

Linda said that GPs are being encouraged to contact the Cancer Helpline for any up-to-date developments re prostate cancer, here in Australia and overseas. *(Here Reg cheekily said " Well, have a look at our web site www.psaadelaide.org which is crammed with the latest info plus numerous lectures by leading South Australian Urologists and interesting up-to-the-minute articles from the internet. This site is regularly up-dated by our Webmaster, Ian Fisk, and has had nearly 3,600 hits).*

The Statewide Cancer Control Plan – 2006 – 2009:

The above Plan has now been published and Ellen handed around a number of copies to members. It consisted of a booklet containing 96 pages of detailed information. It was prepared in collaboration between the Cancer Council SA and the SA Department of Health. The Department of Health funded its development and over 500 people were involved in its formulation over a considerable period of time.

Some of the subjects covered were Reducing Cancer Risk, Optimising Cancer Care, Intra-structure, Workforce Planning, Cancer Control Research, Information and Technology and Increasing Cancer Prevention and Early Detection. An early meeting with the State Government is to be arranged re how they want the implementation of the Plan to go forward. *(Further details about the Plan were published on page 5 of our March '06 edition of our PSA Newsletter).*

Lecture by Dr. Linda Foreman.

Linda said the present Workshops for GPs dealing with early detection of Prostate Cancer are proving to be a success. Seventy GPs attended the first two sessions and another seventy have registered for the subsequent workshops planned for later this year. We hear reports that some GPs discourage men from having a PSA blood test or a DRE and it is partly in response to these sorts of concerns that the Cancer Council SA has introduced the Workshops. The Prostate Cancer Support Groups believe that early detection of prostate cancer is vital if men hope for a cure. If detection is left too late, then there is a strong possibility that cancer has escaped from the prostate capsule and it becomes much more difficult to treat. In many cases hormone treatment is then given, but this is not a cure.



The Workshops have been designed in collaboration with the Queensland Cancer Fund and the Urological Society and other partners. Some of the main points are: (1) The Workshops are always opened by a Specialist Urologist who addresses the audience on issues relating to the early detection of prostate cancer and the latest information about the issue..

(2) Information is given about abnormal PSA readings and what to do about them. (3) It has been noted that some GPs are confused about what recommendations exist about PSA/DRE testing. (4) It is stressed that the man's decision for having a PSA blood test and a DRE rests with him and not the GP. After all, it is the man's prostate that could be a problem and not the GP's. (5) GPs can assist the man in making a decision. Men want knowledge from GPs, and GPs should be provided with access to relevant information. Men should be given enough information so they can make a fully informed decision about PSA testing, DRE's, biopsies and what treatments are available to them. (6) A specially designed "Patient's Show Card" has been prepared by a number of different organizations dealing with "The Early Detection of Prostate Cancer in General Practice" and these are being handed out to GPs attending the Workshops. They have been mailed to GPs throughout Australia.

Linda said that carers and partners needed more information and assistance about prostate cancer matters, how it affects men, what treatments are available and the side effects and how to best care for their patients. There is concern that at the present time, they are just not getting enough information. GPs at workshops recognise the importance of doing DRE's.

A lot of people don't know what "Support Groups" do and what they are about or where to find them. *(Well, all I can say is that we have printed about 30,000 information brochures over the last 9 or 10 years and have distributed them all over Adelaide and suburbs and in some country towns. Earlier this year we printed 10,000 brochures. These go into doctors and Urologists surgeries, hospitals, libraries, some health food shops, chemists, the Cancer Council SA Help Line office, and some Council offices. 960 were distributed in one day to the general public in the Rundle Mall at the Be-a-Man campaign in February of this year. Hundreds more are distributed at the PCAG Awareness evenings and at some outdoor functions. We also have a web site on www.psaadelaide.org The big problem at the moment is that hospitals, doctors surgeries and council offices etc. are taking down their pamphlet racks as they get too messy and the public mix up all the pamphlets. So where do we put them? We have also printed 68 monthly PSA Newsletters over the last 9 years and at the present time, 325 copies are posted to members each month- Reg).*

GPs want to learn things themselves so that they can assist their patients with better health and treatment options. They want informed and healthy patients! One very important point that Linda mentioned was that men with prostate cancer

should also look after their general health. The Prostate Cancer Support Groups recommend that men talk with the GPs about:-


1. A heart check-up.
2. Liver and kidney check.
3. Sugar, diabetes and cholesterol test.
4. Blood Pressure check.

This makes sense doesn't it? *(Yes, we certainly agree and have this on our brochure)*

At the conclusion of Linda's talk, Ellen came back and said that the Cancer Help Line has printed a new pamphlet called "Line Smart" and this is being sent out to callers, together with the Association of P/C Support Group's Information Brochure, if thought appropriate. There has been an increase of some 2,000 callers to the Cancer Help Line service since additional advertising was arranged. However, calls to the "Cancer Connect Line" have been dropping off for some reason. This is where a caller phones in and requests to speak to someone who has prostate cancer, for example. The PSA Adelaide Group and the PCAG have a number of trained councillors who have agreed to take these calls.

A member asked about the value of diets, vitamins and minerals to combat all types of cancer. Ellen said that there is not much evidence available to support the theory that supplementary vitamins and minerals do much good. She thought the best idea was to eat plenty of fresh fruit and vegetables, cut back on red meat to only three or four times per week, and cut right back on processed meats such as fritz, bacon and salami etc. Chop down on your alcohol intake and if you haven't started drinking alcohol, then DON'T START. Also for your general good health - DON'T SMOKE. The Cancer Council SA does have some pamphlets on diets and these are available to anyone who may wish to drop in, at 202 Greenhill Road, Eastwood. The Cancer Help Line No. is 131120. or write to us at Box 929 Unley, SA.5061. Check out our web site on www.cancersa.org.au or e-mail us at tcc@cancersa.org.au

(Whilst on the subject of diets, vitamins and minerals, there is a good article about this subject in the May Issue of the Prostate News, which is enclosed with this Newsletter.- Reg.)

After the two speakers had finished, Barry thanked them for their very interesting lectures and handed each some of Wolf Blass' best Chardonnay. He also presented Ellen with our cheque for \$40 to go to the Cancer Council SA. 

A watchful eye keeps a deadly illness in check

By Rex Jory 27jun06

THEY are the words no man wants to hear. The urologist looked over his clenched hands and said: "There's a good chance you have prostate cancer." "What sort of chance?" I gabbled, trying to stay calm.

"I'd say 60 or 70 per cent," he said, with genuine compassion and understanding. He opened the top drawer of his desk and pulled out a sheaf of papers. "I'm treating all the men

on this list for prostate," he said. "They're all still alive and kicking."

My nightmare had started seven weeks earlier in Singapore on my way to Rome. One night, I fell ill with a high temperature, headache and so on. And I passed a small amount of blood in my urine. I rang a doctor mate in Adelaide who said I should immediately go to a hospital and if necessary come home rather than going on to Rome.

At the magnificent Mt Elizabeth Hospital in Singapore, I was subjected to a thorough series of tests and then introduced to a pleasant young doctor.

“There are still traces of blood in your urine and your prostate specific antigen (PSA) is too high,” he said. “You may simply have an infection but it could be something more serious – perhaps a prostate problem.” He nimbly avoided the word “cancer”.

Armed with a bottle of antibiotics, I flew to Italy and went to my doctor in Adelaide a month later. He referred me to a urologist. I had a series of blood tests and a CAT scan before presenting myself to the specialist.

After reading the mysterious test results and giving me an undignified examination, he said my PSA was still too high, my prostate was unusually hard and my urine stream was weak.

It was then that he uttered the dreaded words.

But to be certain, he said, another blood test was required.

I left it a week, had the blood test last Monday week and rang the urologist on Wednesday. It was a week of some stress. Then a miracle. The results showed the PSA had dropped below the danger level.

I’m not out of the woods yet. The urologist wants me to have more tests in the next six months. But the odds that I have prostate cancer are now tilted in my favour.

I tell this story simply to urge men to have a prostate cancer

test. The Prostate Cancer Foundation says prostate cancer is the most common cancer among Australian men after skin cancer and the second highest cause of male cancer deaths.

The prostate is a small gland forming part of the male reproductive system.

Its main function is to produce fluid which protects and enriches sperm. Prostate cancer is potentially curable if detected and treated while still confined to the prostate gland. Early detection is achieved by PSA blood tests or rectal examination.

While prostate cancer is generally uncommon in men under 50 years, younger men with a family history of prostate problems can be more susceptible.

Some prostate cancers grow very slowly and don’t threaten life but others are more aggressive.

Prostate cancer is an abnormal growth of prostate cells which forms a tumour on the prostate. In time, it will spread to other organs, particularly bones and the lymph nodes. This can be life threatening. That is a snapshot of something I knew precious little about three weeks ago. One thing I have learned is that every man aged 50 or more is at risk and should have a prostate check.

Caught in the early stages, prostate cancer need not be a serious problem. Neglected, it can be.

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ROYAL ADELAIDE HOSPITAL HEALTH IN MEN INITIATIVE TOOL BOX MEETINGS

The latest seminar in the RAH Health Promotion “Health in Men” Tool Box seminar series featured Dr Murray Drummond, Senior Lecturer, School of Health Sciences, UniSA, talking about his research on men’s body image and eating disorders. Murray gave us a historical view of the ‘male’ body type, highlighting that a muscular body had originally been attained by manual labour, but now exercise is necessary to attain it. He claims also that while eating disorders are seen as a female illness, there are men who want the lean, muscular body who will use exercise and food ‘control’ to attain their ideal body type. He said that the desire for the ‘perfect’ body is now based on aesthetics, rather than health. He criticized television programs such as The Biggest Loser for their emphasis



on ‘size’. (thanks to Jane Barnett for the previous words). There were many references to ED. What he meant was “Eating Disorders” (not what we normally think ED stands for!). Some men are excessive in their pursuit of the “perfect body” and this can often lead to ED.

The July 26th meeting should also be an interesting one. **“Sleep, an essential part of good health: the impact of poor sleep on how we feel in the daytime** by Andrew Thornton, RAH Thoracic Medicine.”

The Toolbox meetings are held on Wednesdays between 12.00 - 12.45 pm, in the Royal Adelaide Hospital, Robson Lecture Theatre, Eleanor Harrald Building - Lunch included.

Enquiries - phone 8222 5193



DOCTORS ORDERS

Morris, an 82 year-old man, went to the doctor to get a physical. A few days later, the doctor saw Morris walking down the street with a gorgeous young woman on his arm. A couple of days later, the doctor spoke to Morris and said, “You’re really doing great, aren’t you?”

Morris replied, “Just doing what you said, Doc: ‘Get a hot mama and be cheerful.’”

The doctor said, “I didn’t say that. I said, ‘You’ve got a heart murmur; be careful.’”

Prostate Radiation: More Side Effects May Appear Over Time

American Cancer Society News 06.08.2005

Surgery Side Effects More Stable, Says Study

Summary: A recent study in the *Journal of Clinical Oncology* looked at the long-term side effects of various treatments for early-stage prostate cancer. In it, researchers from the University of Michigan reported that although patients treated with radiation saw their initial side effects get better with time, they were likely to see new side effects appear, as much as 6 years later. Side effects of surgical treatment were not found to change much over that period.

Why it's important: Men facing treatment for early prostate cancer need to know the potential side effects of the treatment they choose. While all three types of conventional treatment -- surgery, external beam radiation, and radioactive seed implants (called brachytherapy)-- are in most cases equally likely to cure a man, they have different side effects. These have only been studied for a short time after treatment, about 2-3 years. Men should know if these can change later on.

What's already known: Surgery, called radical prostatectomy, can lead to urinary incontinence and impotence. This improves in some men. But in an earlier study, the same researchers found that about 2.5 years after surgery, nearly 20% of men still had some problem with incontinence and close to 70% were impotent. This is consistent with other studies.

In the same earlier study, the authors found that men who received external beam radiation also had a high rate of impotence 2.5 years after treatment, but few problems with incontinence. About 15% had rectal irritation from the radiation. Men treated with radioactive seed implants had different urinary problems. About one-fourth had irritation and trouble urinating but incontinence was not a problem. Three-fourths were impotent.

How this study was done: The same men from the original study were asked about their symptoms again, this time around 6 years after their treatment. The new results were

compared with the earlier findings. All these results were compared with men who were the same age, but did not undergo treatment for prostate cancer. These "control" men had also been questioned at the time of the first study.

What was found: Men who had surgery reported no change in their symptoms from the time of the first survey. But men who got external radiation or seed implants did see changes in their symptoms. Urinary irritation (pain, burning, bleeding, or frequency) improved in the seed implant patients, and the rectal problems lessened in the external beam radiation patients. But both groups experienced more urinary incontinence, particularly the seed implant patients. Also, in both groups of radiation-treated men, an additional 10% of men had become impotent. All of these symptoms occurred much more often than in the men who never had prostate cancer. But these men also suffered a decline in sexual function that the authors attributed to aging.

When all the side effects were combined, surgically treated men had the best bowel function and even the best sexual function after 6 years, though by only a slight margin. The seed implanted men had the worst outcomes for sexual function and incontinence.

The bottom line: Men who undergo surgery for prostate cancer can be fairly certain that after about 2.5 years, the side effects from the surgery won't change much. This is not true for men who are treated with either radioactive seed implants or external beam radiation. After about 6 years, they may see improvement in rectal or urinary irritation from the radiation. But sexual performance will likely decrease and incontinence may develop.

Citation: "Long-term outcomes among localized prostate cancer survivors: Health-related quality-of-life changes after radical prostatectomy, external radiation and brachytherapy." Published in the *Journal of Clinical Oncology* (Vol. 23, No. 12: 2772-2780). First author: David C. Miller, MD, University of Michigan Medical School.

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We are on the look-out for cartoons, and interesting news items about prostate cancer which might be suitable for publication in future PSA Newsletters. Even a story about yourself and your P/C experience could be OK. Just drop Reg a line at 39 Greenfield Rd., Seaview Downs, SA .5049 if you have anything of interest.

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