

P.S.A. NEWSLETTER

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**PROSTATE(CANCER)
SUPPORT AWARENESS
ADELAIDE GROUP**

www.psaadelaide.org

over ?? since Nov 03

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

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NEWSLETTER NO. 77

April 2007 Newsletter including a report on the April Meeting
held at the **Fullarton Centre** on **April 16 2007**

Thank you to our sponsors:- Federal Government's Cancer Support Groups Grant Program and the State Funded Volunteer's Support Fund. Members Please Note:- Our next meeting will be a talk by **Dr. Kim Moretti, Urologist, will talk about High Intensity Focused Ultrasound (HIFU)** at 7.00 pm on **Monday 21st May, 2007**, at the **Fullarton Park Centre, 411 Fullarton Road, Fullarton.**

Chair Barry Oakley

Members present 31

Apologies Reg, Gary, Leon and Margaret, Hans and Rosalie.

New Members Michael

Because Ray Nicholson had not had the opportunity to have any dinner before our meeting (he had been to Victor Harbor for the day), he gave his presentation at the beginning of our meeting. See a summary later in the newsletter.

Brother Noel Allen

We regret to announce the sudden passing of Brother Noel Allen, one of our long term members. Noel was an ardent advocate for our group. He was awarded the Order of Australia Medal in 2005 because of his charity work and in particular his work as Chaplain at the Queen Elizabeth Hospital over many years. He had spent 40 years as a Minister in the United Kingdom, the Northern Territory and South Australia. We would like to pass on our sympathy to Jean.



The Positions of President and Secretary, PSA Adelaide

As mentioned in our last few Newsletter we are still looking for volunteers to take over the roles of President and Secretary after our meeting on 18th June '07. We would like these two important positions to be resolved before the June deadline if possible. Any volunteers are asked to ring Barry on 8265 3446 or Ian on 8296 3350.

Arthur Seager is happy to continue carry out the duties of Treasurer. Further in a recent email, "Having done all the hard work in converting paper based accounting to computer based, I am no longer interested in changing roles to president - unless my arm were twisted really hard, really hard!! Have I wasted my time in converting the accounting? Will the group survive past June?"

SAC Conference (Support and Advocacy Committee)

Jeff Roberts reported on the recent conference he and Ian Fisk attended in Sydney April 2-3. Please also see the report in our March newsletter. A official formal report of the conference is now available, see Jeff Roberts or Ian Fisk if a copy is wanted.

Library News

Our hard working Research Librarian, John Mayes, has a new supply of the up-dated MR. PHIP pamphlets that deal with all aspects of prostate cancer. We have also received 10 up dated "Localized Prostate Cancer" Books from the Cancer Council.

Also we have ordered 3 copies of the new book, "What Women (and their men) need to know about prostate cancer", from the PCFA, Sydney. John may have copies of this book available at our meeting. By the way, if you know of a good book about prostate cancer which you think we should have in our library, please let John know about it.

Our Prostate Cancer Information Brochures

Ian has a supply of our amended brochures showing our new meeting venue. Please see him if you are able to take some away with you and place them in your doctor's surgeries or chemist shops. Grab any old brochures that show the Burnside Hospital as our meeting place and give them to Ian at our next meeting.

Treasurer's Report

As mentioned earlier our financial situation is now computer based in Quicken "The world's best selling financial management software" (according to their website!).

Donations received from members: Bob \$35. Shirley, \$55.

Donations made to other organizations: \$35 to the Daw Park Foundation and \$75 to the Prostate Cancer Action Group for use of their Video Projector (note replacement lamps for this projector cost over \$600!) Motions were moved, seconded and approved for these payments at our April meeting. Expenditure for more envelopes for the newsletters was also approved.

Clipsal 500 Free Mens Health Check

Jeff Roberts and myself participated with a Group from the Royal Adelaide, running the 'Men's Health Initiative' at the Clipsal 500 Super V.8 races on the Saturday of the weekend of competitive racing. The 'Pit Stop' for Men as the name suggests, used the terminology familiar to 'petrol -heads' and 'car buffs' to try and 'sell' the messages important to men's health. It involved a brief superficial health check up looking for warning signs and the opportunity for providing good advice and counselling. Both Jeff and myself found ourselves not only counselling men regarding Prostate Health but also found ourselves counselling on other issues such as skin cancer as well as acting on occasion as 'meeters and greeters' - spruikers trying to get men interested. It was an interesting and busy 3-4 hours. John Mayes

ProstateSA

Barry Oakley spoke at our April meeting about ProstateSA. He has provided the words below for this newsletter.

"ProstateSA launched their fund raising program with a Blue Tie Cocktail party to launch a Blue Ribbon Patrons Club. The function was held at BEA Motors, Mercedes Benz Showrooms on Thursday 3rd May, 20 Sir Donald Bradman Drive. Captions of commerce and industry were invited along with other VIP supporters. Perhaps 40 -50 people were in attendance, including Barry Oakley, representing the Adelaide Support Group.

ProstateSA Patron, Mr Gordon Pickard AM, invited those present to become a member of the Blue Ribbon Patrons Club by gifting \$25,000.

The second major event in awareness and support was the football match at AAMI Stadium between the Adelaide Crown and Collingwood (Sat May 12). Umpires wore blue, Blue flags were presented to all those who went through the gates, as well as blue wrist band that were sold for \$3.00 each. This was done by a team of 40 volunteers at each of the 10 gates.

Toyota promised \$200.00 for every tackle for the match. In excess \$15,000 was raised. Furthermore, through the generosity of Andrew McLeod and Simon Goodwin ProstateSA has the opportunity to raise additional funds through the sale of the blue boots the pair wore during the match.

These two occasions were a great start for ProstateSA in developing awareness and generating funds for research in the fight against prostate cancer. We thank them for that and hope that it will indeed put them at the very forefront in Australia."

Videos

Three videos were viewed dealing with Dr. Red's new Blueberry cordial, The ABC's 7.30 report on PSA testing and Joe Bridges commencing his walk to Melbourne (see a report later). The Videos were recorded by the recovering Reg Mayes, Thanks Reg.

Letter from John Francis

John Francis sent a letter formally withdrawing from the group. His continual spasmodic attendance at meetings has worried him and as he is likely to be away from Adelaide more frequently in the future he thought it best that he withdraw.

Website Hit Counter

The hit counter on our website has not been working for a number of weeks. The Office for Volunteers department of SA Government, who fund Community Webs, where our site is hosted requested that they be acknowledged on all websites hosted by Community webs. The way the government logo was added it each page caused the counters to stop functioning. Hopefully the problem will be sorted out soon!

April Meeting Presentation by Ray Nicholson

In Sept 2004 Ray also spoke to our group. His full story was published in that newsletter. If you cannot find it, a version of the newsletter is on our website! (www.psaadelaide.org). It is also in the April 2005 issue of the Prostate Cancer Support City of Onkaparinga Group (www.pcsog.org) Newsletter. Below is a summary of his April 2007 presentation.

A story of survival By Ray Nicholson

Diagnosis I was diagnosed with Mantle Cell Lymphoma, one of the Non Hodgkin's Lymphomas 19th December 1997.

At that time there were no known cures for this particular cancer, the diagnosis had spanned over a year and the disease was very advanced at stage 4. I had to leave employment and moved from Melbourne back to Adelaide to be near family.

Before leaving Melbourne I was given a book called You Can Conquer Cancer written by Dr Ian Gawler, a cancer survivor. From this book I set a number of life style goals thinking if Ian Gawler could do it then so could I.

Back in Adelaide, my daughter, a radiographer at RAH encouraged me to visit the Cancer Care Centre in Unley which I did. This organisation was founded on the principles espoused by Ian Gawler so I was comfortable with that.

Lifestyle Changes

Diet - No fat, a juicing regime, as far as possible organic fruit and vegetables, limited meat, no processed food, no alcohol.

Poisons in the home - Go through the cupboards and minimise poison products like cleaning aids, personal items.

Poisons in the community - Hard to avoid but try and keep away from petrol fumes.

Exercise - I had started swimming and walking more

Goal setting - For life events in the future, things to look forward to

Attitude - I really wanted to get well again. And this included having a strong faith,

Education - To find out all I could about the disease - the internet because my aid De-stressing/meditation - which was considered to be the silent healer.

Other Areas of Attention

Diet -Juicing - Vegetables and fruit at least three times daily. All stainless steel cook ware including the electric kettle.

Exercise - Painting Redecorated children's and our houses. Gardening (had to cease this during heavy chemotherapy.

Goal Setting- time out Planning breaks, pleasant outings

Meditation - At least twice daily for 30 - 40 minutes. Weekly Cancer Care sessions.

Visualisation - In conjunction with Meditation

Affirmations - Constantly reinforcing the positives

Education- Internet Constant Internet searching for answers. Chat room communicating with people with likes disease.

Reading books on cancer survival.

Living Through Cancer Course at the Cancer

Care Centre.

Vitamins - A, Multi B, C (powderformlargedose Calcium Ascorbate), E, Echinacea

Massage -Daily

Reiki - Most days

Shiatsu Most days

Volunteering - At Cancer Care Centre and fund raising for other groups.

The three pillars of healing:

(1) **Creating a healing environment for yourself**

(2) **Affirmations and Visualisation**

(3) **Relaxation and Meditation**

I kept this regime up for a couple of years and every month I would visit QEH where my oncologist was resident getting tests done and monitoring the disease. Whilst I had passed my "use by date" - the median life expectancy for MCL is about 15 months from diagnosis but my diagnosis had been a long time in the making so I lost a lot of that time), and my survival was much to the surprise of the doctors, the disease was progressively beating me and I was declining badly in health.

However new medical regimes come along all the time and a cocktail of chemotherapy drugs was proving beneficial in some cases of MCL so early in the year 2000 I started on a year's intensive medical treatments. High dosage chemo, a splenectomy, bone marrow transplant, contracted pneumonia, E Coli, thrush in my mouth, extreme ulcerated mouth infections in hospital and so on but eventually came through this. All the while I maintained my life style changes particularly practicing meditation (As Gawler states The silent healer). Affirmations and Visualisation constantly giving my body the best chance of working on the disease and strengthening my mind set and resolve to get well. People say, "he or she has a positive attitude" with regards to cancer but I think that it is a whole lot more than that. It is about taking control, setting goals, exploring what to do to help one's self, understanding the issues and taking action - striving to survive. One needs a strong commitment to wanting to get well, accepting the many challenges along the way and having a connectiveness to the whole process and feeling like you belong to this world. That takes a lot of courage and energy.

Wellness is about the **whole person** not just not wanting to not feel sick it's about:-

Emotional wellness

Physical wellness

Social wellness

Spiritual wellness.

Intellectual wellness



A man by the name of Rume said in our minds we live in a house of four rooms and we need to visit those four rooms every day - our emotional room, our physical room, our social room and our spiritual room Added to that is our intellectual room. This brings me to what the Cancer Care Centre can offer.

Ray supplied the above printed words as a summary of his presentation. He gave many more details in his talk.

An active approach to one's health results in much better results than a passive approach. Taking control has proved

beneficial to many!

Ray also spoke at length about the many facilities available and the Cancer Care Centre Unley from counsellors, study opportunities, courses, support groups, massage, nutritional advice, guest speaker seminar series to weekend residential workshops etc. Check their website or give them a call for further information. (www.cancercarecentre.org.au/ or 08 8272 2411)

After his presentation Ray was presented with a bottle full of red antioxidants and a 'Be A Man' Tee Shirt!



Eat Soy Old Boy!

Now I hopefully have your attention, do you feel a little insulted, annoyed that you have been addressed in this way? Join the 'Club' because that's exactly how I reacted to the Journalistic 'beat-up' on the issue of Soy and Prostate Cancer when faced with the various 'Headlines' "Soy cancer alert", "Cancer patients warned to avoid soy" and so on.

I must admit I have a less than reverential attitude to some of the 'Official pronouncements' of Cancer Councils. You may remember in our September 2006 Newsletter, I found it necessary to point out that the claim by researchers at the Cancer Council of Victoria, that there "was no association between dairy food and prostate cancer", was based on data drawn from the "Health 2020" research project as it applied to 14600 Victorian men between the ages of 27 and 75. The data base consisted of one third men with a Southern European background who had a 30% decreased risk of developing cancer or heart disease, had lower morbidity levels than people born in Australia and lived on average four or five years longer than the general population. The remaining two thirds was made up of men of Anglo-Saxon background. Quite apart from the age range surveyed which would have included a significant number of men too young to present clinically with prostate problems in significant numbers, a data base with such a large cohort of men who departed so far from the population norm, inevitably would destroy the credibility of generalisations made about the relationship between dairy consumption and prostate cancer in the wider population.

As far as I was concerned, the Cancer Council of N.S.W. also 'had form.' Early in 2006 I acted as a substitute for our fellow member Gary Bowes, participating in a tele-conference meeting of the Support and Advocacy Committee of the PCFA. To my astonishment I found that our Web Site came under attack by one of the N.S.W. delegates [since retired] over a report on the site dealing with a lecture given on Selenium. The report was supposed to be a dangerous lot of rubbish and the attacker spoke with some certitude. As you imagine I 'hit back' in defense so that the attacker 'backed off' saying that "I'm not having a go at you John." To me the whole episode was inexplicable until my wife received the June 2006 issue of 'Choice', the Australian Consumers Association Magazine. It contained a short discussion about Selenium with clear acknowledgments of the 'Cancer Council of N.S.W.' 's 'Position Statement on Selenium'. The upshot of the discussion was that any enrichment of food stuffs with Selenium was useless - it was just marketing hype that could

be ignored. It was then that I understood the genesis of the attack at the SAC earlier in the year. As 'Choice' has a good reputation, and is influential among a large distribution of 'savvy consumers' Australia wide. Its impact would tend to sabotage the efforts of researchers such as Dr. Graham Lyons and others to not only get Bio-Forte, a selenium enriched wholemeal flour onto the Australian market, but also would nullify the successful effort to prove the ready bio-availability of the selenium in the enriched flour. The consequence of the pronouncements of the Cancer Council of N.S.W. clearly would thus be likely to have a possible negative impact on Public Health, particularly in the case of dietary prevention measures in relation to Prostate Cancer.

The great irony here, is that I believe that the Cancer Council of South Australia, had been quite supportive of the effort to improve the selenium content of flour and bread.

After reading the scare 'Headlines' concerning soy consumption and cancer, I was not expecting much when I consulted the www.cancercouncil.com.au web site to view the Position Statement on "Soy, Phyto-oestrogens and Cancer". To my surprise I found much that I would agree with although I would make some significant qualifications. As far as Prostate Cancer was concerned, it did not say very much. Of the 38 specific references listed, 9 specifically addressed issues of Prostate Cancer. Most of the 'Position Statement', apart from background and contextual information, was concerned with issues of Breast Cancer. Issues regarding Breast Cancer are problematic regarding dietary Soy, and are not so clearly resolved as appeared to be the view expressed in the 'Position Statement'. Essentially it did not read like the scary document presented by the Journalists. Moreover even only one day after the Journalists in all areas of the mass media had engaged in their exercise in hyperbole, a speaker for the Cancer Council of NSW was 'playing down the soy dangers.' - "Soy foods can be beneficial to a healthy diet, like all fruit and vegetables, provided they are eaten in moderation ..." and "...the Cancer council said it did not recommend the consumption of concentrated soy products, like soy supplements as a preventive measure for cancer." Also "Definitely, soy foods can be part of it, but a diet stops being healthy when that's the only thing that you're consuming, when you start consuming one particular food over another." AAP 2007 15/1/07

One aspect of the 'Position Statement' that does need to be seriously 'taken on board' as a CaP sufferer and consumer

is the warning about consuming supplements of isolated compounds from Soy. I've seen similar warnings from other very credible sources and they should not be ignored. Extracting a compound from a dietary component and consuming it in isolation, removes the compound from the influence of a wide spectrum of compounds in the original food that often have a modulating effect or work in synergy with it. Thus the compound ends up essentially no different from pharmaceutical drugs that depending on dosage and usage, often can have unexpected or unintended side effects. This cautionary comment is not just relevant to Soy.

The publicly expressed comments in clarification, are quite consistent with the "Key Messages" of the 'Position Statement'. By 21/1/07 the 'Sunday Mail' in a report "Soy cancer fear 'wrong' - Health food firms lash claim." - discussed the challenges to the initial hyped reports. It tried to suggest that Health Food Companies challenges to the initial reports could not be relied upon due to vested interests namely profits. Of course it ignored the possibility that Cancer Councils closely associated with Orthodox Medicine and its often cosy associations with what one could typify as 'Big Pharma', don't often have vested interests opposed to dietary solutions to medical problems. The 'Sunday Mail' report did note that "the conclusion was regarded as too simplistic by experts, [unidentified] who point out other significant differences in diet and lifestyle that can impact on differing cancer rates." This comment in the newspaper report I believe is 'spot on', as one of my concerns about the 'Position Statement' was the reliance on various meta-analyses, that simply could not take into account the dramatically diverse dietary profiles of subjects consuming significant amounts of Soy. In other words the assumption was that any change in cancer status was due to Soy consumption alone and not due to any interactions with any of the multitude of other components in the diet. Of course such an assumption can be easily shown to not only be unscientific, but ridiculous.

Unfortunately pronouncements of Cancer Councils tend to carry with them all the 'Authority' that our society bestows upon Medical Practitioners. That 'Authority' tends to engender an uncritical tugging of 'the metaphorical forelock' by not only journalists but also the wider society that sometimes results in unfortunate consequences. The 'Sunday Mail' report made it clear that the PCFA supported the Cancer Council's guide-lines. In obviously responding to the initial scary Press Reports, PCFA "Spokesman Andrew Giles warned against "unreliable" alternative practitioners who told men with prostate cancer to take soy supplements." Unfortunately Andrew Giles was quoted further and the focus on the critical word 'supplements' was lost with the impression given, that Soy itself was tantamount to a complementary medicine that should be reported by patients to their treating Doctor who would presumably counsel appropriately. This confusion of the issue illustrates how careful one must be in dealing with the press and also illustrates very well my point about the uncritical 'tugging of the metaphorical forelock', whether it be by 'Choice Magazine' or spokes people for organisations such as the PCFA. The November 2006 Issue of 'Prostate News' published by the PCFA contained Part 2 of quite a

good article on "The role of Diet and Dietary Supplements in Prostate Cancer Development and Growth." The section dealing with 'Isoflavones and Polyphenols' in discussing Soy rightly points out that in the Western context epidemiological evidence for a preventive effect is weak, however there is experimental evidence suggesting that there are a number of 'pathways' where soy compounds can possibly have an anti prostate cancer effect. At no time does the writer indulge in alarmist warnings about the dangers of soy consumption. The writer Dr. Manish Patel, is a Urological Cancer Surgeon at Westmead and Sydney Adventist Hospitals. He is also a senior lecturer at the University of Sydney and an active researcher into new treatments for prostate cancer, including dietary compounds.

Dr. Patel referred to above, is in good company. Richard Beliveau Ph.D and Denis Gingras Ph.D. in their excellent book "Foods that Fight Cancer - Preventing and Treating Cancer through Diet", drawing on their research at the 'Molecular Medicine Laboratory' based at the Sainte-Justine Hospital Research Centre in the University of Quebec at Montreal, make some interesting points in their Chapter 8 , Soy 101. The allusion to 101 refers to what is often an identifying number in elementary/introductory University courses. On page 106 in discussing the multitude of factors that can favour the progression of prostate cancer in older men, the writers comment "Controlling the growth of these latent tumours through the consumption of foods such as soy takes on great importance as a result. Then again, the protection afforded by soy against prostate cancer is not limited to its effect on androgen receptors but also extends to its inhibiting activity toward growth factor receptors and angiogenesis." Members might themselves care to borrow one of the multiple copies of the above book and read for themselves about Soy and other foods that fight cancer.

Professor Jane Plant who is at the 'top of the tree in her field', Government Chief Scientist in a field that has nothing to do with medical research, has written two books extremely thought provoking and useful books relating to cancer. "Your Life in Your Hands - Understanding , Preventing and Overcoming Breast Cancer" and "Prostate Cancer - Understand, Prevent and Overcome." To give some inkling of her situation I quote from the Introduction to the Second Edition 2003 of "Your Life in Your Hands". " It is now ten years [now 14 and still going strong !] since my last breast-cancer secondaries disappeared following a fundamental change in my diet and lifestyle. My cancer had spread to the lymph nodes in my neck, and in spite of a radical mastectomy, three further operations, 35 radiotherapy treatments, irradiation of my ovaries to induce the menopause [CaP sufferers undergoing hormone blockade undergo a similar effect.] and several chemotherapy treatments. Despite all this treatment, my doctors gave me only three months to live. I then recalled that people in rural China, where I had worked, had a very low incidence of breast (and prostate) cancer. At that point I changed my diet and lifestyle, and to everyone's amazement, including, I have to admit, my own, the large cancerous lump in my neck disappeared within five weeks." Other women and men who have faithfully mirrored the same changes in lifestyle and diet

have had similar success in 'beating' breast or prostate cancer. The whole point of all this is that a very important part of the dietary approach is the abandonment of any consumption of dairy produce and its substitution by **Soy based foods**. Quite obviously just the substitution of Soy for Dairy Food has to be complemented with considerable other dietary changes as well as lifestyle changes, however the overtly or implicitly stated risks for both Breast and Prostate Cancer as outlined in the Cancer Council of NSW 'Position Statement', seems to be irrelevant to the recovery of those following the 'Plant Diet and Lifestyle'.

One should not perhaps be surprised by this as Plant's approach is outside the conventional medical paradigms espoused by Cancer Councils.

Lee Nelson, M.D. a U.S. trained doctor practising in New Zealand himself diagnosed with prostate cancer at the age of 55, reviewed more than 2000 scientific papers and interviewed many of the top Urologists, Medical Oncologists and Radiation Oncologists as a preparation for writing his excellent book "Prostate Cancer - Prevention and Cure" published in 2003. I've always held the view that nothing quite concentrates the mind or persuades one to put in the 'hard yards' as trying to save ones own skin or that of loved family members. If such a person has relevant expertise either medical or scientific, better still, as such a person is less likely to be led astray by fads and less likely to adopt 'received wisdom' unquestionably. Both Professor Plant and Doctor Lee Nelson meet the above criteria, so I take greater notice of what they write. In what is already too long an article, space precludes me from quoting at length what Nelson writes however on Page 316 "My opinion is that soy should be eaten in large quantities by most men. I drink a soy protein isolate shake made with 1% fat vanilla soy milk, 2 scoops of soy protein powder, and blueberries daily. This has more than 35 grams of soy protein. I also eat lots of tofu, miso soup, natto, and soy yogurt. On page 317 "Reported mechanisms of soy isoflavone action on prostate cancer cells from laboratory and animal studies:

1. Antioxidant action - may reduce alterations in DNA in normal cells, reducing cancer cell numbers.
2. Inhibits angiogenesis - helps prevent spread of existing tumours; decreases microvessel density.
3. Inhibits tyrosine kinase - Inhibits cancer cell growth.
4. Induces apoptosis - Increases programmed cell death in cancer cells.
5. Up-regulates p21 - Increases the protein production of a prostate cancer cell growth suppressor gene.
6. Stimulates sex hormone binding globulin synthesis (SHBG). - May decrease the effect of male sex hormones. [Praise be ! the Cancer Council of NSW mentioned this but did not draw the obvious conclusion that it might just help fight CaP by making testosterone inactive.]
7. Induces differentiation - Makes malignant cells more normal in appearance and function.
8. Decreases IGF-1 - Decreases the amount of this angiogenic protein in circulation. [Of course Plant's elimination of dairy food also cuts IGF-1 ingestion as it is also a potent Growth Factor for CaP.]
9. Inhibits DNA topo-isomerases 1 & 11 - Suppresses DNA

synthesis thus inhibiting prostate cancer cell growth.

10. Decreases the release of PSA from hormone dependent prostate cancer cells - A compound in soy, biochanin, changes testosterone metabolism. [Decreasing PSA also has the effect of lessening the influence of PSA as a protease in splitting IGF-1 from its binding protein IGFBP-3, thus making it more available as a growth stimulant for CaP cells and for angiogenesis.]

As you can see the possible effects of Soy could arguably be quite significant in dealing with Prostate Cancer.

Barry Sears Ph.D. in his book "The Soy Zone" on Page 231 points out that Genistein in soy inhibits indirectly the production of dihydrotestosterone. Now dihydrotestosterone (DHT) more properly known as 5-alpha dihydrotestosterone is made from testosterone and is up to 10 times more active as a growth factor for CaP than testosterone. The genistein also seems to be able to disrupt the signals that insulin and other tumour growth promoting hormones send out to target cells. Quite obviously I have just illuminated the tip of a very large iceberg !

I'm unfortunately the host of a microcluster (somewhere), of active Gleason 8 prostate cancer cells. Do I eat significant amounts of soy products? You bet I do! On balance when assessing one's protein sources, if Soy is an evil in some way, it is very much the lesser evil. Even low fat red meat contains hidden amounts of saturated fats and also contains a significant amount of the Arachidonic acid which is the Omega 6 poly-unsaturated fat that helps provide many of the growth components for my CaP. Why would I ingest intentionally something like that? The saturated fats are also associated with CaP growth and spread. Dairy foods contain lots of saturated fats with the same problem as earlier stated. They also provide an exogenous source of IGF-1. My body can make IGF-1 as needed, I don't need an extra supply so that any excess can stimulate my CaP cells. Besides I make considerable effort to minimise IGF-1 production or endeavour to ensure that it is securely bound-up by IGFBP-3 and out of active operation. I certainly do not want all the other growth factors in milk products that are suited to the rapidly dividing cells of young mammals. I'll eat the white breast meat of turkey and chicken (skinless) because it has less Arachidonic acid and more relatively harmless (except in terms of high calorie content) mono-unsaturated fat. The darker meat of both birds contains more of the 'nasty fats'. I'll eat oily fish for the highly beneficial EPA and DHA content. This leaves soy products for all the reasons enunciated earlier in this article and many more. The main qualification is that I try and restrict what I eat in terms of soy products to those that preferably have less fat content rather than what prevails in the soy bean itself. This is because Soy Bean Oil is very rich in an essential Omega 6 fatty acid Linoleic Acid that while essential to our health, can in too great a quantity, provide a raw material for our body to make the 'dangerous' Arachidonic Acid. It's the old story - too much of a 'good thing' can be dangerous. Appropriate balance is everything.

In keeping with the rhyming title.

Don't be Coy about eating Soy!

John Mayes Research/Resource Librarian



The Prostate Cancer Support Information Kits

We are making good progress in distributing 250 copies of the Association of Prostate Cancer Support Groups (SA) Inc., "Prostate Support Information Kits". Reg has posted 25 kits to various Urologists and Oncologists around Adelaide asking them to have a look at them and advise whether they would be interested in handing some of the kits out to their prostate cancer patients. We already have a number of replies and have posted out 100 of the kits. One Urologist only required the diaries and another wanted a supply of our Information Brochures and the No.3 Mr PHIP pamphlet dealing with prostate cancer after diagnosis.

Reg has photo-copied 250 letters advising men of the purpose of the kits and these are being inserted with the pamphlets. There are nine pamphlets, plus the diary and a 6 page Mr. PHIP No.3 and No.4 document in each kit. Altogether there are 2,750 pages of information contained in all the kits. One Urologist thought that this was such a good idea he has suggested that we send a kit to all the GP's in Adelaide and surrounding areas. wow! What a job!

To put you in the picture, each kit contains the following

men's health pamphlets:-

The Association's Prostate Cancer Information Brochure, Useful internet web sites such as the Lion's Club web site, Cancer Council (SA) Help Line, Erectile Dysfunction, Osteoporosis, Andrology Australia's "What Every Man Needs to Know", the Be-a-Man Pamphlet, Power of Attorney literature, the Patient Assistance Transport Scheme (mainly for country people), the 6 page Mr. PHIP No.3 and No.4 documents dealing with "Prostate Cancer after Diagnosis" and "Monitoring after Treatment" and the "Health Appointment Diary" which will be useful when making doctor's appointments etc.

The cost of the project so far (including all postages) has been \$550 and this is being covered by the special Federal Government Grant from the Cancer Support Groups Grant Program. This is greatly appreciated by the Association as without it, we would not have proceeded with the scheme. Reg thinks the scheme will prove to be popular over the next month and that we will run out of the kits. The idea was thought up by Gary Bowes, Chairman of the Association.

New Look for Lions Australian Prostate Cancer Website



Site created by Australian Prostate Cancer Collaboration

www.prostatehealth.org.au

The Lions Australian Prostate Cancer website, established in 2000 is now in its seventh year of operation and due for a facelift! It was one of the first projects of the then newly formed Australian Prostate Cancer Collaboration. The APCC is a network of urologists, scientists, educators and consumers working together to improve research, treatment, patient and community education for prostate cancer.

Funded by Lions Clubs, and designed to provide information requested by men with prostate cancer, the website gives step-by-step information on the cancer (the 'PHIP' materials), news items, access to support groups, educational resources, international websites and an online helpline: "Ask Andy". It rapidly became an important resource for Australian men newly diagnosed with prostate cancer, and currently receives 400,000 hits and 19,000 visitor sessions per month, a majority of which are from Australia. The site won a Public Health Association Award in 2002 has been commended in a recent review of international prostate cancer websites in the Journal

of Urology.

The re-design reflects a trend towards a 'flatter' structure for websites with 'at-a-glance' navigation and fewer clicks to get to the information needed. In addition there are new sections for brief questions, called 'Quick Dips', a prostate terminology quiz and navigation aids. The 'Ask Andy' section is now designed so that visitors can browse all questions on a particular topic.

The prostate cancer support group section now gives websites, so that searchers can easily 'click' on a group's own website, where one exists, to get details. Support group members can also request changes to their group's listing by visiting from the support group page and clicking on the email link: 'inquiry@prostatehealth.org.au'.

Comments and suggestions are welcome and we expect the site to continue to grow. Send any comments to website coordinator: carole.pinnock@rgh.sa.gov.au

Dr. Carole Pinnock

RAH PUBLIC HEALTH SEMINAR To Celebrate International Men's Health Week

Too Hot to Handle, Reducing the risk of burns to you and your family.

Wednesday 13th June 2007, 7-9 pm, Robson Lecture Theatre, Level 1, Eleanor Harrald Building RAH

The true impact of burn injury, Safe use of flammable liquids, Hazards of home electrical work, the DO'S and DON'Ts of LPGas, Practical demonstration of fire fighting, Correct First Aid

Speakers: Dr John Greenwood AM and Mike Atkins

Gold Coin Donation. Free Parking, Door Prizes Enquires RAH Health Promotion 8222 5193

COMMUNITY HEALTH SEMINAR MEN'S WATER WORKS ~ SATISFYING SOLUTIONS

A unique opportunity to hear about the latest treatment options & ask questions relating to your own pelvic health

SPEAKER : Dr Denby Steele ~ Urologist

DATE : Thursday 31st May at 10.30 am

Male Pelvic Health ~ Prostate Problems, Incontinence, Erectile Dysfunction

WHERE : Salisbury RSL ~ 19 Park Tce

- Do you find you sometimes leak when you lift something or play sport?
 - Do you plan your day around where the nearest toilet is?
 - Erectile dysfunction is another name for 'impotence' ~ and the majority is caused by physical problem
- Please register interest by telephoning the RSL on : 8258 6016 ~ everyone welcome, Morning tea provided

THE HEALTHY MALE

Issue 22 of Andrology Australia's "The Healthy Male" Newsletter contains some interesting facts and figures about prostate cancer. One article focuses on "The PSA Test" and answers such questions as "How well does the PSA test work for finding prostate cancer?" and "What other tests are available to check for Prostate Cancer?"

We will have a supply of these Newsletters on our front table at our meeting on Monday night, so grab yourself a copy when you are there. (note also that it is available from their website www.andrologyaustralia.org via Publications, Health Publications, Newsletters, as are all their newsletters from Issue 1 published in the of Summer 2001 to Issue 22 published in the Autumn of 2007)

Lunch Meeting with Andrew Giles PCFA CEO May 9th

On May 9 members from most of the SA support groups attended a lunch the meet Andrew Giles, CEO of the Prostate Cancer Foundation of Australia (PCFA) to discuss issues raised at the recent SAC conference in Sydney, including the affiliation status of Support Groups in S.A. and the Commonwealth Bank road show. All groups except Port Pirie were represented. Action group representatives also attended.

As mentioned elsewhere in this newsletter, the questions about affiliation and incorporation were raised at the recent SAC conference in Sydney. Emails from Andrew Giles, and words at this lunch made it clear that both the Association of Prostate Cancer Support Groups (SA) Inc. and the Prostate Cancer Action Group (SA) Inc. remain affiliated with the PCFA. The policy of groups not being permitted to be affiliated with the PCFA if they are an incorporated body only applies to new groups.

The Commonwealth Bank Funded Awareness Events were also discussed. The Commonwealth Bank (together with Woman's Weekly) has been providing funds to the PCFA to conduct prostate cancer awareness meetings around Australia. Now, it is South Australia's turn.

These meetings will be preceded in each location by a visit from the Commonwealth Bank's Road Show – a large yellow bus that is driving around Australia. That schedule is:-

20th May - Mount Gambier; 22nd May -Murray Bridge;
24th May - Victor Harbor; 5th June - Port Pirie;
11th June - Port Lincoln.



Andrew Giles, Jeff Roberts and Dean Wall

Three weeks or more after the Road show (timing depending on the availability of Urologists) full awareness events will take place. These dates and venues are yet to be confirmed. Some local assistance of prostate cancer "patients" was requested.

The PCFA has a presence in most states except for South Australia. The existence of ProstateSA has complicated the opening of an office here. Most at the meeting expressed a desire for at least a part time PCFA person being recruited to assist our support groups. The view was that perhaps if a PCFA person were available to assist the support groups with administrative and other duties, the time local group volunteers spend for their groups could be reduced and hopefully more would volunteer for positions. Andrew Giles promised to investigate further the possibility of employing someone here.

Ian Fisk

"Zometa" Trials being conducted by the Royal Adelaide Hospital

For further information please contact the Research Coordinators, Catherine Easterbrook and Olivia Corso on (08) 8222 4438 or alternatively, Professor V. R. Marshall on (08) 8222 5680. Recruitment will finish Sept 2007.

New Blood Test For Prostate Cancer

Experimental Test Detects The Cancer And Tells Whether It Is Spreading

(WebMD) An experimental blood test for prostate cancer seems to work better than the current PSA test — and can tell whether the cancer is spreading.

The new test looks for a protein called EPCA-2, early prostate cancer antigen 2. Unlike the PSA (prostate-specific antigen) protein on which the current PSA test is based, this protein isn't found in normal prostate cells. Instead, EPCA-2 occurs in relatively large amounts only in prostate cancer cells.

The test is being developed by Robert H. Getzenberg, Ph.D., director of urology research at Johns Hopkins University's Brady Urological Institute. Getzenberg began the work while still at the University of Pittsburgh; the test has been licensed to the Seattle biotech firm Onconome Inc.

"We wanted to find something that really identified people with prostate cancer and not people with enlarged or infected prostates," Getzenberg tells WebMD. "This is as close to cancer specific as we could find. We found it is very unique. It is 97 percent specific, meaning that if you test positive there's only a 3 percent chance you don't have prostate cancer."

Getzenberg has a financial interest in the test. But experts who do not stand to gain from the test agree that it has enormous potential.

Otis Brawley, M.D., chief of the solid tumor service at Emory University's Winship Cancer Institute, calls the test "important" and predicts it will be widely used.

Charles A. Coltman Jr., M.D., associate chairman for cancer control and prevention at San Antonio's Southwest Oncology Group, calls the findings "striking" and "remarkable," although he warns that the test has been tried out on only a small number of patients.

Ganesh Palapattu, M.D., assistant professor of urology at the University of Rochester, agrees that more studies must be done. But he tells WebMD that the test is a big step toward the "Holy Grail of prostate cancer detection: not so much identifying men with prostate cancer, but identifying men with prostate cancer who have aggressive disease."

"This not only helps tell whether you have prostate cancer, but what kind of prostate cancer you have," Getzenberg says.

Getzenberg and colleagues report early studies of the EPCA-2 test in the April issue of the journal *Urology*.

EPCA-2 Test Beats PSA

Nobody is entirely happy with the current PSA test for prostate cancer. A man without prostate cancer can have high PSA levels. A man with advanced prostate cancer may have

very low PSA levels.

Getzenberg's team tried out the EPCA-2 test on blood samples from several different groups of people. Some were known to have early prostate cancer or late prostate cancer, and some had other kinds of cancer. Some had enlarged prostates, but not cancer. Some were women, who have no prostate gland. And some were healthy men with normal PSA levels.

Both in terms of detecting cancer when it was actually there (sensitivity), and in terms of not detecting cancer when it wasn't actually there (specificity), the EPCA-2 test beat the PSA test.

More importantly, it beat the PSA test in predicting whether prostate cancer already had spread outside the prostate gland. When that has happened, standard treatments for prostate cancer — radical prostatectomy (surgery to remove the prostate) and brachytherapy (tiny radioactive seeds implanted in the prostate) — fail to cure.

"I predict that within the next year, this test is going to be widely used to find the guy who has prostate cancer and who, if he got radical prostatectomy, would relapse very quickly," Brawley tells WebMD. "It is going to say to this guy, 'Skip the unnecessary surgery and get pelvic radiation and hormone treatment now.'"

Getzenberg says it will be at least two years before the test is "out on the street" with FDA approval. All of the experts who spoke to WebMD agree that large-scale screening tests will be needed before it's known exactly how well the test works.

"What we really need to know is how this test behaves in all comers, when we don't already know whether the men being tested have prostate cancer," Palapattu says. "It would also be important to identify men with high risk of prostate cancer vs. low risk of prostate cancer, and to test men after prostate surgery to see whether it can predict cancer recurrence."

When, and if, the EPCA-2 test is approved, men will still need better prostate cancer tests.

"At least a third, maybe two-thirds of guys with localized disease have cancer that will never leave the prostate and never bother them," Brawley says. "This new test is not going to help those guys who get treated for prostate cancer but shouldn't. I hope there will be help for these men soon."

By Daniel DeNoon, Reviewed by Louise Chang, M.D. ©2007 WebMD, Inc.

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PCFA National Men's Health Promotion Forum – Adelaide

Saturday 6th October 2007

To be held at the Hetzel Theatre, University of South Australia

Please keep this date free – further details shortly

PSA Adelaide Newsletter

Joe Bridges

Big congratulations must go to our member **Joe Bridges** and his walking mate, **Foster Bibron**, for their **valiant effort in walking the 734 KM journey** along the Dukes and Western Highways **between Adelaide and Melbourne to raise funds for Prostate and Breast Cancer research. WELL DONE GUYS!**

73 year old Joe, a retired amateur boxer, was accompanied all the way by Foster, a former National Heavyweight Champion and a former fitness coach for the Port Power Aussie rules team. **They left Adelaide on Easter Sunday morning amid a fanfare of well wishes.** Channel 9 saw them off when they walked to the AAMI stadium and we saw a short TV news clip that night on TV. Another amateur boxer, **Mark Coombes**, walked with them on the first day of their long journey.

After a couple of days walking **they received their first donation of \$60** from a shop assistant at **Tintinara**. Later at **Keith** the local Lions Club presented them with a cheque for **\$200**. Things were looking up! **At Bordertown** another cheque was received for \$200 from the local **lady members of the Lions Club**. After much slogging along the highway and trying to dodge dozens of huge double B trucks, on the 7th day they reached **Nhill** where locals chipped in **\$180**. **At Horsham, a traveller promised \$500** if Joe would call into his house later. We are not quite sure whether Joe collected this money or not.

On arrival at **Ballarat** they attended a **civic reception** arranged for them by the local Mayor. **At the local Golf Club that night \$775 was collected after dinner** and was donated


to our hardy travellers. Eventually they arrived in **Melbourne** at the Cancer Council building where they were met by **John Famechon, Leroy Brown, Mark Zielinski** and many others from various cancer networks. **Jemma from the Cancer Council and Max Shub from the local Prostate Cancer Support Group were also on hand to greet them.**



After returning by air from Melbourne **Joe said that the walk was the most rewarding experience that he has ever had. He will be boxing with Father Dave Smith in Melbourne shortly in order to raise further funds.** Channel 9 has promised to screen the fight during one of their morning programs. **This should bring plenty of publicity in making prostate and breast cancer more aware in the community.**

Joe said he would be attending our next meeting on **Monday 21st May** and with a bit of luck we might be able to get him to tell us about some of the high-lights of his epic journey. If anyone is interested in donating money to Joe's worthy project, please post your cheques or money orders to **Ms. Sarah Thornton, Fund Raiser, The Cancer Council SA, 202 Greenhill Rd., EASTWOOD, S.A 5064.**

WELL DONE JOE AND FOSTER!


Thanks to Reg Mayes for summarizing Joe's four page story. The full story is on our website. 

Soy cancer warning hit

THE scientist who discovered soy food's chemical health benefits has hit out at the NSW Cancer Council for advising cancer patients to limit soy consumption.

Professor Kenneth Setchell, a US-based scientist who sits on Sanitarium's international soy advisory body, said Australian children should be given soy foods to protect them from

obesity, cancer and heart disease.

He spoke out against the council's warning that breast and prostate cancer patients should avoid high doses of soy because of the risk of tumours and interference with medication. Soy might even stop tumours growing, he said. *Sunday Mail* 29/4/07 

GEOFF LOVEDAY'S 1850km BIKE RIDE FOR "SECRET MENS BUSINESS" PROSTATE CANCER RESEARCH Adelaide to Coffs Harbour

Started April 22 2007 arrived Coffs Harbour 2nd May 2007 Report of ride from Geoff

"I completed the Bike Ride to Coffs Harbour last Wednesday and returned to Adelaide by air on Sunday evening. I completed the ride in 11 days covering 1,842 kilometres. I met with some adverse weather including head winds across the Hay Plains and a full day of rain. Maximum daily distances travelled ranged from 93 km to 216 km's and temperatures were generally cool. I am presently completing a diary for use in speeches and will send you a copy to look at when completed. Total raised for prostate cancer to date is in excess of \$7,100. Regards Geoff"

Geoff Loveday. 33 York Street, Adelaide, SA 5093 Phone 08 8263 7202. Mob 0408637202 Email glandhjl@aapt.net.au

This Newsletter was compiled and typed by Reg Mayes and Ian Fisk. Paul Ferrett, Ian Fisk, Reg and Amy Mayes and Jeff Roberts folded and posted the Newsletter. After re-arranging news items on his computer and supplying the photographs, Ian printed the master copy. 320 copies were distributed. Pam Fisk proof read the Newsletter. We would like to thank the Cancer Council South Australia for providing their support and particularly to Chris Noland for her contribution. The views expressed in this Newsletter do not necessarily represent the views of the Cancer Council SA. Disclaimer – The PSA (Adelaide Group) is not responsible for advice given by guest speakers, or use of products mentioned in this Newsletter. Nor are we responsible for information contained on websites, books, magazines, pamphlets or extracts from articles mentioned in this Newsletter, nor for video, DVD's or tapes distributed to members. Medical Advice should be obtained from your Doctor.