KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP NEWSLETTER

OKANAGAN PROSTATE RESOURCE CENTRE SOCIETY

Okanagan Prostate Resource Centre

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Our January meeting was the first meeting that we held in our new meeting space - The Conference Rooms at the Holiday Inn Express Hotel in Kelowna. WOW I think this new meeting space will work well for us as there is great parking and the people at the Hotel seem to be very supportive of us meeting there. We are looking forward to seeing larger crowds out to our meetings in this new location.

At this meeting I asked if any fellows who had been recently treated for their prostate cancer tell us about their experiences. We had a couple of fellows talk about their experiences.

Following these presentation several questions were also brought forward that we were able to discuss and explain.

Removing Cancers "Invisibility Cloak" -

The following is from an article that appeared in the *"Alumni UBC TREK"* magazine.

UBC researchers have discovered how cancer cells become invisible to the body's immune system, a crucial step that allows tumours to metastasize and spread throughout the body.

"The immune system is efficient at identifying and halting the emergence and spread of primary tumours, but when metastatic tumours appear the immune system is no longer able to recognize the cancer cells and stop them," says *Wilfred Jefferies,* senior author of the study working in the *Michael Smith Laboratories,* and a professor of medical genetics and microbiology and immunology at UBC. "We discovered a new mechanism that explains how metastatic tumours can outsmart the immune system and we have begun to reverse this process so tumours are revealed to the immune system once again."

Cancer cells genetically change and evolve over time. Researchers discovered that as they evolve, they may lose the ability to create a protein known as *interleukein-33,* or *IL-33.* When IL-33 disappears in the tumour, the body's immune system has no way of recognizing the cancer cells and they can begin to spread or metastasize.

The researchers found that the loss of IL-33 occurs in epithelial carcinomas, meaning cancers that begin in tissues that line the surfaces of organs. These cancers include *prostate,* kidney, breast, lung, uterine, cervical, pancreatic, skin and many others.

Working in collaboration with researchers at the *Vancouver Prostate Centre*, and studying several hundred patients, they found that patients with prostate or renal (kidney) cancers whose tumours have lost IL-33 had more rapid recurrence of their cancer over a five-year period. They will now begin studying whether testing for Il-33 is an effective way to monitor the progression of certain cancers.

"IL-33 could be among the first immune biomarkers for prostate cancer and, in the near future, we are planning to examine this in a larger sample size of patients," says *Iryna Saranchova,* a PhD student in the Department of Microbiology and Immunology and first author on the study.

Researchers have long tried to use the body's immune system to fight cancer, but only in the last few years have they identified treatments that show potential.

In this study, Saranchova, Jefferies and their colleagues at the Michael Smith Laboratories found that putting IL-33 back into metastatic cancers helped revive the immune system's ability to recognize tumours. Further research will examine whether this could be an effective cancer treatment in humans.

What is Cancer?

The following information has been obtained from several sources including the *National Cancer Institute* in the U.S., the *American Cancer Society* and others.

Cancer is the name given to a collection of related diseases. As we now know it is a disease that is caused by the uncontrolled growth of a single cell. This growth is unleashed by mutations - - changes in DNA that specifically affect genes that incite unlimited cell growth. In a normal cell, powerful genetic circuits regulate cell division and cell death. In a cancer cell, these circuits have been broken, unleashing a cell that cannot stop growing and can spread to surrounding tissues.

Cancer can start almost anywhere in the human body, which is made up of trillions of cells. Normally, human cells grow and divide to form new cells as the body needs them. When cells grow old and become damaged, they die and new cells take over.

When cancer develops, however, this orderly process breaks down. As cells become more and more abnormal, old and damaged cells survive when they should die, and new cells form when they are not needed. These extra cells can divide without stopping and may form growths called tumours.

Cancerous tumours are malignant, which means they can spread into, or invade, nearby tissues. In addition, as these tumours grow, some cancer cells can break off and travel to distant places in the body through the blood or the lymph system and form new tumours far from the original tumour.

Differences between Cancer Cells and Normal Cells -

Cancer cells differ from normal cells in many ways that allow them to grow out of control and become invasive. One important difference is that cancer cells are less specialized than normal cells. That is, whereas normal cells mature into very distinct cell types with specific functions , cancer cells do not. This is one reason that, unlike normal cells, cancer cells continue to divide without stopping.

Cancer cells are also often able to evade the immune system, a network of organs, tissues, and specialized cells that protects the body from infections and other conditions. Although, the immune system normally removes damaged or abnormal cells from the body, some cancer cells are able "hide" from the immune system.

Tumours can also use the immune system to stay alive and grow. For example, with the help of certain immune system cells that normally prevent a runaway immune response, cancer cells can actually keep the immune system from killing cancer cells.

When Cancer Spreads -

A cancer that has spread from the place where it first started to another place in the body is called metastatic cancer. The process by which cancer cell spread to other parts of the body is called metastasis.

Metastatic cancer has the same name and the same type of cancer cells as the original, or primary cancer. For example, prostate cancer that spreads to the bone is called metastatic prostate cancer of the bone. If prostate cancer

spreads to other organs it is prostate cancer of that organ.

Under a microscope, metastatic cancer cells look the same as cells of the original cancer.

Types of Cancer -

There are several different types of cancer. Prostate cancer in normally referred to as *Adenocarcinoma.* This is a cancer that forms in epithelial cells that produce fluids or mucus.

How are Cancers Different? -

Some cancers spread and grow fast. Others grow more slowly. They also respond to treatments in different ways. One prominent physician referrers to prostate cancer as being either turtles or birds. Turtles are those prostate cancer cells that grow very, very slowly and will never cause problems, whereas, others are like birds and will take off and spread very, very fast.

WITT'S WIT (ON THE LIGHTER SIDE) -

Male Logic.....Flawless

This is a conversation between and man and his wife. Please note that she asks five or six questions which he answered quite simply, but then she is speechless after answering only one question. I bet this happens more often than not to most husbands out there:

Woman: Do You drink beer?

Man: Yes.

Woman: How many beers a day?

Man: Usually about three.

Woman: How much do you pay per beer?

Man: $5.00 which includes a tip (this is where it gets scary!)

Woman: How long have you been drinking?

Man: About 20 years, I suppose.

Woman: So a beer costs $5.00 and you have three beers a day which puts our spending each month at $450.00. In one year, it would be approximately $5,400.00 correct?

Man: Correct.

Woman: If in one year you spend $5,400.00, not accounting for inflation, the past 20 years puts your spending at $108,000.00.

Man: Correct

Woman: Do you know that if you didn't drink so much beer, that money could have been put into a step-up interest savings account and after accounting for compound interest for the past 20 years you could have bought an airplane?

Man: Do you drink beer?

Woman: No

Man : Where is your airplane?

PSA Testing Declining Faster With Primary Care Physicians Than Urologists:

The following was obtained from the January 2017 issue of *The Digital Examiner* - The Calgary Prostate Cancer Support Group's Newsletter - with some information that was obtained from the original article. The original article was published in February 2016 - *by Dave Levitan in Prostate Cancer, Genitourinary Cancers Practice & Policy, Screening*..

The 2012 change in guidelines report regarding prostate-specific antigen (PSA) testing for prostate cancer had a different effect on testing rates depending on which physician specialty was doing the testing, according to a new study. Primary care physicians showed a marked decline in PSA tests administered, while urologists had only a slight drop in testing.

The use of PSA testing was and remains controversial. In May 2012 the US Preventive Services Task Force (USPSTF) recommended against the test to detect prostate cancer in men, writing that "there is moderate certainty that the benefits of PSA-based screening for prostate cancer do not outweigh the harms."

The new study, led by *Michael E. Zavaski, M.D., of Brigham and Women's Hospital in Boston,* compared PSA testing rates on the National Ambulatory Medical Care Survey in 2010 and 2012. They included a total of 1,222 physician visits, including 113 to urologists and 1,109 to primary care physicians (PCPs). These visits (after exclusions for men with a diagnosis of prostate cancer or other prostate disorders) were weighted to reflect the US population, yielding a weighted sample of 27 million total visits of which 800,000 were to a urologist.

Among the PCP visits, the use of PSA testing declined from 36.5% in 2010 to 16.4 % in 2012. The rate only decreased slightly among urologists from 38.7% in 2010 to 34.5% in 2012.

The Calgary article also noted that at the time of the writing of the article they were not aware of a Canadian study that shows a similar reduction in PSA testing by primary care physicians resulting from the 2014 Canadian Task Force on Preventative Health Care that also recommended against PSA testing

The Kelowna Prostate Cancer Support & Awareness group does not recommend treatment modalities or physicians: However, all information is fully shared and is confidential. The information contained in this newsletter is not intended to replace the services of your health professionals regarding matters of your personal health.

The Kelowna Prostate Cancer Support & Awareness Group would like to thank Janssen - manufacturer of Zytiga® - Abiraterone for their support in producing this newsletter.

janssen

UP COMING MEETING DATES FOR 2017

March 11th. - April 8th. - May 13th & June 10th.

Meeting Information: PLEASE NOTE THE LOCATION OF OUR MEETINGS HAS CHANGED

Our regular monthly meetings are held on the second Saturday of each month in the *Aberdeen - Pandosy Rooms at the Holiday Inn Express Conference Rooms - 2429 Hwy 97 North, at the Holiday Inn Express Hotel* located next to the Canadian Tire Gas Bar. Our meetings begin at 9:00 A.M. and are generally over by 11:00 A.M.

Thank you for helping us "Win the War Against Prostate Cancer."

The Okanagan Prostate Resource Centre operates on donations. We would like to thank the Companies, Service Clubs, Organizations and Individuals that have made donations in order to help us operate this very valuable center. If you wish to make a donation please feel free to fill out the form below. Your support is gratefully appreciated. Our official Registered Charitable Number is - 89269 1718 RR0001

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