



KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP

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We hope this newsletter is still finding everyone keeping safe and healthy. We are sorry that we are still unable to hold face to face in person monthly meetings, however, I will try to keep everyone up to date through this newsletter.

I have mentioned in the past that I have taken part in some virtual prostate cancer meetings using the Zoom App. One of the latest ones I was involved with featured *Dr. Simon Bergman, MD, PhD*, a Professor of Pathology and Molecular Medicine at Queens University, Kingston Ont. Dr. Bergman gave us a very interesting and educational presentation on the work of a pathologist. He showed some slides showing what a biopsy looks like when viewed through the microscope and he indicated what the cancer cells look like. One of his slides indicated that the grade of the cancer indicates how fast the cancer cells are likely to spread. One of the goals of his research is to find a way to eventually eliminate needle biopsies and develop either urine or bloods tests that will be as or more accurate than the needle biopsy.

About Prostate Cancer – An Overview of Risk Factors and Treatment

The following is information from the *Wellness Connection Fall & Winter 2020* – A publication by Costco

– Most of the information contained in this article is familiar to most of us but I thought it might be of interest to share with families and friends.

Prostate Cancer is the Most Common Cancer in Canadian Men, affecting one in nine men. Although a cancer diagnosis is life-changing in every circumstance, prostate cancer usually progresses slowly and can often be successfully managed. In fact, 93% of Canadian men diagnosed with prostate cancer survive five or more years. To understand how doctors screen for prostate cancer and the range of treatment options lets start with the basics.

What is the Prostate?

The prostate is a walnut-sized organ that sits just below the bladder and is part of a man's reproductive and urinary systems. When prostate cells grow abnormally, they can form a mass of cancerous cells (a tumour) in the prostate.

Who is at Risk of Prostate Cancer?

Experts don't know the exact causes of prostate cancer, but they have identified certain risk factors that may increase a man's chance of getting it.

These include:

- Older age: 99% of prostate cancers occur in men over 50
- Family history and/or inherited gene mutations
- Ethnicity (African ancestry)
- Diet high in fat, red meat and dairy

What are the Common Signs and Symptoms?

In its early stages, prostate cancer does not typically cause any symptoms. Since the cancer usually grows slowly, it can take years before men notice any problems.

The most common changes that men notice are problems with urinating. Talk to your doctor if you are having any of the following:

- Not being able to urinate at all
- Having a hard time starting or stopping the flow of urine
- Having to urinate often especially at night
- Having pain or burning on urination
- Having a deep and frequent pain in your lower back, belly, hip, or pelvis.

These symptoms should not cause immediate alarm, as they may be caused by other medical conditions, such as benign prostatic hyperplasia (BPH), where the prostate grows larger without cancerous cells.

How is Prostate Cancer Diagnosed?

It is important to see your doctor for a proper diagnosis, in part, through a **PSA** blood test. It measures the amount of PSA (protein specific antigen) produced by the prostate in the blood.

Although low levels of PSA are normally found in the blood, a high PSA level may indicate the presence of cancer. The diagnosis is complicated because there are other reasons besides cancer that may increase PSA levels.

- Enlarged Prostate
- Infection
- Vigorous exercise
- Recent ejaculation
- Certain medical procedures, such as a prostate biopsy

If your PSA is higher than normal, your doctor will consider other factors, such as your age and general health, before deciding what to do next. [Your family physician will generally refer you to a specialist known as a Urologist]. Depending on these factors, your doctor may recommend that you simply have another PSA test in the future, or may recommend further tests, like a biopsy. During a biopsy, a doctor takes [8-12] tissue samples from your prostate gland and sends the sample to the [pathology] lab for testing.

In addition to helping detect prostate cancer, the PSA test is often used to monitor how well men are responding to treatment. It can also indicate whether or not the cancer is spreading, or if it has returned after being in remission.

Who Should Get Tested?

The decision for your doctor to recommend a PSA test is based on your personal risk factors.

- Since men of African ancestry and those with a family history of prostate cancer are considered to be at high risk, they should consider testing from age 45
- Most commonly, those at average risk of developing prostate cancer should consider testing from age 50

After that, your frequency of testing in the future will depend on your previous PSA levels.

How is Prostate Cancer Treated?

As with other cancers, treatment works best when prostate cancer is found early. When creating a treatment plan, your health care team will consider the type of cancer cells found, how far they have spread, age, general health, and your preferences. Common treatment options include.

- **Active Surveillance:** the health care team simply watches for signs of and symptoms that show that the cancer is starting to grow or spread (called disease progression) before beginning active treatment. [This will generally mean another biopsy within 12-18 months].
- **Surgery:** depending on the type of cancer [Stage & Grade] and your overall health, your doctor may

recommend surgery to remove the prostate gland.

- **Radiation Therapy:** High doses of radiation are used to destroy cancer cells. [At BC Cancer Kelowna they have three different types of radiation therapy that can be used to treat prostate cancer. These include external beam radiotherapy, low dose rate brachytherapy and high dose rate brachytherapy. It is up to the Radiation Oncologists as to which treatment will be the best treatment for the patient].
- **Hormonal Therapy:** this is most often used to treat advanced prostate cancer or cancer that comes back after other treatments. [Today there are several types treatment options including antiandrogen medications available to treat advanced prostate cancers].
- **Chemotherapy:** this is most often used to treat advanced prostate cancer or cancers that come back after other treatments.

Since each type of treatment has its own advantages and disadvantages, your doctor will help you choose the option that is right for you. Despite the fact that prostate cancer can often be successfully managed, it can be challenging to understand this disease and navigate the appropriate next steps. Staying active in your treatment can make you feel more confident in those very steps.

WITT'S WIT (ON THE LIGHTER SIDE) -

Car Keys

They weren't in my pockets. Suddenly I realized I must have left them in the car. Frantically, I headed for the parking lot. My husband has scolded me many times for leaving my keys in the car's ignition. He's afraid that the car could be stolen. As I looked around the parking lot, I realized he was right. The parking lot was empty. I immediately called the police. I gave them my location, confessed that I had left my keys in the car, and that it had been stolen. Then I made the most difficult call of all to my husband: "I left my keys in the car and its been stolen." There was a moment of silence. I thought the call had been disconnected, but then I heard his voice. "Are you kidding me?" he barked, "I dropped you off!" Now it was my turn to be silent.

Embarrassed, I said, "Well come and get me."

He retorted, "I will as soon as I convince this cop that I didn't steal the damn car!"

Welcome to the Golden Years

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 - and TerSera for their support and their educational grants towards our newsletters and our support group.



UP COMING MEETING DATES FOR 2020 -

Due to the COVID-19 virus we are still NOT holding monthly Support group Meetings.

NOTE: I will be in touch with everyone whenever it is safe to get back to holding regular meetings.

NOTE: Many of our past newsletters are available for viewing and printing through our website. - www.kelownaprostate.com

- A big *Thank You to Doris at Affordable Web Design for all her work on our website.*

