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vonne and I hope that everyone is keeping well during this extended time dealing with the COVID – 19 Pandemic. We are still not sure when we will be able to hold in person meetings, however, if anyone has any questions or concerns that I may be able to help with please be sure to contact me at the above phone number.

The following is a very short excerpt of information I received from ESSA pharma in Vancouver dated Oct.9, 2021 regarding their new drug EPI-7386 which is being used to treat men with Metastatic Castration-Resistant Prostate Cancer (MCRPC). "We are excited by the data presented today, which support ESSA's novel approach to prostate cancer by definitively demonstrating that EPI-7386 binds to the N-terminal domain of the androgen receptor – the primary driver of prostate cancer growth," said Dr. David R. Parkinson, M.D., President and Chief Executive Officer of ESSA pharma Inc. "Through this unique mechanism of AR (androgen receptor) inhibition, EPI-7386 can inhibit AR driven biology in both full length and splice variant-driven prostate cancer models. Additionally, the data demonstrate that the combination of EPI-7386 with enzalutamide results in complete inhibition of genome-wide androgen-induced AR binding, supporting the rationale for our upcoming Phase1/2 combination trials of EPI-7386 with approved antiandrogens in patients with metastatic castration-resistant prostate cancer."

Canadian Men Among the First in the World to Trial New AT-Home Prostate Cancer Test –

The following was obtained from the Internet and originated with Movember Canada June 15, 2021

ovember, Canada's leading men's health organization announced today that a group of 75 Canadian men have been selected to trial a home test kit for prostate cancer. The Prostate Urine Risk (PUR) test, which has been developed by a research team from the *University of East Anglia* in the United Kingdom, is intended to diagnose aggressive prostate cancer and in a pilot, study predicted which patients required treatment up to five years earlier than standard clinical methods.

Prostate Cancer is the most common cancer in Canadian men – 63 men are diagnosed, and 11 men die from the disease every day. The current trial will involve thousands of men from around the world and, pending results, may mean the PUR test could be available to men in as many as three years.

The PUR test aims to identify biomarkers for prostate cancer present in men's urine, specifically the level of Gleason 4 within the prostate. The test hopes to minimize the overtreatment of prostate cancer, distinguish and instead help aggressive cancer requiring non-aggressive treatment from cancers that may not require treatment, right at the time of diagnosis. Although prostate cancer can be diagnosed via a blood test and biopsy, it can be difficult for clinicians to distinguish between indolent cases and those that may become life threatening. identifying these nonaggressive cancers earlier, men can potentially unnecessary avoid treatment. specifically the commonly associated treatment side like effects impotence.

The PUR test has been previously tested on a small group of participants. However, in the next phase of the research study, it will be rolled to men in the UK, Italy, Germany, and include 75 men participating through the *University* of Calgary who are undergoing active surveillance for prostate cancer. The test would revolutionize the diagnosis of prostate cancer, allowing men to provide a urine

sample in the comfort of their own home, instead of going into a clinic or having to undergo an uncomfortable biopsy.

"Prostate cancer usually develops slowly, and the majority of cancers will not require treatment in a man's lifetime. However, doctors struggle to predict which tumors will become aggressive, making it hard to decide on treatment for many men." said lead researcher Dr. Jeremy Clark, from UEA's Norwich Medical School. "The PUR test can accurately predict when a man's disease will become aggressive and require treatment, with the added advantage of allowing complete it at home. Reducing doctor visits and stress levels will hopefully result in more patients getting tested and more lives saved."

"The PUR test has great potential to transform the way prostate cancer is managed," said *Todd Minerson*, Country Director, Movember Canada. "Not only can it accurately predict when a man's disease will become aggressive and require treatment, but it has the added advantage of allowing men to complete it at home. It's a gamechanger made possible in part from the thousands of Canadians that participate in Movember year over year."

The PUR test was funded through Movember's Global Action Plan (GAP), bringing together international researchers to collaborate on global initiatives at addressing key issues affecting men with prostate or testicular cancer.

WITT'S WIT (ON THE LIGHTER SIDE) -

Grandpa's Face

A little girl was sitting next to her grandfather as he read her a bedtime story. From time to time, she would take her eyes off the book and reach up and touch his wrinkled cheek. She touched her own cheek after she touched his.

After a little while of thinking she asked, "Grandpa, did God make you?"

He looked at her and said, "Yes, sweetheart, God mad me a long time ago."

She paused for a few seconds and then asked, Grandpa, did God make me too?"

He replied, "Yes indeed pumpkin, God made you just a little while ago."

Feeling their respective faces again, she whispered to him, "God's getting better at it, isn't he!"

Male Circumcision and Prostate Cancer: A Meta-Analysis –

The following is an excerpt of and article that was obtained from the Internet and *DocWire News* and originated with the *Canadian Journal of Urology Aug. 28, 2021*

INTRODUCTION – The relationship between circumcision and prostate

cancer has been controversial. A recently published meta-analysis contradicted previous meta-analyses of male circumcision and prostate cancer risk. Our aim was to conduct a de novo meta-analysis and critically evaluate this recent paper published by Van Howe.

MATERIALS AND METHODS – We retrieved data from each of the 12-source studies Van Howe used, then performed a random effects meta-analysis of those data. We critically examined the data and other information in Van Howe's study.

RESULTS – Using the same values as Van Howe, we confirmed his finding of a positive association of circumcision with prostate cancer. However, our independent meta-analysis found a negative association of circumcision with prostate cancer. The reason for this critical discrepancy was Van Howe's erroneous transposition of values for circumcised and uncircumcised men in his Table columns, leading to inversion of the result. We further critically evaluated a geographical analysis and cost analysis of circumcision and prostate cancer, as well as claims denying a role for sexually transmitted infections in prostate cancer etiology, finding these too to be misleading.

CONCLUSIONS – Van Howe's 2009 meta-analysis was based in erroneous data transposition leading to an inverted outcome. The journal being concerned, recently corrected his Table. Van Howe's claim of a positive association of circumcision with country-level-age standardized prostate cancer prevalence and his cost analysis were found to be questionable. Our meta-analysis showed that circumcision is associated with *lower prostate cancer risk*.

Fatigue prevalence in men treated for prostate cancer –

The following in an excerpt of information that was originally published in *World J Clin Cases*, 2021 July 26 and was obtained from *DocWire News* –

BACKGROUND: The side effects of prostate cancer (PCa) treatment are very prominent, with cancer-related fatigue (CRF) being the most common. Fatigue is a distressing symptom that interferes with daily functioning and seriously affects patients' quality of life during, and for many years, after treatment. However, compared with other types of cancer, such as breast cancer, little is known about the prevalence of PCa-related fatigue.

AIM: To determine the prevalence of CRF in patients with PCa.

METHODS: A systematic search of several different web bases including PubMed, Web of Science, and many others. The included studies measured the incidence of PCa-related fatigue and differentiated fatique outcomes (incidence) between treatment modalities and fatigue assessment times. In our meta-analysis, both fixed and random-effects models were used to estimate the pooled prevalence of PCa-related fatigue. Subgroup analyses were performed using treatment modalities and fatigue assessment times. Publication and sensitivity bias analyses were performed to test the robustness of the association.

RESULTS: Fourteen studies, involving 4,736 patients were eligible for the The results of the subgroup review. showed the prevalence of CRF after androgen-deprivation therapy treatment 42%, 21% after radical was and 40% after prostatectomy radiotherapy. The prevalence of acute and persistent fatigue was 44% -

androgen deprivation therapy, 29% - radical prostatectomy and 17% radiotherapy.

CONCLUSION: Our meta-analysis showed that fatigue is a common symptom in men with PCa, especially those using hormone therapy.

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 2021 –

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.