



KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP

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Our special guest presenter at our Prostate Cancer support Group Meeting in May was Dr. Michael Carter one of our local Kelowna Urologists. Dr. Carter opened the meeting up to taking questions from those in attendance. Everyone thought that this was a great idea.

Dr. Carter mentioned that he has been in practice in Kelowna for 24 years, so he is very experienced in his field.

One of the first questions asked related to the use of Radium 223 for the treatment of metastatic prostate cancer that has specifically gone to bone. Dr. Carter mentioned that prostate cancer has a great affinity to spread to bone but can also go to liver and lung, but that is not as common as spreading to bone. He explained the use of Radium 223 and also mentioned that the radio isotope used is extremely expensive, and we do not have a PET/CT in Kelowna at the present time but there is fundraising taking place to bring this equipment to Kelowna.

Dr. Carter spent quite a while on both the use of PSA and the Gleason score he mentioned that he went over 8 years of data and found that over this 8-year period 72% of the patients diagnosed with prostate cancer had a Gleason Score of $3+4 = 7$.

Sexual function following treatment was also brought up by some of those present. Dr. Carter mentioned that sexual dysfunction can happen immediately following surgery but that there are things that can help such as PDE5 inhibitors etc. but about 1/3 of men can still suffer from this after treatment. Sexual dysfunction can also happen following Brachytherapy but in this case, it doesn't happen immediately but tends to tail off after about 2 years or so.

Dr. Carter mentioned a fellow from Edmonton *Timothy Caulfield* that has some very interesting videos.

This was an extremely interesting and educational meeting that was enjoyed by all those present.

Abiraterone is Effective and Should be Considered for the Treatment of Metastatic Castrate-Naïve Prostate Cancer -

The following was published on March 8, 2018 by a Division of Hematology/Oncology, Department of Medicine, George Washington School of Medicine and Health Sciences, Washington, DC, USA.

Androgen deprivation therapy (ADT) has been the standard of care for the treatment of newly diagnosed metastatic prostate cancer for the past 70 years. Furthermore, adding docetaxel chemotherapy to ADT significantly improved patient survival, and thus became the new standard for patients with high volume disease. However, recent evidence has called this treatment strategy into question since a published study has shown that the drug abiraterone has a similar benefit to docetaxel in a similar patient population group but with less toxicity. The following article considers this key paper and its implications. Areas covered: In this key paper evaluation, the authors discuss the national, trial design and results of the LATITUDE trial. Furthermore, the past and current standard of care of metastatic castrate-naïve prostate cancer (mCNPC) is discussed, while the authors also compare abiraterone and docetaxel in terms of benefit, safety profile, and affordability. Expert opinion: Abiraterone is highly effective and has an excellent safety profile for the treatment of metastatic castrate-

naïve prostate cancer. It is the authors' opinion that it should now be considered the new standard of care.

Expert opinion on pharmacotherapy Mar. 1, 2018 - Jacob. M. Elkon, Ralph L. Millett, Kristin F. Millado, Jianqing Lin.

NOTE: Please note these are U.S. recommendations.

WITT'S WIT (ON THE LIGHTER SIDE) -

A Scottish Tale

A young Scottish lad and lass were sitting on a low stone wall, holding hands, gazing out over the loch.

For several minutes they sat silently.

Then finally the girl looked at the boy and said, "A penny for your thoughts, Angus." "Well, uh, I was thinkin perhaps it's about time for a wee kiss."

The girl blushed, then leaned over and kissed him lightly on the cheek. Then he blushed.

The two turned once again to gaze out over the loch.

Minutes passed, and the girl spoke again, "A penny for your thoughts, Angus." "Well, uh, I was thinkin' perhaps it's about time for a wee cuddle.

The girl blushed, then leaned over and cuddled him for a few seconds. Then he blushed.

And the two turned once again to gaze out over the loch.

After a while, she again said, "Another penny for your thoughts, Angus." "Well, uh, I was thinkin' perhaps it's about time I put my hand on your leg."

The girl blushed, then took his hand and put it on her knee. Then he blushed.

The two turned once again to gaze out over the loch before the girl spoke again. "Another penny for your thoughts, Angus." The young man glanced down with a furled brow.

"Well, noo," he said, "my thoughts are a bit more wee serious this time." "Really?", said the lass in a whisper, filled with anticipation.

"Aye," said the lad nodding.

The girl looked away in shyness, began to blush, and bit her lip in an anticipation of the ultimate request. *Then he said, "Dae ye think it's about time ye paid me the first three pennies."*

His Prostate Cancer Becomes Her Struggle Too -

The following was published on March 23, 2018 by *HealthDay News*.

Difficulties tied to prostate cancer may not be limited to men.

Many wives of men with advanced prostate cancer say their husband's illness has harmed their own health, a new study finds.

"Many prostate cancer patients have a hard time, both physically and emotionally. This work shows that this stress can spill over and affect wives and partners," said *Hein Van Poppel*, a European Association of Urology (EAU) spokesman.

"This isn't good for either of them. Good mental and emotional health needs to be part of how we judge treatment, and we need to try and ensure that both patients and their partners get the support they both need," Van Poppel said in an association news release.

While the impact of prostate cancer and its treatment on men has been widely studied, there has been little examination of how patients' partners are affected, the association noted.

In this study, Danish researchers interviewed 56 women whose husbands had advanced prostate cancer. The men were being treated with hormone therapy meant to reduce production of testosterone. This treatment can

lead to fatigue, frailty and loss of sex drive.

Forty-six percent of the wives said their health had been affected by their partner's cancer.

Adding in-depth interviews with eight of the women revealed that many felt fearful and cut off from other. They were concerned about how their lives would change as their husband's disease progressed.

According to study co-leader, *Jeanne Avlastenok*, many felt increasingly socially isolated. Their husbands were fatigued both by the illness and by the treatment, which meant they couldn't socialize as a couple, which made the women feel cut off from social support.

"They also gradually developed a real fear of being alone, even within the relationship," added Avlastenok, a registered nurse. "They feel that they had to be strong, which meant that they couldn't share the burden of the illness."

The women were also worried about the role change in their relationship.

"As their men became less able to fulfill their usual roles, the women had to undertake tasks which had been previously fallen to the men. Many of these are simple tasks, but for the women they represented a sea of change in the way their lives were structured," Avlastenok said.

The study was presented on March 25th at the EAU meeting in Copenhagen, Denmark. Research

presented at meeting should be considered preliminary because it hasn't been peer-reviewed for publication in a medical journal.

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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.



UP COMING MEETING DATES FOR 2018 – NOTE: No meetings July and August.

September 8th - October 13th - November 10th - December 8th -

Meeting Location:

Our meetings take place in the Harvest Room at the Trinity Baptist Church located at the corner of Springfield Rd. and Spall Rd. enter through the South Entrance. The meeting begins at 9:00 A.M. Doors open at 8:30 A.M. The Harvest Room is located on the second floor and there is elevator access if required.