



KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP

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It was great to welcome Dr. Lauren Capozzi to our meeting in March. Dr. Capozzi is an MD, PhD, a Cancer Physiatrist and the Provincial Medical Director of Cancer Rehabilitation at BC Cancer, and is the first Cancer Physiatrist to be hired by BC Cancer in B.C. She is a clinician-scientist and exercise physiologist whose work focuses on integrating rehabilitation and exercise into routine oncology care in order to improve a patient's function, recovery and quality of life for those people living with and beyond cancer. Dr. Capozzi's research and health-system initiatives emphasize on the early identification of physical impairment and the development of scalable, equitable rehabilitation models across the cancer care continuum. Dr. Capozzi has delivered over 100 research and educational presentations. Dr. Capozzi sees patients a couple of days of week in Kelowna and is also very busy doing research. We are very fortunate to have Dr. Capozzi at our Cancer Centre in Kelowna. Cancer Rehabilitation includes Cancer Rehabilitation Medicine, Physiotherapy, Occupational Therapy, Vocational Rehabilitation, Lymphedema Specialists, Nutrition Services, Speech-Language Pathology and Nursing.

Dr. Capozzi gave a very interesting, and educational presentation about her program, and research taking place in Kelowna, and followed up by taking questions from many in the room. She also handed out a pamphlet explaining her program in Kelowna.

If you wish to have your name removed from this contact list please let me know and I will remove your information.

NIC Instructor Receives \$10K Grant to Bring Prostate Cancer Research into the Classroom

The following originated with CHEK News by Erin Haluschak and was published on Jan. 25, 2026.

A North Island College (NIC) biology instructor has received a \$10,000.00 grant from Prostate Cancer Foundation Canada to give students hands-on experience with real-world biomedical research.

The funding will be used to design a new series of lab activities for third-year Island pre-health and associate of science students, using prostate cancer as a case study to teach modern diagnostic and research techniques.

“This is a knowledge translation grant,” said Rishi Somvanshi, and NIC biology and pre-health science instructor. “With the PFC KT grant, we will have tools and resources to plan and deliver labs, and that means a richer connection to the science they’re studying.”

The grant will support eight to nine new labs in Biology 301, a general biochemistry course that is part of NIC’s Island Pre-Health Science Advanced Diploma. The program was launched in 2023 to prepare students for careers in medicine, dentistry, pharmacy, physiotherapy and other health related fields.

Students will work with advanced biomedical tools learning how to analyze tissue samples, identify disease markers and use bioinformatics to study protein structures and mutations.

The funding will be used to purchase lab supplies such as samples, reagents and other materials needed for biomedical and diagnostic testing. Although Somvanshi applied for just \$8,000, the foundation awarded the full \$10,000, giving the program more flexibility.

PCFC says the project will help improve prostate cancer care while also supporting the next generation of researchers.

“I think students realize the potential,” said Neil Cruickshank, NIC’s

dean of arts, science and management. “They realize it’s not an abstraction anymore.”

Somvanshi said colleges are not typically recipients of these grants, making the award notable for NIC. The project also supports applied research through the college’s Centre for Applied Research Technology and Innovation, with equipment and curriculum development that can be used in other programs and future research.

The labs are expected to give students practical skills that can be carried forward into university studies and careers in health care, while also raising awareness about prostate cancer and the science behind its diagnosis and treatment.

Witt’s Wit (On the Lighter Side:)

Ever notice how some nurses will spend 20 minutes looking for a blood-vein, while a mosquito can locate that sun-of-a-gun within 5 seconds in the dark while humming a tune.

More Prostate Cancer Cases Diagnosed at Stage 4

The following information was sent to me and was published in the *Globe and Mail* on December 1, 2025, by Kelly Grant, health reporter

More cases of prostate cancer were diagnoses at Stage 4 in recent years compared with about a decade earlier, a development

that experts behind a new study suggest could be linked with official recommendations discouraging the use of the hotly debated screening test.

The prostate-specific antigen test (PSA) is a simple blood test that can serve as an early warning signal of cancer in men with no symptoms. But the test also has risks: It can lead to overdiagnosis and overtreatment of slow-growing prostate tumours that might never have caused harm had they remained undiscovered.

For that reason, a national task force in the United States recommended against screening with the PSA test in 2012. Two years later, a Canadian task force, which had never endorsed the test for screening, followed suit.

The new study, published online on Saturday Nov. 29 in the journal *Current Oncology*, looks at what happened in Canada before and after the U.S. recommendations changed in 2012. American guidelines often influence how Canadian doctors practice, said Anna Wilkinson, a general-practitioner oncologist at The Ottawa Hospital and lead author of the new study.

One key finding was that rates of prostate cancer discovered at Stage 4, when the disease is metastatic and incurable, increased about 50 per cent in Canadian men aged 50-74 between 2010 and 2021. Late-stage diagnoses rose by about 65 per cent in men 75 and older during the same period.

"I think that we stopped screening and men are presenting, clinically, with advanced disease - advanced, incurable disease," Dr. Wilkinson said.

Prostate Cancer Screening should focus on those with elevated risks, experts say she and her co-authors from Statistics Canada, the University of Ottawa, and the University of British Columbia analyzed nearly 544,000 prostate cancer cases and nearly 149,000 prostate cancer deaths reported to Statscan between 1984 and 2021.

Along with their findings on late-stage diagnoses, the researchers determined that prostate-cancer mortality decreased in Canada after PSA screening became widely available in the early 1990s, despite no formal recommendation in favour of it.

Prostate cancer treatment options improved significantly during that time frame, which Dr. Wilkinson said should have led to a steeper decline in mortality rates than what the data show.

However, as James Dickinson, one of the authors of the 2014 Canadian recommendation against PSA screening, pointed out, the new study does not include data on whether or not men took a PSA test before learning they had prostate cancer.

"It can't tell us about the effect of screening," said Dickinson, a family doctor and adjunct professor at the University of Calgary.

When and how should I be screened for prostate cancer?

Dr. Dickinson also said by e-mail that the increase in Stage 4 diagnoses could reflect improvements in imaging technology that make it easier to detect the spread of cancer outside the prostate.

“Therefore, the numbers have risen, not because there is more Stage 4 cancer, but because we are diagnosing it better,” he wrote.

The new research was published as Canadians await a revised official recommendation on PSA screening.

In March, former health minister Mark Holland ordered the Canadian Task Force on Preventive Health Care – the independent panel that crafted the 2014 PSA advice – to pause its work until an external review could be completed.

Ottawa halts work of task force on cancer screening, the task force was revisiting its advice on prostate-cancer screening when the halt was called.

The external review was released in June. It recommended the task force be “modernized.” A revamped task force is expected to be up and running by April 2026.

Dr. Morgan said he would like to see an updated recommendation emphasize shared decision-making between doctors and men in their 50s and 60s about whether a PSA test is right for them, depending on individual circumstances. The U.S. task force updated its guidelines in 2018 to say that the decision to be screened “should be an individual one” for men aged 55 to 69, in consultation with their doctor.

“PSA screening right now is done ad hoc,” he said, adding that in some provinces, including B.C. and Ontario men must pay out of pocket for PSA screening tests.

“Men really have to advocate for themselves and have a primary provider

who’s willing to order it, so that is yet another barrier.

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 educational grants that go towards our newsletters and our support group.



UP COMING MEETING DATES FOR - 2025 – 2026

May 9, June 13 -

Meeting Location:

Our meetings take place in the Harvest Room at Trinity Church located at the corner of Springfield Road and Spall Road. Please enter through the South Entrance off the main parking lot and follow the signs upstairs to the Harvest Room. Our meetings begin at 9:00 A.M. and the doors open at 8:30 A.M. There is elevator access if needed.

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*

