



KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP

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VOLUME 26 – ISSUE 10 – (NUMBER 294) – JUNE 2024

We had a great support group meeting in May. We did something that we haven't done for quite a while. I asked each of those present to please stand up and give a brief presentation on their prostate cancer diagnosis including the type of treatment they had as well as how they are doing today. We went around the room and it was very interesting to hear everyone's stories and their journey with prostate cancer. We heard from men who had surgery as well as the different types of radiation. With over 25 present it was great to hear the different stories and the journeys these men are going through.

Most are doing well following their treatment, however, a couple of those present indicated that their cancer has returned following treatment, and they are now on ADT (hormone therapy).

This is the last Kelowna Prostate cancer Support Group Newsletter until September as I take a couple of months off for some needed R&R time. We hope everyone who receives this newsletter enjoys it and will enjoy the Summer.

If you no longer wish to receive this newsletter, please let me know and I will remove your contact information.

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| <p>Dr. Patrick Walsh – 50 Years at Johns Hopkins Medicine and the Brady Urological Institute</p> |
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The following is an excerpt of information that was obtained from the Internet and originated with the *Discovery Magazine Winter 2024*.

Fifty years ago, Johns Hopkins Medicine made one of its smartest moves ever. When it came time to find a successor for the Director of Urology, Hopkins has the foresight to hire a young guy, a brilliant surgeon-scientist, fresh out of his 10-year training journey.

As the search committee wrote to the Schools of Medicine's Advisory Board, Patrick Craig Walsh, M.D., represented "a unique opportunity for bringing to the Johns Hopkins Hospital a young, excellently trained clinician investigator who will be a great stimulus to the future development of the currently outstanding urology program."

On July 1, 1974, Walsh age 36, started work as the third Professor and Director of the *James Buchanan Brady Urological Institute*, a position he held for 30 years. During his tenure, the Brady became a world-class center for urological patient care, research, and training.

Recruiting Great Faculty

Walsh's faculty recruits read like a "Who's Who" of urology that among others included Dr. Robert Jeffs from Toronto's Hospital for Sick Children to head the new Division of Pediatric Urology.

Revolutionising Surgery

The first radical prostatectomy was performed at Hopkins in 1904, but by Walsh's time, it was rarely performed because of its terrible side effects: impotence, incontinence, and excessive bleeding. Based on anatomical studies, Walsh developed a procedure that created a "bloodless field" – allowing surgeons to see what they were doing! In 1977 one of his patients told Walsh that he was potent after his radical prostatectomy at a time when this seemed impossible, because it was thought that the

nerves that controlled erections were contained within the prostate gland itself. Then in early 1981 together with Dutch urologist Dr. Pieter Donker, they discovered the location of the microscopic nerves that controlled erections. On April 26, 1982 Walsh performed the world's first purposeful nerve-sparing radical prostatectomy and revolutionized the treatment of prostate cancer.

Within a decade, the statistics changed dramatically: in 1982, only 7 percent of men with prostate cancer underwent surgery, but by 1992, with the development of PSA screening to identify more men with curable disease, this safe procedure had become the most common treatment for prostate cancer in the U.S. for men ages 50-70. By 2002, deaths from prostate cancer had declined by 33 percent – greater than seen in any other cancer over the same time period.

This operation transformed the Brady and Johns Hopkins. Before 1982, fewer than a dozen radical prostatectomies were performed each year. But by 1997 Walsh's procedure was the most common inpatient operation at the Johns Hopkins Hospital, with over 1,000 cases performed each year. Interest in the procedure grew as urologists from around the world came to watch Walsh and learn his techniques. For years Walsh worked to make the operation even better, perfecting his surgical technique through meticulous follow-up and analysis of his patient's outcomes.

Walsh cared deeply for his patients and still does today. He has given every patient his home telephone number. He spoke to all patients he operated on (4,569 men) every three months for their first year following their surgery, and longer as needed. He coached them to recovery, and every year sent them a letter inquiring about their status. He also felt he had a major responsibility to teach urologists how to do this operation well.

Walsh installed excellent video equipment in the operating room so the many visitors who came to watch him operate could see deep into the pelvis.

This turned out to be useful in other ways. Recognizing that small differences in surgical technique could have a major impact on outcomes, Walsh began videotaping his cases, and even spent one summer vacation examining them, stopping the video frame by frame. This enabled him to identify slight variations in technique that significantly enhanced recovery. In 2004, he produced a detailed DVD of the operation, and was able to distribute 50,000 copies worldwide free of charge to all urologists who sought one.

Helping Doctors and Patients Worldwide

Dr. Walsh's impact on teaching has grown far beyond Brady. For 25 years, Walsh was editor-in-chief of the major 4 volume, 4,000-page textbook of Urology, Campbell's Urology, nicknamed 'the bible of

urology," which was renamed Campbell/Walsh in his honor. For 15 years he served on the editorial board of the New England Journal of Medicine. He also published two best selling books on the prostate and prostate cancer for laypeople. In 2023, Walsh was identified as the most cited urologist in the world, based on the number of influential publications he has authored.

WITT'S WIT (ON THE LIGHTER SIDE) -

The following is from the book 'Jokes You'll Love to Tell by Dr. David Goldberg

A struggling artist stops by his studio where his recent work is hanging for sale. The owner tells him he has good news and bad news. "The good news is that a man dropped by the studio today and put in an offer to buy every single piece. He just wanted my reassurance that art becomes more valuable after an artist passes away.

I told him they would double, possibly triple, in value. So, he bought them all."

"Wow!" exclaims the artist. "That's fantastic. What could be the bad news?"

"The guy is your doctor."

American Urological Association Early Detection of Prostate Cancer Guidelines 2023

The following is a very brief excerpt of information from the American Urological Association (AUA).

Prostate cancer is the most commonly diagnosed cancer in American and Canadian men. Last fall The Canadian Cancer Society estimated that 25,900 Canadian men were diagnosed with prostate cancer in 2023 and that 3,900 of those men were from B.C. that is also the number of women in B.C. who were newly diagnosed with breast cancer in B.C. in 2023. Prostate cancer is also the third leading cause of death in men from cancer in Canada with an estimated 4,900 deaths from prostate cancer nation wide in 2023.

PSA Screening –

- When screening for prostate cancer clinicians should use PSA as the first screening test.
- Clinicians may begin prostate cancer screening and offer a baseline PSA test to people between ages 45 to 50 years.
- Clinicians should offer prostate cancer screening beginning at age 40 to 45 years for people at increased risk of developing prostate cancer based on the following factors: Black ancestry, germline mutation, strong family history of prostate cancer.

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 2024 – 2025

NOTE: – Dates to be confirmed.

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.