



KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP

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I have some great news to share; I believe that the first DaVinci Robotic assisted prostate cancer surgery took place this week at KGH in Kelowna. I also understand that the second such surgery for prostate cancer will be taking place next week. This marks a big breakthrough for prostate cancer surgery in the Interior of B.C. It is great that we now have this Da Vinci robot in Kelowna as well as the local surgeons who are well trained in the use of the robot. With the DaVinci Xi robot in Kelowna, I believe that there are five hospitals in B.C. with this type of technology. Kelowna General Hospital is the first hospital in the Interior of B.C. to get the robot.

If anyone has ideas or articles, they would like to see in the newsletter, please let me know and I will see if I can include them in future Newsletters.

If you know of anyone who would like to receive the newsletter, please forward their information to me. If you wish to have your name removed from my contact list, please let me know and I will remove your information.

New Tracer Could Enable Surgeons to See and Hear Prostate Cancer

The following information was obtained off the Internet and originated with UBC on August 21, 2025

UBC chemists tested the tracer on mice with human tumour implants (UBC)

A preclinical evaluation of a new 'dual-mode' tracer agent shows promise in not only helping surgeons image and plan prostate cancer procedures, but also provide them with much more consistent and targeted guidance during surgery

The agent uses a single tracer molecule labeled with Fluorine-18 – a common isotope used in Positron Emission Tomography (PET) scans – for diagnostic imaging. It also provides a one-step, widely accessible solution that would enable combined fluorescence-guided and radio-guided surgery.

“Precision medicine is increasingly being practiced and developed to address the sophisticated treatment methods for disease like cancer,” says Dr. David m. Perrin, a University of British Columbia chemist and senior author on the paper, published in advance in the *Journal of Medical Chemistry*.

“Our tracer provides high-resolution visual guidance but would also allow a surgeon to use a hand-held Geiger counter probes to ‘hear’ areas of high radiation density that would accumulate in cancerous tissue not immediately visible – whether it’s a lymph node, or distant metastasis, or local invasion in like the bowel or the gut.”

The tracer targets and binds to PSMA – prostate specific membrane antigen – a protein that is highly expressed on the surface of prostate cancer cells. It not only has a high uptake by the tumour for PET images, but high optical brightness in the fluorescent mode without requiring special visual equipment.

“There’s a real lack of good clinical options when it comes to dual-mode PSMA tracers,” adds Dr. Perrin. “So, we feel this could fill an incredibly useful function in the treatment spectrum for prostate cancer, and potentially other diseases like larynx and ovarian cancer if the same approach can be applied to them.

Dr. Perrin’s team and colleagues with the Department of Molecular Oncology at BC Cancer tested the tracer on mice with human tumours implanted in them. The next steps include Good

Manufacturing Practices assessments, toxicity testing, and validation runs.

“By combining ^{18}F –with fluorescein, we have a very bright future in bringing dual-mode tracers closer to clinical applications,” says radiochemist Jerome Lozada, first author on the paper who conducted the experiments while at UBC. “The tracer is highly translatable to a larger variety of healthcare settings and smaller hospitals that typically have access to more standard suites of equipment.”

According to the Canadian Cancer Society, about one in eight Canadian men will develop prostate cancer in their lifetime – one in thirty will die from it. Treatment often involves trade-offs between complete tumour removal and preserving critical structures like nerves, the seminal vesicle, bowel, and bladder, particularly in cases of advanced localized disease.

“The implementation of dual mode fluorescent-PET tracers in the surgical field is an exciting new approach to maximize benefit and minimize harm associated with more extended lymph node removal as well as to decrease the rate of positive surgical margins of a radical prostatectomy,” says Dr. Larry Goldenberg, associate director of development and supportive care at the Vancouver Prostate Centre and a professor with the department of Urologic Sciences at UBC, who was not involved in the study.

“This novel approach has the potential to maximize local disease control and theoretically improve oncologic outcomes.”

“We already have similar approaches in breast cancer treatment using a radioactive tracer and methylene blue given as a separate injection,” explains Dr. Phillip F. Cohen, division head of nuclear medicine at Lions Gate Hospital, who was not involved in the research. “The surgeon uses a radioactive probe to detect radioactivity and then sees if there is blue dye when they try to identify the lymph node visually. This new dual tracer does the same thing, but potentially just one injection.”

The research was funded by the Canadian Institutes of Health Research.

WITT'S WIT (ON THE LIGHTER SIDE) -

Embarrassing Medical Exams

One day I had to be the bearer of bad news when I told a wife that her husband had died of a massive myocardial infarct. Not more than five minutes later, I heard her reporting to the rest of the family that he had died of a 'massive internal fart.'

Submitter by Dr. Susan Steinberg

Survey reveals that 80% of Americans don't know that early-stage Prostate Cancer often has NO Symptoms

The following is an excerpt of information that was published by the *Ohio State University Medical Center* on August 28, 2025.

Edmund Folefac, M.D., genitourinary medical oncologist at The Ohio State University Comprehensive Cancer Center – Author G. James Cancer Hospital and Richard J. Solove Research Institute, emphasizes the importance of regular prostate cancer screenings for men around age 50. The Ohio State University Comprehensive Cancer Center focused on Americans' awareness of the signs and symptoms of prostate cancer. The survey results show most people (80%) don't know early-stage prostate cancer often presents with no physical symptoms typically only diagnosed with a blood test.

Prostate cancer affects more than 300,000 adults in the United States each year, according to the National Cancer Institute. The disease is one of the most common cancers among men, typically affecting those over the age of 50. If caught early prostate cancer is highly treatable.

Editor's Note: Last year the Canadian Cancer Society estimated that 27,900 men would be newly diagnosed with prostate cancer nationally and that 4,100 of those men would be from B.C. NOTE: The B.C. incidence rate for prostate cancer is the same as women who were newly diagnosed with breast cancer in B.C. It is estimated that 1 in 8 men in both Canada and the U.S. will be diagnosed with prostate cancer sometime during their lifetime. If there is a family history of prostate cancer, or if you are Black, it is suggested that PSA screening should begin at age 40.

Even if you have been diagnosed and treated for prostate cancer, please never stop having regular PSA blood tests. It is not common, but cancer can return even 30 years post treatment.

“It begins in the prostate gland and, in its early stages, often doesn’t cause noticeable symptoms, which is why regular screening is so important,” said Edmund Folefac, M.D., medical oncologist. “Because prostate cancer tends to progress slowly, if caught early, it is very treatable.”

The Ohio State University Comprehensive Cancer Center research survey also showed more than half (59%) of respondents did not realize sexual dysfunction can be a sign of prostate cancer. Often, it’s the spouse or partner who are the first to notice these issues and encourage their male partner to talk to their health care provider.

In the survey of over 1,000 respondents aged 18 and over, Black adults were more likely to identify some of the lesser-known symptoms of prostate cancer, like fatigue, and weight loss.

“Knowing your family history is very important,” said Folefac, also a clinical associate professor at Ohio State College of Medicine. “If your father, brother or grandfather was diagnosed with prostate cancer, you have a higher risk of getting the disease and you should start screening early and regularly.

Current national U.S. guidelines suggest men should start getting screened for prostate cancer at age 50.

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

December 13, January 14, February 14

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