The Digital Examiner



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PRACTICE CHANGE



In this **Digital Examiner** and our July General Meeting, change in prostate cancer care will be our focus. In the 8 years since I was

diagnosed with prostate cancer, I'm amazed at the:

- Pace of change in cancer treatment,
- Effectiveness of the new therapies,
- Increased awareness about prostate cancer in Calgary and nationally, and
- Generosity of individuals, service clubs, and companies to donate towards research and to support groups such as **PROSTAID Calgary**.

Changes in clinical practice result primarily from new research findings, the ability of cancer professionals to translate research results into practice, and funding and reimbursement policies of governments and insurance companies.

A man presenting today has a much higher chance of surviving this disease or living with it with a higher quality of life than 5 or ten years ago. However, much remains to be done to beat this disease.

Stewart Campbell, Executive Director

Join the MAN VAN Team



The Man Van operated by The Prostate Cancer Centre is Canada's

only mobile PSA blood testing unit. On scheduled dates, the Man Van offers PSA testing in Calgary and rural Alberta, helping educate men about the importance of early prostate cancer detection.



Do you want to help make a difference in We Care About Men... a man's life?

The Prostate Cancer Centre invites you to join their Man Van team as a driver or host. For information, email Bonnie Ball at bonnie.b@prostatecancercentre.ca or phone Bonnie 403 943 8955.

www.prostatecancercentre.ca

July 2015

Number 190

Tuesday, July 14, 2015 Meeting Schedule

5:00 PM: Moxie's Grill & Bar

888 7th Ave SW, Calgary, AB

6:30 PM: Wives, Partners & Caregivers Room 313 at Kerby Centre

6:30 PM: Newly Diagnosed & Active

Surveillance Group Room 311 at Kerby Centre

6:30 PM: Warriors Group

Board Room at Kerby Centre

7:30 PM: General Meeting

Kerby Centre Lecture Theatre

"Changing Face of Localized **Prostate Cancer**"

Laurence Klotz. MD. CM **Expert Angle Webinar**

Our General Meetings are open to the public and free. Cookies, fruit and refreshments will be served.

Come join us at the Kerby Centre at 1133 7 Avenue SW, Calgary, AB T2P 1B2.

Parking is FREE at the Kerby Centre in lots on both sides of 7th Ave. The WEST LRT stops at the Kerby Station, right at the front door of the Kerby Centre.

Ladies, family members and caregivers are always welcome at our meetings.

Changing Face of Localized Prostate Cancer



At our General Meeting on July 14, Dr. Laurence Klotz CM, will speak via a recorded webinar about the "Changing Face of Localized Prostate Cancer". He will discuss three aspects of

recent change in the management of low risk prostate cancer:

- · Smart screening,
- Active surveillance, and
- Focal therapy.

Laurence Klotz, MD, CM is Professor of Surgery, University of Toronto, Sunnybrook Health Sciences Centre, Toronto, Ontario.

PROSTATE CANCER CANADA'S Expert Angle Webinar Series



Expert Angle Webinar Series is an information resource about prostate cancer sponsored by Prostate Cancer Canada. Each month, leading clinicians and researchers in Canada make presentations via live webinars on key aspects of prostate cancer therapies and survivorship.

At the end of each webinar, participants who have phoned into the webinar are able to ask questions of the presenters.

At our July General Meeting, we will present a recorded Expert Angle Webinar by Dr. Klotz from the Univ. of Toronto about the "Changing Face of Localized Prostate Cancer". Dr. Klotz is the world leader in research which established Active Surveillance as the Standard of Care for low risk prostate cancer. For past and upcoming Expert Angle Webinars, visit http://prostatecancer.ca/Support/Expert-Angle.

Guidance Offered to Help Doctors Deal With "Dr Google"

TUESDAY, May 12, 2015 (HealthDay News) - Good communication is the key to resolving conflicts between the tests and treatment a patient may want based on online searches and those a physician believes are necessary, according to an article published in Medical Economics. Noting that many patients obtain health information from the Internet before visiting their physician, the article discusses how physicians might deal with conflicts with their patients with respect to unnecessary testing.

The article notes that physicians should listen to patients and acknowledge their concerns, being attentive to underlying emotions. Physicians may resist or resent 'Dr. Google' as patients may come with misinformation and preconceived ideas about their diagnosis or treatment. However, the trend toward online research accompanies the growing emphasis on patient engagement; even after doing research online, patients need the expertise of the provider to navigate valid information. When a patient requests an unnecessary test, it's important to deal with the motivation for their desire for the test; conversely, when a patient objects to a test, it's important to respect a patient's autonomy.

"There's always the possibility that a patient could leave a provider's office and say, 'I did not get what I wanted,'" Larry Brown, M.D., from the CHI Health Alegent Creighton Clinic in Omaha, Neb., explains in the article. "But there should never be a situation where they weren't listened to and a clear diagnostic process was put in place."

The impact of husbands' prostate cancer diagnosis and participation in a behavioral lifestyle intervention on spouses' lives and relationships with their partners

BACKGROUND: A prostate cancer diagnosis affects the patient & his spouse. Partners of cancer patients are often:

- The first to respond to the demands related to their husband's illness, and
- Likely to be the most supportive individuals available to the patients.

It is therefore important to examine how spouses react and handle their husband's prostate cancer diagnosis.

OBJECTIVE: The aim of this study was to explore how the prostate cancer diagnosis and the participation in their partners' behavioral lifestyle intervention program influenced the spouses' life, their relationship with their partner, and how they handle the situation.

METHODS: Interviews were recorded with 8 spouses of potential low-risk prostate cancer patients on active surveillance as part of a clinical self-management lifestyle trial.

RESULTS: The researchers identified 3 phases that the spouses went through:

- Feeling insecure about their situation,
- Coping strategies to deal with these insecurities, and
- Feeling reassured.

CONCLUSIONS: The framework of a clinical trial should include mobilizing spousal empowerment so that they can take on an active and meaningful role in relation to their husband's disease. The observations here substantiate that the framework of active surveillance in combination with a lifestyle intervention can mobilize spousal empowerment.

IMPLICATIONS FOR PRACTICE: Creating well-designed clinical patient programs that actively involve the spouse appear to promote empowerment (meaningfulness, self-efficacy, positive impact, and self-determination) in spouses. Spousal participation in clinical patient programs can give spouses relief from anxieties while recognizing them as a vital support for their husband.

S. Rossen *et al.*, Diet, Genes and Environment, Danish Cancer Society Research Center, Copenhagen, Denmark.



We sincerely would like to thank George Brookman and West Canadian Digital Imaging Inc. for their support to print and distribute The Digital Examiner.

Early Chemotherapy May Boost Survival in Advanced Prostate Cancer

Currently, chemotherapy is given after hormone therapy stops working. Starting chemotherapy with docetaxel at the same time as hormone therapy can improve survival for men with newly diagnosed, advanced prostate cancer, British researchers say. Their new study found that when the two therapies were combined at the start of treatment, patients lived an average of 10 months longer.

The combination had even greater benefits for men whose prostate cancer had spread to other parts of their bodies - known as "metastatic" cancer. These men experienced an average 22-month improvement in their overall survival, their findings showed.

"We hope our findings will encourage doctors to offer docetaxel to men newly diagnosed with metastatic prostate cancer, if they are healthy enough for chemotherapy," said lead author Dr. Nicholas James, Cancer Research Unit at the University of Warwick in Coventry, England.

Adapted from Dennis Thompson, HealthDay Reporter

Prostate Cancer Death Risk Lowered by Statin-Metformin Combination

Statins either alone or in combination with metformin may decrease the risk of dying from prostate cancer (PCa), according to study findings presented at the 2015 American Society of Clinical Oncology annual meeting in Chicago.

In a study of 22,110 high-risk PCa patients, of whom 1,365 died from the cancer, Grace L. Lu-Yao, PhD, an epidemiologist at the Rutgers Cancer Institute, New Jersey, and colleagues found that the reduction in the risk of PCa-specific mortality (PCSM) was most pronounced among patients who were obese or had metabolic syndrome.

For the cohort overall, statin treatment alone and combination statin/metformin treatment were associated with a 40% and 43% decreased risk of PCSM, respectively, compared with non-users of the medications. Among patients who were obese or had metabolic syndrome, statin treatment alone and combination statin/metformin treatment were associated with a 91% and 70% decreased risk, respectively. Among patients who were not obese or did not have metabolic syndrome, the treatments were associated with a 36% and 40% decreased risk, respectively.

The researchers defined high-risk PCa patients as those with stage T3/T4 tumours, Gleason 8–10 tumours, or a PSA level above 20 ng/mL. Source: www.renalandurologynews.com.

Practice Changes after Attending ASCO 2015



Jeffrey J. Kirshner MD, FACP is a partner of Hematology Oncology Associates of Central New York (HOACNY) in East Syracuse, New York. He is the Director of Research and serves as the Principal Investigator of the HOACNY Community Clinical Oncology Program (CCOP).

Writing for practiceupdate.com, Dr. Kirshner identified ten changes he would make in his oncology practice after attending the 2015 ASCO annual conference. His three practice changes for prostate cancer were:

- Add docetaxel to the regimen in selected patients with hormone-naïve advanced prostate cancer. As reported by James et al. of the European STAMPEDE trial, an analysis of over 1700 patients randomized 2:1 to androgen suppression versus the addition of docetaxel revealed a significant improvement in overall survival (mean, 77 months vs 67 months). These results supported the results from the CHAARTED study presented by Sweeney et al. at the 2014 ASCO conference.
- Change the administration of zoledronic acid (Zometa) to every 3 months from the previous recommended monthly dose in patients with metastatic bone disease. As presented by Himelstein et al., this randomized trial of over 1800 patients demonstrated noninferiority in breast, prostate, and myeloma patients. The revised schedule will be less expensive and result in fewer visits for patients and probably an improved quality of life.
- Encourage patients who are beginning chemotherapy to exercise. As presented by Mustian *et al.* in this randomized trial of 479 non-metastatic cancer patients, those randomized to a moderate exercise program experienced less cognitive impairment and an improvement in biomarkers.

Source: <u>www.practiceupdate.com</u>

Donate a Vehicle to PROSTAID Calgary

Donate a Car Canada accepts all types of vehicles for donation to **PROSTAID Calgary—Car, Truck, Van, SUV, Motorcycle, Boat or RV**. Vehicles are picked-up by Donate-a-Car and sold at auction or recycled. We issue an



income tax receipt to donors for the funds we receive. To donate a vehicle to **PROSTAID Calgary**, go to our Donate-a-Car webpage here or visit our

website at www.pccncalgary.org and key the Donate tab.

Clinical outcomes in a series of "young" patients with castration-resistant prostate cancer who were 60 years and younger

BACKGROUND: The prognosis for younger patients with prostate cancer is unclear, and the very few studies assessing those with metastatic castration-resistant prostate cancer (mCRPC) have mainly involved patients treated with older therapies. The aim of this study was to evaluate the clinical outcomes of a series of docetaxel-treated patients with mCRPC who were 60 years and younger.

PATIENTS AND METHODS: The researchers identified 134 men who were 60 years and younger who were treated with docetaxel in 25 Italian hospitals and recorded their predocetaxel history of prostate cancer, their characteristics at the start of chemotherapy, and their post-docetaxel treatment history and outcomes.

RESULTS: Most of the 134 consecutive patients with mCRPC received the standard 3-week docetaxel schedule; median progression-free survival (PFS) was 7 months, and 90 patients underwent further therapies after progression. The median overall survival from the start of docetaxel treatment was 21 months, but overall survival was significantly prolonged by the post progression treatments, particularly those based on the new agents such as cabazitaxel, abiraterone acetate, or enzalutamide.

Overall survival was significantly shorter in patients with:

- A shorter interval between the diagnosis of prostate cancer and the start of docetaxel treatment;
- Those receiving hormone therapy for a shorter period;
- Those with shorter PSA doubling times; and those with
- Lower hemoglobin levels, a worse performance status, and higher lactate dehydrogenase levels before starting treatment with docetaxel.

CONCLUSIONS: The findings of this study of clinical outcomes in a contemporary series of younger patients with mCRPC showed that their survival is similar to that expected in unselected patients with mCRPC who were of any age. Caffo *et al.*, Urol Oncol. 2015 Jun;33(6):265. Epub 2015 Apr 20.



The Prostate Cancer Research Institute conference in Los Angeles is an incredibly informative and energizing conference. **PROSTAID Calgary** is offering a \$100 incentive to each of 8 men or their wives, partners or caregivers to attend. Call Stewart at 403 455 1916 or email info@pccncalgary.org.

Study of psychological effects of prostate cancer in couples

Researchers at Mount Allison University in New Brunswick are conducting a study examining the psychological effects of prostate cancer treatment in couples. They are recruiting straight and gay couples. If you or your partner are currently undergoing treatment for prostate cancer and would be interested in participating in or learning more about their study, contact Bonnie Fisher by phone at 1-506-364-2649 or by email at mashlabprostatecancerstudy@gmail.com. If you would like more information about the study, visit their website at http://www.mashlab.ca/current-projects/.

DANCEYOURPANTSOFF

Are you ready to **Dance Your Pants Off?**

Calgary, Alberta: October 2 & 3, 2015, at the Radisson Calgary Airport Hotel & Conference Centre, Suresh Joachim will attempt to beat the Guinness World Record of dancing with more than 1068 partners in a 24 hour period, all while raising funds for PROSTAID Calgary.

Suresh Joachim is the number one Guinness World Record Holder in Canada and the second in the world. You will not find the word "quit" or any derivative thereof, in his vocabulary. He has travelled the world while running, moonwalking, cycling, walking, crawling, breakdancing, ballroom dancing, rocking and the list goes on! Why does he continue to push himself? He's on a mission for a better, healthier, more stable and war-free tomorrow!

If you are an amateur or a professional who can dance one of the following styles: International Latin, Ballroom or American Style, join us for your minute of fame, on October 2 or 3, 2015, at the Radisson Airport Calgary Hotel & Conference Centre. If you grew up dancing one or more of these styles, you are more than welcome to join in! You only need to do the steps confidently for 30 seconds to 1 minute! To learn more and to sign up as a dance partner, please go to www.danceyourpantsoff.ca

Volunteers Needed



Monday / Tuesday, December 28 / 29, 2015

To volunteer, please email Stewart Campbell at

info@pccncalgary.org