Our October 7th meeting will be very special as we welcome Vivienne Parry, OBE to Calgary to screen her new documentary on cancer, “The Enemy Within”. Vivienne will join us from London England where she is a well known correspondent for BBC Radio and Television. A scientist by training, Vivienne writes and presents many medical science and technology programs for the BBC and contributes to the Times, Guardian, Mail on Sunday and an eclectic range of other papers and magazines on science and medicine.

In 2008 Vivienne was a presenter at the Canadian Prostate Cancer Network national leaders conference held in Calgary.

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The October 7th meeting replaces our Tuesday October 8th regularly scheduled monthly meeting. Because of the anticipated high attendance we are changing locations for October only. The Monday October 7th meeting will be held at Beth Tzedec Congregation (who are donating their facilities for the evening). Beth Tzedec is located at 1325 Glenmore Trail SW. Driving instructions and a map are included on the insert in this mailing. Like all our meetings, there is no charge to attend and parking is free. As well as the film screening and presentation many health related support groups and organizations will be on hand for a mini health fair. Refreshments will also be served following the presentation.

The Enemy Within, is NOT prostate cancer specific and will be of interest to anyone touched, either directly or indirectly by cancer. No advance registration is necessary and you can bring friends!

PCCN CALGARY EXECUTIVE UPDATE

At our last monthly executive meeting we confirmed our new president, Steve Belway, and Ron Singer as our new secretary. Willem Smink remains on the board as past president and Rob Pentney, our previous secretary remains as a director. Here is a complete list of executives of PCCN Calgary:

- **President:** Steve Belway
- **Past President:** Willem Smink
- **Chairman:** Ron Gorham
- **Secretary:** Ron Singer
- **Treasurer:** Bill Moir

Chair, Warriors: Stewart Campbell

Directors:
- Rick Brown
- Louis Chow
- Josephine Chow
- Gerry Hawley
- Rob Pentney
- Rod Tondevold

Associates:
- Prostate Cancer Canada rep: Bonnie Ball
- Videographer: Rhett Miller
- Executive Director: Bob Shiell
NEW PSA RECOMMENDATIONS FROM PCC
Prostate Cancer Canada released new recommendations to empower Canadian males to take a more active role in monitoring their number one cancer risk: prostate cancer. A recent nationwide poll showed that while 87% of Canadian men aged 35+ fear prostate cancer, less than half anticipate being tested in the next 12 months— even though early diagnosis can increase the odds of survival.

“Our meetings are at Kerby Centre, 1133—7th Ave. SW on the second Tuesday of every month.”

Almost half (44%) of men admitted being reluctant to be tested for prostate cancer. Also concerning to Prostate Cancer Canada is that three-quarters of men (74%) assumed that a positive test result inevitably leads to treatment. PSA testing is primarily a means of monitoring prostate health. One abnormal test result does not mean leaping into treatment.

“We released our recommendations because we believe it is critical for men to initiate these important discussions with their healthcare providers,” says Rocco Rossi, CEO of Prostate Cancer Canada. “Untreated and late-stage prostate cancer can have devastating physical and psychosocial effects and men need to become informed healthcare consumers and their own healthcare advocates.”

An online poll conducted for Prostate Cancer Canada among men aged 18+ found over half (55%) either didn’t know or under-estimated a man’s lifetime risk of developing prostate cancer. Only 16% of respondents were able to correctly identify that a man’s lifetime risk of prostate cancer is 1 in 7.

“So we released our recommendations because we believe it is critical for men to initiate these important discussions with their healthcare providers,” says Rocco Rossi, CEO of Prostate Cancer Canada. “Untreated and late-stage prostate cancer can have devastating physical and psychosocial effects and men need to become informed healthcare consumers and their own healthcare advocates.”

PCC also recommends the decision to end PSA testing should be based on individual risk, rather than an arbitrary cut-off such as age 70. “Men are living longer and their lives should not be cut short or diminished by prostate cancer,” says Dr. Edmonds. “The decision to end testing should be a shared decision determined by a man and his primary care provider.”

Some men are at increased risk because of ethnicity (Black African or Black Caribbean descent), a family history of prostate cancer, or age,” says Dr. Singal. “Men at high risk should talk to their primary care provider even earlier than their 40s. However, in my 18 years of practice, the majority of aggressive cancers have been found in men with seemingly no risk factors— underscoring the importance of baseline testing.”

PSA: Know Your Number

Risk Factors
- Age: Risk for prostate cancer increases with age.
- Race: Men of Black African or Black Caribbean descent have increased risk for prostate cancer.
- Family History: Men with a first degree relative (father, uncle) with prostate cancer have an increased chance of getting the disease.
- Lifestyle: Maintaining a healthy weight through good diet and exercise may reduce the risk of prostate cancer.

Did you know?
The PSA test is a simple blood test, taken from your arm, that measures the amount of prostate specific antigen in your blood.

While there are controversies with the PSA test, high numbers serve as a powerful red flag for further investigation.

Prostate Cancer Canada Recommends

At high risk? Talk to your primary care provider about prostate cancer.
Get a PSA test in your 40s to establish your baseline.
The decision to end PSA testing should be based on individual factors.

PCC advocates for shared decision making between doctor and patient.
Our meetings feature medical presentation and peer to peer interaction. Join us!

MEET A PCCN CALGARY DIRECTOR—GERRY HAWLEY

My wife Margaret and I have resided in Calgary since 1978. Marg and I and I were born and raised in Saskatchewan but have lived in various places in Alberta since 1962. I have been a Teacher, Principal, and Superintendent of Schools. In 1978 I decided to leave the educational side of the education business and, took courses at the U of C in accounting and computer science. I subsequently became a senior manager in the computing department of the Calgary Board of Education, a position from which I retired in 1994. As a volunteer, I performed computer systems development work for Fort Calgary, was a volunteer driver for the Cancer Society, a volunteer with the Calgary Prostate Cancer Centre, and I am an active member of the masonic fraternity, where I served as a board Member and Secretary Treasurer of the Masonic Foundation of Alberta. I have held many senior offices in my masonic career.

Marg and I attend Knox United Church. I was diagnosed with prostate cancer in September 1999. I chose to have a radical prosatectomy. Two years later, given a rising PSA, I undertook radiation to the base of the prostate. While my PSA decreased I suffered from radiation cystitis, which culminated with a need for bladder replacement surgery in 2012. When my PSA once again began to rise in 2005, I went on Eligard injections until June 2013. I am no longer being treated, and my PSA is undetectable. I feel that I should contribute support to PCCNC. Being a Board member is the way that I think I can best contribute to the organization.

9 Year Old supports PCCN Calgary

9 Year Old Lauren set up a lemonade stand and collected donations for PCCN Calgary.

She attended our last general meeting with her mother and grandmother and presented PCCN Calgary with a cheque for $148.25. What a great example for us all! Thank you Lauren.

New Quality of Life Survey

Prostate cancer can impact quality of life, affecting patients’ day-to-day life and overall well-being. According to a new national survey of men who have or have had prostate cancer, the condition's physical manifestations can also lead to psychological and social concerns, both of which are more pronounced for those in the later stages of the disease, when the tumour has metastasized or spread beyond the prostate.

The most reported physical concern (64 per cent) for all men surveyed is being unable to maintain an erection; however, for men with advanced (stages 3 and 4) prostate cancer, the psychological concerns (69 per cent) and social concerns (50 per cent) are just as important, and include feelings of loss of masculinity, loss of dignity and loss of identity, and missing out on important life events.

More than one-third of all men living with prostate cancer (36 per cent) say the disease has impacted their ability to participate in daily activities, such as using the bathroom, being physically active and travelling.

Furthermore, the impact the disease has on quality of life is much greater for those living with advanced prostate cancer than early stage prostate cancer (stages 1 and 2). In fact, the majority of men with prostate cancer (70 per cent) in the early stage of the disease report having an excellent or very good quality of life compared to only 39 per cent of those with advanced prostate cancer. Among those with early stage prostate cancer, sexual dysfunction, urinary incontinence, and fatigue are the most common physical challenges.
As we celebrate 20 years of helping men and their families on their journey with prostate cancer we would like to thank the many generous individuals and companies who support our community work. On behalf of the 1000+ members of PCCN Calgary thank you all for your generosity and encouragement. With your continued support we will continue our good work in the years ahead.

experienced; however, the impact is far greater for those living with advanced prostate cancer.

While 84 per cent of all men surveyed feel they are living their lives to the fullest, many reported that they are unable to enjoy life, including 50 per cent of men with advanced prostate cancer and 19 per cent of men with early-stage prostate cancer.

"When I was diagnosed with metastatic prostate cancer, the news came with such a force in my life," says Don Konantz, from Vancouver. "The emasculating side effects of this disease can be very real. Working closely with my doctor has helped me navigate the treatments associated with this complicated and sometimes overwhelming diagnosis and supported me in living life the best I can."

Caregivers play an active role in the lives of their loved ones with prostate cancer. The survey found that caregivers provide approximately 25 hours of care per week and that the majority of them (69 per cent) are spouses. Beyond providing encouragement and emotional support, almost seven-in-ten (65 per cent) attend doctor visits and over half (57 per cent) are involved in the treatment decisions of their loved ones. At least monthly, one-third of caregivers keep up-to-date on medication and treatment options and learn about the disease.

The survey also revealed that more than half of men with prostate cancer (56 per cent) and caregivers (57 per cent) wish better treatment options were available. This figure dramatically increases to 92 per cent for men who identify themselves as having advanced prostate cancer.

"Being able to enjoy time with family and friends and create memories is paramount for men living with prostate cancer, particularly those at the advanced stages who may not have the benefit of time" says Dr. Alan So*, research scientist, Prostate Centre at Vancouver General Hospital and associate professor, Department of Urologic Sciences at the University of British Columbia. "It's important that men and their caregivers speak with their doctors about the latest treatment advances that delay disease progression, but also improve quality of life and survival time."