

THE DIGITAL EXAMINER



Number 155, August 2012

Address changes, comments
or suggestions should be
directed to: bobshiell@shaw.ca
403.455.1916



More information at www.pccncalgary.org

Meet our chaplain, Bobbie Osadchey

It is with much pleasure that I introduce to our members, our volunteer chaplain, Bobbie Osadchey. Bobbie's message to everyone follows:

"With gratitude to all who volunteer their time and effort with PCCN, I am honoured to be part of your team. Becoming a hospital chaplain was my post graduate goal when in 2005 I was accepted into a year residency program called CPE



(acronym for Clinical Pastoral Education) at the Houston Texas Medical Center. The TMC exceeds one thousand acres in size and is the largest medical center in the world. The requirement for acceptance into the CPE program was to either be an ordained clergy or, in my case, have earned a Master of Divinity degree. We were a team of six individuals with diverse religious affiliations. We learned much from patients who had faith denominations other than our own. This broadened our understanding the role of faith in healing and provided an opportunity to create respect and compassion for those of any faith, or those without faith.

Defining my Chaplaincy role for PCCN Calgary takes me into a new professional dimension that I welcome. I will look forward to you helping me find my pathway to provide spiritual support for your individual journeys with prostate cancer, and for your family members as well. I am eager to learn from you.

What will my role look like? As a non-physician I cannot give medical advice. Therefore my role as your chaplain is to become involved with you, at your request, to provide holistic care. The definition of holistic care is that Chaplains are pastoral practitioners who seek to build a relationship of trust through compassionate presence and thereby offer help and support to a wide range of people. Such support might, for example, focus on the emotional or spiritual adjustment to illness or on the search for meaning and purpose through difficult times. Help in crisis situations, including family/relational issues as well as bereavement care, are regular areas of chaplaincy involvement.

As Bob Shiell may have told you, I am committed and involved with spiritual care and counseling for our synagogue membership, as well as other commitments within the broader Calgary community. Therefore, please understand that to begin I need you to contact me by e-mail or telephone for an appointment - even if the appointment itself is by e-mail, telephone or in person."

Shalom PCCN Calgary,

Bobbie Osadchey
bobbieo@shaw.ca
403 719-5755

PCCN Calgary's
next general
meeting is

Tuesday August
14th at 7:30 PM.

Our meeting will
feature
Dr. Siraj Husain,
Tom Baker Cancer
Centre .

"EBRT in the
modern era and
Brachytherapy Ad-
vances – where are
we heading?"

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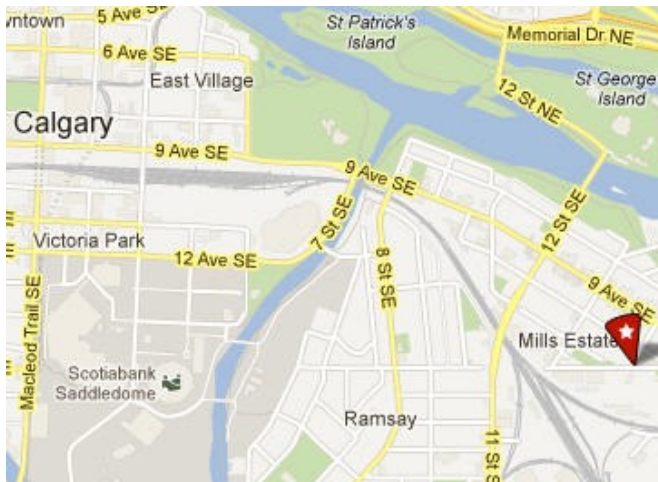
PCCN Calgary meets on the second Tuesday of every month at 7:30 PM

A bit of our history

July 27, 1993. The first meeting of what was to become PCCN Calgary was held at Tom Baker Cancer Centre. Among the first directors were Murray Brener (deceased), Arni Paulsen (deceased), and Alan Love, chairman (deceased). We have come a long way since that first meeting with a current membership base of almost 1,000, well attended monthly meetings and special events, a popular and informative website and monthly newsletter and an active and committed current board of directors. July 2013 will be our **20th anniversary** and we will be planning something special to mark the occasion.

Upcoming meetings

Please see enclosed insert for details:



Our meetings are held at **Venu1008, 1008 14th Street SE in Inglewood. Lots of free parking!**

PCC Research Strategy

Significant progress has been made over the past few years to improve our understanding of prostate cancer. Many of these findings have resulted in improved methods to detect and treat the disease. However, there is still much to understand about the topic, including:

What is the exact cause of prostate cancer?

How can it be detected earlier?

How can prostate cancer be treated more effectively and with fewer side effects?

How can men and their families be supported throughout their prostate cancer journey?

Continued research efforts are important in all of these areas to provide the necessary evidence to improve

prevention, detection, treatment and survivorship. With this in mind, Prostate Cancer Canada developed a Research Strategic Plan identifying key strategic priorities for research as well as the specific research programs that will be supported.

Over the next three years, the goals of the strategy are to:

1. Outline strategic investments in prostate cancer research that will have the greatest impact on the disease.
2. Develop innovative programs that build and sustain an outstanding Canadian prostate cancer research community.
3. Train and help retain the next generation of prostate cancer research leaders.

The strategy is shaped by the following principles. The strategy will:

1. Build on and leverage existing prostate cancer research projects and infrastructure in Canada.
2. Establish rigorous peer-review processes to ensure only the highest-quality research is supported.
3. Provide opportunities for provincial, national and international partnerships by being informed by the CCRA Pan-Canadian Cancer Research Strategy.
4. Develop robust evaluation indicators to assess performance of programs and the overall strategy.
5. Respond to opportunities that arise in prostate cancer research.
6. Achieve results that strengthen the ability to raise additional funds for research.

If you have any questions about the above announcement, please contact Stuart Edmonds at stuart.edmonds@prostatecancer.ca

Help Wanted!

If you have a bookkeeping or accounting background and would like to **join the board of PCCN Calgary and become our Treasurer** then we have an opportunity for you! You will be working with a group of volunteer directors dedicated to building on our past successes and working towards a bright future. A knowledge of any accounting software as well as Microsoft Office Suite are desirable. Hand-over training will be provided. We will provide a laptop and necessary software. The job itself is not time consuming and you will be welcome to attend our monthly directors lunch meeting.

If you would like to explore this opportunity in more detail please contact either Willem Smink, President of PCCN Calgary at (403) 949-7790 or via email at smink@davincibb.net. Or Bob Shiell, executive Director, (403) 455-1916, bobshiell@shaw.ca.

Our meeting place is Venu1008, 1008 14th St. SE in Inglewood—free parking



Register by August 8 and Bring A Friend For Free!

One of the goals of the Prostate Cancer Research Institute is to disseminate as much information and education as possible about the latest treatments, guidelines, and life-style recommendations for Prostate Cancer patients. We also know how important it is for patients to have the support of their friends, wives, and other family members through their treatments and when learning about all of their options. New this year, we have started the 'Bring A Friend For Free' program for the 2012 Prostate Cancer Conference.

If you register for the conference by August 8, you will be entitled to a free registration for a friend or family member to attend with you. This promotion does not apply for those that have previously registered under the Early Bird Registration Rate. To register your guest for free, please call the PCRI Office at 310-743-2116 and mention the 'Bring A Friend For Free' program.

Visit <http://www.prostate-cancer.org> for more information and a list of medical speakers.

PCCN Calgary is sending three representatives to this conference—join them.

Study confirms PSA and early detection saves lives

The Large Urology Group Practice Association (LUGPA), representing more than 1,800 urologists, today applauded a newly released study confirming the impact of prostate-specific antigen (PSA) testing on the early detection of prostate cancer.

The study, published online, and soon to be published in a print edition of Cancer, compared the incidence of advanced prostate cancer at initial diagnosis in 2008 to that seen before the advent of PSA testing (1983-85). Researchers found that without the PSA test, it is likely that more than three times as many men would have presented with advanced disease.

"The results overwhelmingly confirm what urologists, prostate cancer patients and patient advocacy groups have been saying," said Dr. Deepak A. Kapoor, President of LUGPA and Chairman and CEO of Integrated

Medical Professionals, PLLC. "Eliminating the PSA test to screen for prostate cancer would result in a public health catastrophe, as potentially tens of thousands of men who could have been cured will present with advanced disease and possibly die needlessly."

Earlier this summer, the U.S. Preventive Services Task Force (USPSTF) disregarded input from patient advocacy groups and experts in the field in issuing a grade "D" recommendation for PSA-based prostate cancer screening in asymptomatic men. This one size fits all policy places those at greatest risk for prostate cancer – African-Americans and those with a family history of prostate cancer – in a dangerous situation. These patients urgently need to be educated about their risks of developing cancer, and the role that screening could play in early diagnosis and treatment.

"The 10 year survival for prostate cancer has increased from around 50 percent before PSA testing to an astounding 98 percent. We are not detecting more cancer; we are detecting cancer earlier and saving lives," said Kapoor.

The USPSTF has come under fire for questionable recommendations in the past. This is the same organization that attempted to restrict access to mammography screening for breast cancer and suggested that women no longer be taught breast self-examination. Legislation with bipartisan support was introduced in June to reform the USPSTF process, in hopes of ensuring more transparency and accountability regarding the panel and its health recommendations.

LUGPA joins the American Urological Association (AUA) and the American Association of Clinical Urologists (AACU) in support of PSA screening for well-informed men who wish to pursue early diagnosis for a disease that is the second leading cause of cancer death in men.



Stick-It to Prostate Cancer, the ball hockey tournament for everyone, returns to Calgary's CrossIron Mills on Saturday September 23th. It's not too early to put together a team.

Register at www.stickit.net.





Officers of the Society:

President

Willem Smink
403 949 7790

email: smink@davincibb.net

Secretary:

Rob Pentney

email: rpentney@junewarrentnickles.com

Treasurer

Merle Richardson

email: merlevr@shaw.ca

Executive Director:

Bob Shiell

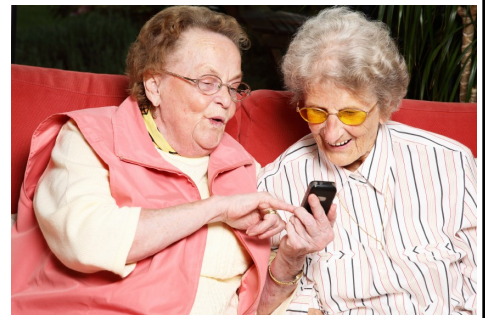
403.455.1916

email: bobshiell@shaw.ca

Our website:

www.pccncalgary.org

PCCN Calgary is always looking at ways to fill the needs of members. We recognize the need for partners of men with prostate cancer to share the journey and are investigating the amount of interest in restarting our “**Women and Prostate Cancer**” groups. These would be self-facilitated meetings, at a time and place of the groups choosing. If this is of interest and you would like to participate, either as a member or facilitator please give Bob Shiell a call at 403.455 1916 or email at bobshiell@shaw.ca



GETCHECKED.CA

The Man Van™ is a valuable resource offered by the Prostate Cancer Centre to provide on-site free baseline PSA blood tests for men over 40. The Man Van™ makes appearances at select events, but can also be found around the community each month. For the current schedule please visit GETCHECKED.CA



Meet a director of PCCN Calgary

As your support group moves towards it's 20th anniversary we will be featuring one of the directors of PCCN Calgary each month. This month introduces our newest director **Ron Singer**.



"I grew up in Winnipeg and remained there until I graduated from the University of Manitoba and headed for the "big smoke" of TO where I worked for a time in computers and information processing.

While in Toronto I developed a fascination with how cities work and might be better planned (in more than just a physical sense) which led me to pursue graduate studies in urban planning at the University of North Carolina at Chapel Hill.

Over a number of years I worked for a variety of provincial governments attempting to craft a bit of progress from within and a bit from without during a brief stint with the CBC in Vancouver.

Eventually I figured out that I was not really cut out to be a corporate man and in 1981 established a small entrepreneurial parking management firm in Calgary which I operated for many years until the era of multinational corporate oligopolism transformed that industry.

The latter part of my career involved consulting to municipal government and small business.

I have had an ongoing interest in community development and currently serve on the Board of Directors of the Cliff Bungalow Mission Community Association.

I was diagnosed with PCa in February of 2009 at which point my urologist asked the question "When?" as regards surgery. However, between my then limited knowledge of what was once referred to as "watchful" waiting" and the great post diagnosis information session offered by the Prostate Cancer Centre (complete with a good literature package), I realized that my metrics made me a good candidate for "active surveillance" which continues to be my practice to this day.