

The Digital Examiner



Directors & Officers

President
Dave Lunn

dlunn@shaw.ca

Executive Director
Kelly Fedorowich
403 455 1916

info@prostaiddcalgary.org

Warriors
Frank Altin
faltin@telusplanet.net

Newly Diagnosed /
Active Surveillance
Ron Singer
rsingerca@yahoo.ca

Wives, Partners
& Caregivers
Kelly Fedorowich
info@prostaiddcalgary.org

Chairman
Ron Gorham
ron.gor45@gmail.com

Secretary
Ron Singer
rsingerca@yahoo.ca

Past President
Steve Belway
belways@shaw.ca

Visit us at:
www.prostaiddcalgary.org
www.pccncalgary.org

PROSTAID Calgary
PO Box 72126
RPO Glenmore Landing
Calgary, Alberta
T2V 5H9
403 455 1916

PROSTAID Calgary
is self-funded.

Help us to continue
our good work by
donating on-line to

PROSTAID Calgary
www.prostaiddcalgary.org



Prostate Cancer
Canada Network
Calgary



Greetings prostate cancer community, friends and neighbours. Over the past several months the PROSTAID Calgary Board of Directors have been working hard to develop community events and activities that

will raise awareness of both prostate cancer and our Society. Our September calendar accomplishes this in spades. Our first event of the month is a Seniors Fair that's being hosted at Legion 285 on Sept 10; next up is our Sept 13 General Meeting. Renown Calgary Urologic Oncologist, Dr. Geoffrey Gotto, is joining us for the first time as a guest speaker. *I'm sure many of you will remember Dr. Gotto as an outspoken critic of the highly controversial publication Dr. Dickinson released earlier this year regarding PSA Screening recommendations;* on

September 17 we once again partner with the Calgary Stampeders for our annual Fire-Up for Prostate Cancer Awareness Tailgate Party; and on October 1, the Kerby Centre is hosting their Fall Expo in celebration of National Seniors Day.

Volunteers are needed for the September 10 Senior's Fair at Legion 285, the Sept 17 Stamps awareness event, and the Fall Expo at the Kerby Centre. Please contact me if you're interested in joining the Volunteer Teams for any of these events.

Your gifts of time and talent help to grow, strengthen, and nurture our Society. Thank you!

I also want to mention the 2016 Prostate Cancer Research Institute Conference that's being hosted Sept 9 thru 11 in Los Angeles. If you're interested in attending the conference, PROSTAID Calgary is offering to provide a partial funding sponsorship to 6 members. The funding opportunity will pay the \$100 event registration fee. NOTE: PCRI is offering a "Buy 1 Registration, Get 1 Free" option on their website. **I attended the PCRI conference in 2014 and it was truly eye-opening.*

PROSTAID Calgary relies on the generosity of the community to keep our programs running. Donating is easy! Just give Kelly a call 403-455-1916 or email

info@ProstaiddCalgary.org

or visit

http://prostaiddcalgary.org/c_donate.php

Kelly Fedorowich

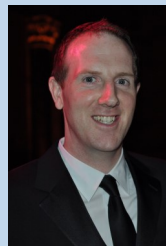
Executive Director

September 2016

Number 204

Tuesday, September 13, 2016 Schedule

- 7:30PM **General Meeting (GM)**
Room 205 (Lecture Room) at Kerby Centre
- 6:30PM **Newly Diagnosed & Active Surveillance Group**
Room 311 at Kerby Centre
- 6:30PM **Warriors (Advanced Disease)**
Room 318 (Board Room) at Kerby Centre
- 6:30PM **Wives, Partners & Caregivers**
Room 313 at Kerby Centre
Everyone is welcome to attend!



GM Topic: Dr. Geoffrey

Gotto joins us to talk about the therapeutic role of pelvic lymph node dissection (PLND) for prostate cancer. Dr. Gotto is a Urologic Oncologist specializing in the management of prostate, bladder, kidney, and testis cancer. After graduating from the Faculty of Medicine at University of British Columbia (UBC) as a Westbrook Scholar, Dr. Gotto completed his residency training in the Department of Urologic Sciences at UBC in 2009. He went on to complete a Fellowship in Urologic Oncology at Memorial Sloan-Kettering Cancer Center in New York and received his Masters of Public Health (MPH) from Harvard in 2011. Dr. Gotto holds an academic appointment as a Clinical Assistant Professor in the Department of Surgery at the University of Calgary and is an active member.... **Con't on Page 2**

Kerby Centre is located at 1133 7th Ave SW. Parking is FREE in lots on both sides of 7th Ave. The WEST LRT conveniently stops at the front doors of the Kerby Centre.

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

Ladies, family members, and caregivers are always welcome!

Con't from Page 1 of both the Division of Urology and the Division of Surgical Oncology. He has a large clinical practice at the Southern Alberta Institute of Urology (SAIU) and is the Surgical Outcomes Leader for the group. He sits on the Alberta Provincial Genitourinary (GU) Tumour Group Executive and the GU Guidelines Committee and is a member of the Southern Alberta Cancer Research Institute (SACRI) and the Alberta Prostate Cancer Research Initiative (APCaRI). His research interests lie in health outcomes and clinical effectiveness research as well in translational studies. He is the Principal Investigator on a number of clinical trials in advanced prostate cancer run through the Prostate Cancer Centre. Dr. Gotto received the Canadian Urological Association scholarship for his research into health outcomes reporting and synoptic data acquisition and is the Chair of the GU Expert Panel on Synoptic Surgical Reporting at the Canadian Partnership Against Cancer (CPAC). (Synoptic surgical reporting is a clinical documentation method that uses structured checklists to help clinicians produce more complete, consistent, and valuable medical reports.)

As a black man I need to speak out about prostate cancer

Written by Chuka Umunna, MP

The following article was written by Chuka Harrison Umunna for The Guardian. Chuka Umunna is a British Labour politician who has been Member of Parliament since 2010.

I was only recently made aware of some startling statistics: 1 in 4 black men will be diagnosed with prostate cancer in his lifetime; 1 in 12 will die from the disease. This is double the risk faced by white men in the UK. Perhaps even more concerning is the fact that 86% of black men are oblivious to the heightened threat prostate cancer poses to their health, putting thousands in danger of being diagnosed at a late stage when treatment options are limited.

The prostate gland is an important component of the male reproductive system, but 92% of black men don't know what it does, 62% don't know where it is and nearly one in five is unaware he even has a prostate.

As a black man, I find these statistics worrying, especially as prostate cancer is a disease that can be successfully treated if caught early enough. What can we do to make sure more black men understand the added danger they face and take the necessary action that could save their lives?

Although increasing awareness is obviously a vital priority, health professionals can play a crucial role as well.

Black men not only face an increased risk of prostate cancer, they are also more likely to develop the disease at a younger age. The PSA blood test is the first step men can take to identify whether anything might be wrong with their prostate; however the test is riddled with complexities and there is still a lot of confusion among general practitioners (GPs) as to who is entitled to the test and from what age. Some remain unaware that black men face a higher than average risk and there are a number of black men who report being denied a PSA test from their GP.

The charity Prostate Cancer UK has recently produced a set of consensus statements from a panel of independent clinical experts to help GPs use the PSA test more effectively. As part of this, experts recommend that all men should have to access PSA testing from the age of

50, but men at higher than average risk of prostate cancer (including black men) should be able to access the test from age 45.

Although we still don't know why black men face a higher than average risk, my message is clear: with one in four black men being diagnosed with prostate cancer, it is up to us in the community to act. Please speak to your dads, uncles, brothers and friends and make sure every black man over the age of 45 understands the risk we face. Don't let people die from embarrassment. Ignoring prostate cancer won't beat it.

Written by Chuka Umunna, MP

The article has been abridged

[Click here to read the article in its entirety](#)

Prostate Cancer - Starting at the Beginning

Written by Dr. Mark Scholz, MD

After sitting down with a new patient Tom, a charming 80-year-old man who was recently found to have a prostate nodule and a PSA elevated up to 50, I asked him why he had not visited a doctor for over 10 years or undergone any PSA testing, he responded, "I have always enjoyed perfect health. Why see a doctor?" Sounds sort of like a stupid response, but judging by his healthy appearance, (looking more like 70), one would have to say that until now his policy has been pretty successful.

However, if Tom was going to participate intelligently in further discussions about the selection of optimal treatment, his level of prostate cancer knowledge would need a major upgrade. Since he is a medical outsider, I knew my instruction had to begin at an elementary level. This article imparts the most fundamental themes that need to be introduced to men who have been insulated from knowledge about how prostate cancer behaves.

Not All Cancers Are the Same

Many patients introduced into the cancer world fail to understand that lung cancer, breast cancer, brain cancer and prostate cancer are distinctly different illnesses. Therefore, men with newly-diagnosed prostate cancer need to realize that all notions related to personal experiences with one type of cancer that has occurred in family members or friends will be totally misleading if it is applied to one's expectations about prostate cancer.

Follow PCCN Calgary on Twitter

<https://twitter.com/PCCNCalgary>

Prostate Cancers Themselves Are a Mixed Bag

It's fairly easy for patients to understand that different cancer types, such as bladder cancer and skin cancer may behave differently. I have observed that it is more difficult for patients to grasp that prostate cancer itself can behave in a variety of ways.

Part of this diverse behavior is due to stage variations: No one would be surprised to hear that early stage cancer has a different outlook than advanced stage disease. However, even when comparing two different prostate cancers of exactly the same stage, what we call "prostate cancer" is still extremely variable. Consider the following: In 2014, 70,000 men were diagnosed with a type of prostate cancer considered to be so harmless that experts universally agree that no treatment is the best management. However, at the other extreme, also in 2014, a very different type of prostate cancer led directly to 28,000 deaths despite every attempt to prolong life with surgery, radiation, hormone therapy, immune therapy, and chemotherapy. What we call "prostate cancer" is actually a spectrum of different illnesses mistakenly being grouped together under a single umbrella term.

Prostate Cancer in the Bone is Not Bone Cancer

Another very common misconception that needs to be rectified is that cancer originating in the bone, i.e. "primary bone cancer," is completely different from prostate cancer that has spread to the bones. Primary bone cancer grows quickly, often spreads to the lungs and does not respond to hormone therapy. Prostate cancer that spreads to bone tends to grow slowly and only rarely spreads to the lung and usually regresses with hormone therapy. Prostate cancer in the bone and primary bone cancer are two separate and distinct illnesses that should not be confused with each other.

Doctors and Patients, the Human Factor

The human factor further complicates the selection of optimal treatment. Doctors who treat prostate cancer come from different schools of thought. Not only are urologists, the primary care doctors of the prostate cancer world, they are trained differently from the radiation specialists. There is a designated specialty just for treating all types of cancer, yet medical oncologists are practically never involved with the treatment of early-stage prostate cancer. There are also additional important patient variables to consider, age, fitness, and prostate size for example. Two patients may be treated differently despite having the same exact stage of disease and the same exact type of prostate cancer.

Tom's Situation

With such a high PSA of 50, Tom will need a bone scan to determine if metastases have occurred. If the scans turn out to be clear, and if Tom was ten years younger, radiation to the prostate combined with hormone therapy would give him the best chance for cure. However, either one of these treatments alone may control the disease for 15 years. Therefore, in an 80-year-old it is quite reasonable to consider a less aggressive treatment approach with radiation alone or hormone therapy alone. Less aggressive treatment limits the risk of treatment-related side effects. Tom and his wife left our meeting with a copy of my book, *Invasion of the Prostate Snatchers* with plans to study further in preparation for the next meeting.

Written by Dr. Mark Scholz, MD for Verywell.com, an About.com brand. [Click here to access this article on the Very Well website](#)

Prostate Cancer Clinical Trials Recruiting in the City of Calgary

There are currently five prostate cancer clinical trials posted on CanadianCancerTrials.ca, that are recruiting in the city of Calgary.

[Radium-223 Dichloride and Abiraterone Acetate Compared to Placebo and Abiraterone Acetate for Men With Cancer of the Prostate When Medical or Surgical Castration Does Not Work and When the Cancer Has Spread to the Bone, Has Not Been Treated With Chemotherapy and is Causing no or Only Mild Symptoms.](#)

Trial Status: Recruiting

Trial Centre: Tom Baker Cancer Centre

Interested in this trial? *Click on the above link, print the trial information page and take it to your doctor to discuss your eligibility and treatment options. Only your doctor can refer you to a clinical trial.*

[Safety and Efficacy Study of Enzalutamide in Patients With Nonmetastatic Castration-Resistant Prostate Cancer.](#)

Trial Status: Recruiting

Trial Centre: Tom Baker Cancer Centre

Interested in this trial? *Click on the above link, print the trial information page and take it to your doctor to discuss your eligibility and treatment options. Only your doctor can refer you to a clinical trial.*

[Cabazitaxel vs Abiraterone or Enzalutamide in Patients With Poor Prognosis Metastatic Castration-resistant Prostate Cancer.](#)

Trial Status: Recruiting

Trial Centre: Tom Baker Cancer Centre

Interested in this trial? *Click on the above link, print the trial information page and take it to your doctor to discuss your eligibility and treatment options. Only your doctor can refer you to a clinical trial.*

Visit PCCN Calgary's YouTube Page
www.youtube.com/user/pccncalgary

Androgen-Deprivation Therapy and Radiation Therapy in Treating Patients With Prostate Cancer.

Trial Status: Recruiting

Trial Centre: Tom Baker Cancer Centre

Interested in this trial? Click on the above link, print the trial information page and take it to your doctor to discuss your eligibility and treatment options. Only your doctor can refer you to a clinical trial.

A Study of Escalating Doses of ASG-22CE Given as Monotherapy in Subjects With Metastatic Urothelial Cancer and Other Malignant Solid Tumours That Express Nectin

-4

Trial Status: Recruiting

Trial Centre: Tom Baker Cancer Centre

Interested in this trial? Click on the above link, print the trial information page and take it to your doctor to discuss your eligibility and treatment options. Only your doctor can refer you to a clinical trial.

**PROSTAID Calgary
Upcoming Volunteer Opportunities**

September 10, 2016 - Legion Seniors Fair

Legion 285 Seniors Fair is being hosted on September 10 and two volunteers are needed to help set up PROSTAID Calgary's booth, man the booth and distribute handouts, and tear down the booth at the end of the event.

Time: 10am – 2pm

Location: 9202 Horton Road SW, Auditorium

Please contact Kelly if you are available to volunteer: info@prostaidecalgary.org or 403-455-1916

September 17 - Calgary Stampeders vs Ottawa Red-blacks Prostate Cancer Awareness Event

Ten (10) Volunteers are needed to help set up the PROSTAID Calgary canopy tent; man the PROSTAID Calgary display and distribute brochures; roam the Tailgate grounds and outside the Entrances to McMahon Stadium; and tear down the canopy tent at the end of the event. Tickets to the game are available to all volunteers.

Time: 12pm - 3:00PM, SATURDAY, SEPT 17

Location: McMahon Stadium

Note: There is NO on-site parking for Volunteers. You will need to take the transit or park off-site and walk to McMahon Stadium.

Remember: You will get free tickets to the game which starts at 3PM!

Please contact Kelly if you are available to volunteer: info@prostaidecalgary.org or 403-455-1916

“Like” PCCN Calgary on Facebook
<https://www.facebook.com/pccncalgary>

October 1, 2016 - Kerby Fall Expo

The Kerby Centre is hosting their Fall Expo on National Seniors’ day, October 1 and four (4) volunteers are needed to help set up PROSTAID Calgary's booth, man the booth and distribute handouts, and tear down the booth at the end of the event.

Time: 9am-4pm

Location: 1133 7 Ave SW

Kerby Fall Expo highlights:

- There will be live entertainment at regular intervals throughout the show. It will be programmed to promote customer interaction.
- Booths will be located in the auditorium and in prime locations throughout the building.
- Wine tasting will be held later in the day.
- Informative presentations will be made from the stage in the auditorium.

Please contact Kelly if you are available to volunteer: info@prostaidecalgary.org or 403-455-1916

By volunteering, you can make an important impact in our community and the lives of the 1 in 8 Canadian men affected by prostate cancer. Thank you!



Thank you to PROSTAID Calgary's Sponsors and Associates