

# The Digital Examiner

[www.ProstaidCalgary.org](http://www.ProstaidCalgary.org)



It's a great time to rediscover  
**PROSTAID** Calgary and our  
programs and initiatives!

**New Leadership:** I'm very pleased to welcome Brad Sterling on board as PROSTAID Calgary's next President. Dave Lunn handed the reins to Brad on June 7 and we're all very grateful that Dave will remain an active member of the Board. His farewell message is on page 2.



**New Faces:** PROSTAID Calgary is fortunate to have many talented and passionate people serving on our Board. Each person brings a unique community perspective and skill set that will help us to achieve our goals in 2018 and beyond.

I'd like to welcome our newest Board members: Tom Shindruk, Terry Yuck and Tor Camren.

\*Visit the Board Members page for the current directors and their bios.

**New Support Group and 2 New Facilitators:**  
**Newly Diagnosed** support group kicks off in July and will be facilitated by Tom Shindruk.

Newly diagnosed individuals often feel alone and isolated. If you need help coping with your prostate cancer diagnosis or you are supporting someone who is newly diagnosed, you may wish to talk with others who are also facing a similar diagnosis.

**Wives, Partners and Caregivers** support group is facilitated by Linda Maslechko.

A diagnosis of prostate cancer can be overwhelming, and lead to feelings of fear, anxiety, and depression. Although prostate cancer only strikes men, the disease and its treatment can have a profound impact on his and your lifestyle, quality of life and emotional well-being; and it may introduce challenges for sexual intimacy. The Wives, Partners & Caregivers Support Group is where you will find other women, sharing what loving your partner 'in sickness and in health' really looks like.

PROSTAID Calgary is supported by the community and exists for the community. Donations are graciously accepted via Visa, Master Card, American Express, and cheque. [Click here to reach our On Line Donation Page for credit card donations.](#) If a donation is meaningful to you, it's meaningful to us.

Warm wishes,

*Kelly Fedorowich*

Executive Director, 403-455-1916



July 2018

Number 226

## Meeting Schedule

**Tuesday July 10, 2018**

Monthly Meetings are hosted at  
The Kerby Centre, 1133 7th Ave SW.

**7:30-9:00PM** **General Meeting (GM)**  
**Guest Speaker:**

**Lori Styner** Director of Research at the Prostate Cancer Centre  
Room 205 (Lecture Room)

**6:30-7:30PM** **Warriors Group**  
Facilitator: Frank Altin  
Advanced & Recurrent Disease  
Room 208 (2nd Floor)

**6:30-7:30PM** **Wives, Partners & Caregivers**  
Facilitator: Linda Maslechko  
The July meeting is an Introduction to Mindfulness-Based Stress Reduction

**6:30-7:30PM** **Newly Diagnosed**  
Facilitator: Tom Shindruk  
Room 311 (3rd Floor)

**The 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 to attend. A light snack and refreshments are served. Ladies, family members, and caregivers are always welcome!



## GM Presentation

### Topic:

Prostate Cancer  
Research – making a difference!

This presentation will provide an overview of the types of research & current activities being conducted at the Prostate Cancer Centre. Key aspects of "bench" research versus "clinical trials", a high level overview of the phases of clinical trials, and the "rules" that must be followed will be presented.

Lori Styner is the Director of Research at the Prostate Cancer Centre. She holds a

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## Contacts

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Dave Lunn  
[dlunn@shaw.ca](mailto:dlunn@shaw.ca)

## Support Group Facilitators

**Warriors**  
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[faltin@telusplanet.net](mailto:faltin@telusplanet.net)

**Newly Diagnosed**  
Tom Shindruk  
[tomshindruk@shaw.ca](mailto:tomshindruk@shaw.ca)

**Wives, Partners & Caregivers**  
Linda Maslechko  
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### Lori Styner Continued from Page 1

Bachelor of Nursing Degree and has over 30 years' experience working in clinical research in academic, community and industry settings. Since arriving at the Prostate Cancer Centre in 2014, Lori has lead a passionate research team to substantial program growth and success.

### From the Desk of the now Past President Dave Lunn

By the time you read this we will be past the summer solstice and well into summer, if not by the calendar, certainly by the weather. As is usual our 'three minutes' of spring seem long gone.

PROSTAID Calgary had a successful Cancer Symposium thanks to the many volunteers, speakers, delegates, and health care exhibitors. We are also grateful for the support of our sponsors and from Prostate Cancer Canada Network (PCCN) – Edmonton for hosting the Friday evening hospitality suite. There were about one-hundred fifty attendees and from the responses we received they appreciated the efforts given by your board and volunteers that helped make this event a success.

We've have changes to our Board and I want to recognize and announce some departures and additions.

Steve Belway has served PROSTAID Calgary for seven years in several positions most recently as Past President. His guidance and connections with industry have been a boon to helping us provide education and support to the prostate cancer community. Steve has started a new career and we are most grateful for his contributions and wish him much success in his new position.

Kathryn Rauch and Jennifer Thorne are among the younger board members and unfortunately (for us) their work commitments have necessitated their resignation from the board. We thank them for their service to PROSTAID Calgary and wish them all the best. Should their circumstances change, we would be more than happy to have them back.

We extend a hearty welcome to Saif Lalani, Tom Shindruk, Terry Yuck, and Tor Camren who have recently joined the board. All of them bring an extensive background in industry and the not-for-profit world. We are very fortunate to have them join us. Tor, no stranger to PROSTAID Calgary, is a regular attendee at general

meetings and a regular volunteer. I invite you to get to know them and read their biographies on our web page [http://pccncalgary.org/a\\_executive.php](http://pccncalgary.org/a_executive.php)

We welcome current board members Brad Sterling and Chris Phone to the positions of President and Secretary, respectively. We look forward to them continuing their service to the men and their families dealing with prostate cancer.

We have a dilemma – your board is comprised of working people and retirees. Those working have a responsibility to their work and the those retired take well-deserved holidays. The solution is to make sure we have a full complement of fifteen board members as stated in our by-laws.

Here's where you can help. Many of you already volunteer at the various events and perhaps you could help us by joining the board. We meet on the first Thursday of the month at noon at the Kerby Centre. Speak to any board member and let them know you are interested.

I have two more requests. PROSTAID Calgary is a leader among the PCCN communities because of the quality of the education, outreach, and support it provides. Don't keep us a secret! Invite your friends to join us at general meetings and events. Lastly, we welcome any suggestions you have for potential speakers as well as ideas to make us better able to serve you. Thank you.

Cheers, Dave.

### Reporter's cancer diagnosis inspires important conversation

In June 2018, Vancouver Sun reporter Larry Pynn found out that he is the 1 in 7 men who will be diagnosed with prostate cancer in their lifetime. His diagnosis sparked a determination to drive awareness to the most common cancer affecting men in Canada. Pynn released a five-part series in the Vancouver Sun, touching on topics from diagnosis and the PSA test, to sexual health and healing after treatment.

Click on the red underlined links to read each of the 5 the articles.

In his first article, "[1 in 7 Canadian men get prostate cancer and I am among them](#)" Larry reveals his own experience, while discussing the realities of the disease with experts including Prostate Cancer Canada's Dr. Stuart Edmonds, and Vancouver Prostate Centre's Dr. Larry Goldenberg and Dr. Martin Gleave. The article ends with a hopeful and poignant sense of how many men feel after being told they have prostate cancer.

Larry's second article, "[The controversy over the PSA test is failing men with aggressive prostate cancers](#)," touches on the controversy over the PSA test. Responses to the article showed that Canadians are passionate about early detection: On Prostate Cancer Canada's Facebook page, close to 1,000 people commented with their experience, shared the post with their friends and family or reacted to it. Several commenters express that the PSA test saved their life and urge others to have a baseline test done. Many others voiced their desire for both BC and Ontario governments to begin funding the PSA test: "**This needs to be changed! Prostate cancer is too important for all tests not to be covered!**" shared one follower. Exclaimed another reader, "**\$25 – what's that – the price of a case of beer?... This test saved my life.**" Others compared government funding of the PSA test to mammogram screening: "**Governments cover the cost of mammograms at a much higher cost than a simple PSA blood test. As a 22+ year survivor of prostate cancer I know that the PSA saved my life.**"

The ups and downs of prostate cancer and research are explored in Larry's third article, "[Prostate cancer research yields hope, disappointment](#)". Larry speaks to doctors about hereditary predispositions to prostate cancer, including men who carry BRCA2 gene mutations. Some researchers are focusing on finding better treatment for men with predispositions to the disease.

An uncomfortable, but especially important, commentary in the series is Larry's article on intimacy and sex following prostate cancer treatment, "[Prostate cancer: diagnosis forces couples to rethink sexuality](#)." Prostate cancer is often seen only as a man's disease, but what often goes unacknowledged is that partners of men with the disease are also affected. Erectile dysfunction is a common and life-altering side effect for many men who go through treatment.

Another area many don't discuss is how prostate cancer continues to affect men into older age, something Larry addresses in his last article in the series, "[Aging with prostate cancer as side-effects continue to linger](#)". Can anyone completely turn their backs on cancer, even once treatment is over? It's a question Larry asks as he explores growing older with side effects of treatment.

Perhaps the most important outcome of Larry Pynn's series is that more people might understand the disease better. Knowledge is power, and we hope this discussion

will continue. So please, continue to share this important information with your friends and family. Information for this article was provided by [Prostate Cancer Canada](#).

### End-of-Life Prostate Cancer-Related Complications Characterized

Men with advanced prostate cancer (PCa), especially those with castration-resistant prostate cancer (CRPC), have an elevated risk of disease-related complications near the end of life, including spinal cord compression and renal failure, according to study findings presented at the American Society of Clinical Oncology's 2018 Annual Meeting in Chicago.

"Many patients with prostate cancer can expect excellent survival outcomes, even those with metastatic disease," lead investigator Divya Yerramilli, MD, of Massachusetts General Hospital in Boston, told Renal & Urology News. "However, there has been no comprehensive examination of how patients with prostate cancer experience major disease-related complications, such as cord compression and renal failure at the end of their lives. In other words, patients with prostate cancer live a long time, but a significant proportion of these patients suffer for a long time, too."

The study by Dr Yerramilli's team included 2603 men diagnosed with PCa and who had died at the end of a 10-year follow-up period. The men had a mean age of 67.6 years at diagnosis and a mean age at death of 70.1 years. The cohort consisted of 490 patients with low/intermediate-risk PCa, 617 with high-risk PCa, and 1005 with metastatic disease at diagnosis. Of those with metastatic disease, 519 patients had CRPC and 481 had castration-sensitive PCa.

Radiologic evidence of bone metastases developed in 7.2% of patients with low/intermediate-risk PCa compared with 28.1% of men with high-risk PCa and 40.9% of those with metastatic disease. Pathologic fracture due to bone metastases occurred in 1.4%, 6.2%, and 16.3% of men with low/intermediate-risk, high-risk, and metastatic disease, respectively, according to Dr Yerramilli's group. Spinal cord compression developed in 2.1%, 5.2%, and 18.8% of these groups, respectively. Ureteric obstruction developed in 2.5%, 10.6%, and 15.5%, respectively. (*Ureteric obstruction is a blockage in one or both of the tubes (ureters) that carry urine from your kidneys to your bladder. Ureteral obstruction can be curable. However, if it's not treated, symptoms can quickly move from mild —*



*pain, fever and infection — to severe — loss of kidney function, sepsis and death.)*

Renal failure due to ureteric obstruction developed in 0.6%, 6.5%, and 10.3%, respectively.

Castration resistance developed at a median of 4.5, 2.9, and 1.2 years from diagnosis in patients with low/intermediate-risk, high-risk, and metastatic disease, respectively. Radiologic evidence of bone metastases in these groups developed at a median of 4.2, 2.9, and 1.3 years from diagnosis. Spinal cord compression developed at a median of 4.5, 2.9, and 1.3 years, and ureteric obstruction developed at a median of 2.7, 3.6%, and 1.6 years from diagnosis.

Compared with patients who had castration-sensitive PCa, those with CRPC had 2-fold increased odds of bone metastases and ureteric obstruction. They also had 64% and 56% greater odds of pathologic fracture due to bone metastases and spinal cord compression, respectively. All of these increased risks were statistically significant.

“Our team hopes that these data, presented by risk group at diagnosis, allows providers to explain the natural history of this disease to their patients, and discuss upfront management strategies in the context of the development of these major disease-related events,” Dr Yerramilli said. “For example, for a patient with metastatic disease at diagnosis, we know that about a fifth of patients develop cord compression. Therefore, should this patient develop back pain, it should raise concern for the risk of cord compression.”

The researchers hope the new findings provide opportunities to study early palliative interventions, such as screening and treatment of spinal metastasis, targeting improvements in bone health, or exploring strategies to manage urinary obstruction before it leads to renal failure, Dr Yerramilli said.

*Written by Jody A. Charnow, Editor Renal & Urology News  
Article has been abridged. [Click here to read in its entirety.](#)*

The annual PCRI Conference is a full featured educational experience for prostate cancer patients and caregivers. The conference, which is moderated by Mark Moyad, MD, consists of keynote presentations and live Q + A's from leading doctors, and extensive breakout sessions and support groups which cover every major prostate cancer topic. Attendees can expect to find comprehensive knowledge about their disease and become empowered to make the best decisions with the newest information.

Sponsorship funding to attend the PCRI Conference includes travel, meal and hospitality expenses including return airfare, up to three nights at the conference hotel, early registration fees, and meals.

Funding is capped at \$1,400.00 Cdn per person.

Application letters must be received by August 1. If several applications are received, preference will be given those members who have not yet attended a PCRI Conference. Those who receive funding are expected to make 10 to 15-minute presentation at a 2019 General Meeting. Reimbursement will be made on submission of original receipts.

Send your application letter to Kelly Fedorowich, [info@prostaidecalgary.org](mailto:info@prostaidecalgary.org)

**2018 PCRI Speakers include:**

**Eugene Kwon:** What You Need To Know About Prostate Cancer Imaging in 2018 & The Latest & Greatest in Immune Boosting Therapy for Cancer; **Evan YU:** The Latest & The Greatest In Advanced Treatments For Prostate Cancer Care; **Mack Roach:** Moyad Vs. Roach: The Pros & Cons of All Types of Radiation Being Sold to You Today; **Mohit Khera:** From Stem Cell Treatment To The Latest & Greatest In Pills & Potions; **Gerald Androile:** A Comprehensive Overview of Prostate Cancer; **Mark Moyad:** Diet & Nutrition; and **Mark Scholz:** Host.

**Sponsorship Opportunity  
2018 Prostate Cancer Research Institute  
(PCRI) Prostate Cancer Patient Conference**

**Date: September 7-9, 2018**

Each year, PROSTAID Calgary provides funding for 2 members to attend the Prostate Cancer Patient Conference presented by PCRI and hosted at the Los Angeles Airport Marriott.

**[Click here for Information and Registration.](#)**

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