The Digital Examiner



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Donate to PROSTAID Calgary on-line at www.pccncalgary.org



June was an incredibly busy and successful month for our prostate cancer support group **PROSTAID Calgary.**

Now we get to **YAHOO!!!** It's the start of summer and Calgary Stampede time. But before then,

• On Sunday, June 29th, we will hold our 6th Annual Show 'n Shine with the theme "Fun in the 50s". There are always 'lots of prostates' and their families, young and old, who exhibit and attend our annual Show 'n Shine.

We expect our 2014 "Fun in the 50s" festival to attract 300—400 vehicles and 5000-8000 visitors for us to promote awareness about PSA testing and early detection of prostate cancer.

We are putting the final touches to our first "Men's Health Challenge" that will become a permanent part of our annual Show 'n Shine. Once again, the Man Van from Prostate Cancer Centre will be on-site offering free baseline PSA testing to men 40 years and older. Several other non-profit organizations and commercial firms will also have displays focused on Men's Health.

Ron Gorham's team have put a tremendous program together. We need 8 more volunteers for this event. Please phone Ron at 403 730 6534. It will be a fun day for all ages.

 At our General Meeting on Tuesday, July 8th, Dave Bateman. Clinical Manager from Prostate Cancer Centre will describe Rapid Access Clinics I to VI. Prostate Cancer Centre's programs at the Rockyview Hospital complement our efforts and we are really very pleased to have Dave speak to us.

Our journeys continue

Stewart Campbell, Executive Director

July 2014

Number 178

Tuesday, July 8th, 2014 **Meeting Schedule**

6:30 PM: Newly Diagnosed & Active **Surveillance Group** Room 311 at Kerby Centre, Ron Singer, Facilitator

6:30 PM: Warriors Group Board Room at Kerby Centre, Jim Swaile, Facilitator

7:30 PM: General Meeting. Kerby Centre Lecture Theatre

> Dave Bateman, MPH, RN Rapid Access Clinics I to VI **Prostate Cancer Centre**

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

Come join us Tuesday, July 8th at the Kerby Centre at 1133 - 7th 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.



GETCHECKED.CA

The Man VanTM is a valuable resource offered by the Prostate Cancer Centre to provide baseline PSA blood tests for men 40 years and older.

A Man VanTM clinic will be open 11AM—2PM at our "Fun in the 50s" Show 'n Shine on Sunday, July 29th at Grey Eagles Casino. For the latest schedule of Man VanTM clinics in your community, visit www.getchecked.ca.



Our President's May AGM Message



PCCN-Calgary has had a very proud and strong 20+ year history of assisting men and their families as they face a diagnosis of prostate cancer and helping them along a journey for which they didn't make travel reservations. Through the hard work of previous board members, executive directors, numerous volunteers and the generosity of donors, our

society and members have been able to achieve great things in their service to the Calgary and area community.

We now look forward to the changing landscape for non-profit organizations, social networking and challenges in fundraising to how we will improve our services, adapt to change and best serve our community for the next 20 years.







As president of PCCN-Calgary, I am fortunate to work with a solid group of individuals who strive to better the lives of others. I also work in a variety of functions within the prostate cancer community. Locally, we are moving to build stronger programs to improve quality of life and create greater awareness, understanding and support for those currently facing or potentially facing a diagnosis of prostate cancer. We are looking to strengthen partnerships and alliances with Prostate Cancer Canada, Prostate Cancer Centre and Tom Baker Cancer Centre in Calgary, and other health related non-profit and commercial organizations.

In November 2013, your Board of Directors met to review our mission and values and looked forward to build strategic plans that strengthen our organization and provide more relevance and meaning to our members. We looked at novel programs such as our own annual Show 'n Shine, Motorcycle Ride for Dad, Father's Day Walk / Run, Wake Up Call breakfast, Robbie Burnstein dinner and other events in Calgary where we can partner with others to build awareness, educate, advocate and raise funds for prostate cancer research.

We host monthly meetings with knowledgeable speakers, support member attendance at international prostate cancer conferences, and host educational events that help our members and the public understand the issues with pros-

tate cancer better. We are looking to improve and expand on our social media presence. In addition to our quality web videos and comprehensive website, we host a Twitter feed and are exploring ways to expand our virtual presence.

My position includes involvement in two national advisory committees:

- Prostate Cancer Canada Network's Advisory Committee, which is looking at ways to share best practices amongst support groups nationally. We are involved in webinars which highlight common issues in a cost effective manner while being able to connect with a large audience. I represent Alberta where I am striving to create an efficient network of sharing with other AB support groups.
- Prostate Cancer Canada's Research Advisory Committee, which is fortunate to benefit from Movember campaigns which raises tens of millions of dollars annually for prostate cancer research. These monies are allocated to various relevant and worthwhile research initiatives here in Canada and have put Canadian researchers at the forefront of prostate cancer research.

It is worth noting that our society is self-funded and receives no direct financial support for our programs from Movember, Prostate Cancer Canada nor Prostate Cancer Centre.

So, I look forward to serving our society further and working with you and your Board of Directors to bring new, fresh and worthwhile programs to our members and the public, as well as to strengthen our proven programs already in place.

I would like to ask our members to continue to support our society, consider getting involved and spread the word to increase the scope of our presence. We welcome new faces to help with volunteer assistance whether it be helping out at one of our programs or serving on our Board. Your feedback and suggestions are always welcome. Our society exists because of its members and the generosity of many individual members, Calgary and area companies, and professional firms involved with prostate cancer and men's health.

So please help us, help you.

Steve Belway, President

Call to Action

PROSTAID CALGARY PCCN-Calgary Society

Come join us at our meetings. Help build a community of support. Do it for your-self, do it for others.

The predictive powers of PSA: Working smarter to detect prostate cancer

As physicians and researchers debate the merit of the prostate-specific antigen (PSA) test, questions have arisen about:

- the age at which the initial test should be given,
- the test's ability to accurately identify the presence of prostate cancer, as well as
- the test's ability to predict more aggressive forms of PCa.

Research presented at a 2014 Meeting of the American Urological Association (AUA) has brought new information about innovative possibilities for the use of PSA. Text adapted from an AUA Press Release of May 19, 2014.

Earlier PSA Testing in African American Men

African American men should consider starting PSA testing at an earlier age, according to research from the Washington University School of Medicine, Family and Community Medicine at Saint Louis University and John Cochran Veterans Affairs Medical Center in Saint Louis, MO, as well as Ochsner Clinic Foundation in New Orleans, LA.

One out of every six US men will be diagnosed with PCa in their lifetime. The odds for PCa increase to one in five if you are African American, and one in three if you have a father or brother who has had prostate cancer.

Using data from one of the largest African American cohorts for which prostate outcomes are reported, African American veterans aged 40-54 years diagnosed with PCa after a PSA >4 µg/l and prostate biopsy were compared to those aged 55-70 years with regard to pre-biopsy PSA level, biopsy Gleason sum, clinical TNM stage and D'Amico risk strata. (Note: TNM is a classification system that describes the extent of many types of solid tumour cancers, where T is tumour, N is lymph nodes, and M is metastasis.) The 40-54 year old African American veterans were then compared to Caucasian veterans of the same age.

Based on the results, African American veterans 40-54 years of age, who underwent PSA testing, had their prostate cancer caught at an earlier stage than those 55-70 years of age. The data suggests African American men consider initiating prostate cancer screening at an earlier age.

PSA Levels in Men < 60 Years Predicts Lethal PCa

A single blood test before the age of 60 could predict a man's long-term risk of PCa death, according to researchers from Harvard School of Public Health, Massachusetts General Hospital, Memorial Sloan Kettering Cancer Center and the University of Illinois College of Medicine at Chicago.

Using data from the Physician's Health Study, a study of 14,916 men who gave a blood specimen was performed. Total PSA levels of those < 60 years were available for 234 prostate cancer cases and 706 age-matched controls.

Researchers found:

- For men ages 40-60, 40-55 and 40-50, with a PSA below the median, 0.89, 0.79 and 0.68 µg/l respectively, the top 90th percentile had an increased risk of PCa.
- Men with a PSA level in the >75th percentile for the same age groups had a greater chance of dying from prostate cancer and the association was even stronger for men with a PSA level in the >90th percentile.

These data indicate PSA level before age 60 can predict the likelihood of developing subsequent metastatic and fatal prostate cancer.

p2PSA and Derivatives (percent p2PSA and PHI) Accurately Predict Prostate Cancer in Obese Men

The high prevalence of obesity around the world is a growing concern among health professionals and its association with prostate cancer is controversial. A recent study from researchers in France, Germany, Italy and the United Kingdom suggests PSA derivatives %p2PSA and prostate health index (PHI) values are higher and more accurate in determining prostate cancer in obese men (BMI >30).

For the study, researchers examined data of more than 950 men from the PRO-psa Multicentric European Study. Of these men, 14.7% were categorized as obese and 45.% of obese men were found to have prostate cancer. Data showed that in determining PCa in obese patients, %p2PSA and PHI significantly outperformed total PSA, free PSA and % free PSA while decreasing the total number of biopsies.

These data indicate the use of %p2PSA and PHI derivatives are not only significant and more accurate in determining the presence of prostate cancer in obese men, they also result in a decrease in the number of unnecessary biopsies.

"PSA testing remains an effective method of detecting prostate cancer," said Scott Eggener, MD, Associate Professor of Surgery –Urologic Oncology at the University of Chicago Medicine. "Ongoing improvements are likely by incorporating personalized information such as race, age-specific PSA level, and newer PSA isoforms."

GET CHECKED. Prostate Cancer Centre recommends starting PSA baseline testing at age 40 and every 5 years until age 50, when the test should be done annually.

A "PSA Pyramid" for Men with Initial PSA = 3 ng/ml: A Plea for Individualized Prostate Cancer Screening

In daily routine business, various PSA retest strategies are being promoted for use. Randazzo *et al* from the Department of Urology, Cantonal Hospital Aarau, Aarau, Switzerland investigated **rescreening intervals according to baseline** PSA <3 ng/ml stratified by any and aggressive PCa.

From 1998 to 2012, data from 4350 men aged 55–70 years were analyzed from a population-based prospective screening study (median follow-up: 11.6 years). The primary end point was detection of aggressive PCa (Gleason score 7–10).

Baseline PSA of <1.0 μ g/l (group 1), 1–1.9 μ g/l (group 2), and 2–2.9 μ g/l (group 3) was present in 2416 men (55.5%), 1371 men (31.6%), and 563 men (12.9%), respectively.

Based on these PSA groups, aggressive PCa was detected in 25 patients (1.0%), 80 patients (5.8%), and 34 patients (6.0%), respectively. During the 4th year, these numbers were 0.0%, 0.29%, and 1.8%, whereas during the 8th year, the numbers were 0.2%, 1.4%, and 2.5%, respectively. Baseline PSA was the only predictor regarding aggressive PCa.

According to the low rate of potentially missed PCa in these three groups, rescreening intervals can be safely adapted to baseline PSA values corresponding to a "PSA pyramid":

- Yearly test, if the baseline PSA is 2–2.99 μg/l,
- Test 3-4 years if the baseline PSA is 1-1.99 μg/l and,
- Test 6–8 years if the baseline PSA is <1.0 μg/l.

Men at the top of the pyramid (initial PSA 2–2.99 μ g/l) should be further stratified with existing risk tools.

In this population-based screening program, most prostate cancer developing in men with an initial PSA <3.0 ng/ml were diagnosed at an early stage. Baseline PSA among men with a median age of 60.7 years is a powerful predictor for future prostate cancer when it is used as a "gatekeeper" rather than a dichotomous marker for the disease.

Text adapted from the article published on-line on April 18, 2014 ahead of print in European Urology.

As always, PROSTAID CALGARY recommends that men consult their medical team before starting any therapies or strategies discussed in The Digital Examiner.

Legacy Donation to PROSTAID CALGARY

In May, our society was honored to receive a significant donation from the estate of Keith Clyde Brown who passed away Sept 1, 2012 from prostate cancer at the age of 87. Keith was born in Edmonton and moved to Calgary with his family at an early age. Keith was with the RCAF from 1943 to 1947. He then joined Hook Outdoor Advertising and retired as President in 1980. Keith's hobby was trophy big game hunting, which took Keith all around the world. Keith's wife Joan resides in Calgary.

Meet Directors Josephine and Louis Chow



Josephine Chow (Sau Mui Tse) first attended **PROSTAID Calgary** meetings in 2011 in support of her husband Louis Chow who was shocked upon receiving the diagnosis of prostate cancer and later underwent brachytherapy.



At the beginning, Louis spent a lot of time seeking information from old classmates, friends and relatives, close and distant, in Canada and abroad, books and internet, with difficulty discerning the information's validity and relevancy

to himself. Before understanding his own situation and deciding which treatment to go with was a stressful and frustrating period. It was overwhelming to digest and make sense of the massive and different opinions he got.

It was a delicate balance for Josephine, as a wife and a nurse by profession, to objectively help Louis sort through and weigh the different advices he received without taking over his decision making process. It was a decision Louis needed to make for himself based on full comprehension of his condition following consultations with different professionals, family physician, oncologist, urologist surgeon, radiologist, physiotherapist, and psychologist.

Each treatment or non-treatment came with certain risks, benefits and outcomes. Psychological counseling assisted Louise in clarifying what the potential negative outcomes meant to him, and discussing his own value and beliefs with me to determine his most comfortable option.

Later we learned about **PROSTAID Calgary**. We feel that had we known about and utilized its resources earlier, our stress level at the beginning would have been less as a newly diagnosed patient and family caregiver. The organization's ongoing support has been invaluable. Our desire to serve the community led both of us to join **PROSTAID Calgary's** Board of Directors since 2013.

Josephine has a bachelor degree in nursing, a master degree in science with focus on health administration, and 38 years of diverse nursing experience in various fields, including medical, surgical, psychiatric, intensive care, operating room, cardiac research assistant, and clinical instructor at schools of nursing. She worked with VON Regina in the home visiting program for 6 years, and with Calgary Home Care of Alberta Health Services as a Community Care Coordinator, a Manager and an Instructor. In addition, she worked as a public health nurse for over 11 years in Regina and Calgary. In Regina, Josephine was involved in immunization in schools and clinics, HIV anonymous testing, counseling, surveillance and follow-up.

Louis is an engineer and retired. Josephine retired in August 2013 and continues as a casual vaccination nurse for the influenza and rapid response program in Calgary.