



COMMITTEE:

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Annual subscription - \$5 from 1st January

VENUE:

Uniting Church Meeting Room
Seddon St, Ivanhoe

DAY CALENDAR 2014

Meetings: **10:00am -12:30pm**

- Wed 12th March '14
- Wed 9th April '14
- Wed 14th May '14
- Wed 11th June '14
- Wed 9th July '14
- Wed 13th August '14
- Wed 10th September '14
- Wed 8th October '14
- Wed 12th November '14
- Wed 10th December '14
- Wed 11th February '15
- Wed 11th March '15

EVENING CALENDAR 2014

Meetings: **7:00pm -9:00pm**

- Thu 27th March '14
- Thu 24th April '14
- Thu 22nd May '14
- Thu 26th June '14
- Thu 24th July '14
- Thu 28th August '14
- Thu 25th September '14
- Thu 23rd October '14
- Thu 27th November '14
- Thu 26th February '15
- Thu 26th March '15

2014 SUBSCRIPTIONS \$5

The 2014 subscription year is from 1st January 2014. The rate is \$5 per individual, couple or family.

Prostate Heidelberg provides information, education and support for those affected by prostate cancer. At the meetings, we

1. *Show respect to members and speakers;*
2. *Allow people to speak and we listen;*
3. *Respect confidentiality;*
4. *Allow new ideas to be shared.*

DISCLAIMER

Information contained in this newsletter or discussed at meetings, should not take the place of proper medical advice from a qualified health professional. The services of a qualified health practitioner should be sought before applying the information to your particular circumstances.

The Prostate Heidelberg Cancer Support Group had eleven attendees at the DAY meeting on 12th March 2014. The EVENING meeting on 27th February had only three in attendance.

NEXT MEETINGS

Prostate Heidelberg's MEETING VENUE is the Ivanhoe Uniting Church Meeting Room, Seddon Street Ivanhoe (Melways 31 F8) - behind the Commonwealth Bank in Upper Heidelberg Rd. Car parking is available off Waterdale Rd behind the Ivanhoe Hotel. **There is no charge for attending.**

- The **NEXT DAY MEETING: 10:00 am to 12.30 pm, Wednesday 9th April 2014.**
- The **NEXT EVENING MEETING: 7:00 pm to 9:00 pm, Thursday 24th April 2014.**
- Partners or carers are welcome to all meetings
- Meetings are open to anyone interested in getting support on a cancer journey.

MENS HEALTH FORUM - 25th MARCH REPORT

I, with a number of others from Prostate Heidelberg, attended an informative forum. What follows is what I got out of the forum: any errors are mine alone.

The speakers included Urologists Chris Love and Darren Katz, Men's Health GP Paul Arduca, and Endocrinologist Carolyn Allan.



The topics included:

1. Men's Health
2. Recovering continence
3. Recovering sexual function
4. Peyronies Disease
5. PSA Testing
6. Testosterone

MEN'S HEALTH

Many problems the men have are warnings of other problems to come. Maintain your body by a considered diet, moderate exercise, and sensible weight. Do not put off seeing your doctor. Talking about a problem can lead to you not feeling so alone, and often enough the problem can be resolved (before becoming a bigger problem).

RECOVERING CONTINENCE

The comment was made forcefully that no man should be incontinent after treatments for prostate cancer.

Firstly, regaining continence can be anything from weeks to years; it does take time. But if you are still incontinent, especially after 6 months, tell your GP or urologist. Your reasonable expectation is to recover your continence.

The lines of treatment include (but not limited to):

1. Pelvic floor exercises.
2. Continence Physiotherapist.
3. Surgical insertion of an Artificial Sling.
4. Surgical insertion of an Artificial Sphincter.

RECOVERING SEXUAL FUNCTION

As with continence, you should reasonable expect to recover satisfactory sexual functionality. Don't expect to have the prowess of an 18 year old; but tailor your expectation to your age, weight and health.

The lines of treatment include:

1. Heal over time (up to 6 months).
2. Medications such as Viagra.
3. Assistance such as the vacuum pump or penile injections.
4. Surgical prosthesis (which has the highest satisfaction rate, but is irreversible).

Don't put off seeking help as issues, such as penile reduction, cannot be reversed.

If you are on hormone therapy, you won't be able to be as sexually proficient as if you have normal testosterone levels.

PEYRONIE'S DISEASE

Peyronie's disease is a bent erect penis caused by scar tissue on the penis, making sexual intercourse difficult and occasionally painful. There are medications and surgical techniques to help.

PSA TESTING

There are controversy and varying recommendations on PSA testing of late. The resolution is forthcoming by the world-wide group of experts who developed five key considerations presented as the "**Melbourne Consensus Statement on Prostate Cancer Testing**" - a consensus view on the early detection of prostate cancer, led by experts at the Prostate Cancer World Congress, Melbourne, 7-10th August 2013.

<http://prostatecancerresearch.org.au/wp-content/uploads/2013/08/The-Melbourne-Consensus-Statement-on-PSA-Testing.pdf>

1. For men aged 50-69, level one evidence demonstrates that PSA testing reduces prostate cancer-specific mortality and the incidence of metastatic prostate cancer. Well-informed men in this age group should be fully counselled about the positive and negative aspects of PSA testing to reduce their risk of metastases and death. This should be part of a shared decision-making process.
2. Prostate cancer diagnosis must be uncoupled from prostate cancer intervention. Active surveillance protocols have been developed and have been shown to be a reasonable



and safe option for many men with low-volume, low-risk prostate cancer.

3. PSA testing should not be considered on its own, but rather as part of a multivariable approach to early prostate cancer detection.
4. Baseline PSA testing for men in their 40's is useful for predicting the future risk of prostate cancer.
5. Older men in good health with over ten year life expectancy should not be denied PSA testing on the basis of their age.

TESTOSTERONE

Testosterone plays a key role in the development of male reproductive tissues such as the testis and prostate as well as promoting secondary sexual characteristics such as increased muscle, bone mass, and the growth of body hair. In addition, testosterone is essential for health and well-being as well as the prevention of osteoporosis.

The complication is for men on hormone therapy, the point of the therapy is to reduce testosterone. If not on the hormone therapy, ask your doctor to check your levels - too little or too much testosterone can cause problems.

“WONDER DRUG” FOR PROSTATE CANCER

My oncologist has prescribed an amazing drug for me as a part of my prostate cancer medication. Clinical trials have shown that it reduces the likelihood that cancer will spread to distant organs by about 40-50% and that it significantly reduces risk of prostate cancer-specific mortality in men being treated for prostate cancer. It is taken orally - a single tablet, costing less than \$0.01, per day. It's not a new drug - it's been around since the 1890's.

The drug is, of course, aspirin. Aspirin has well known side-effects and may not be appropriate for your prostate cancer treatment. Discuss it with your doctor before using it. For more information, go to the following articles and the references contained in them:

<http://prostatesnatchers.blogspot.com.au/2014/02/the-humble-aspirin-to-rescue-or-does.html>

<http://www.forbes.com/sites/melaniehaken/2013/04/23/new-cancer-prevention-secret-aspirin/>

PCFA ADVOCATE XOFIGO[®] (RADIUM 223)

PCFA is calling upon the prostate cancer community to advocate for Australian approval for Xofigo[®] (Radium 223). Xofigo is a new radiation treatment for bone metastasis for men with castrate-resistant prostate. Clinical trials have shown it can increase both the overall life expectancy and the quality of life for men with this disease.

Xofigo is indicated very specifically for people with bone metastatic lesions. As the USA's FDA has stated, Xofigo should not be used in patients with visceral disease, or evidence of liver or lung lesions. I don't think it should be used in patients with a large volume of lymph node involvement. Xofigo is best used in men with bone-predominate castrate resistant prostate cancer.

Contact your local federal politician to advocate for the treatments approval.

ONJCWC WELLNESS APRIL 2014 CALENDAR

The ONJCWC Wellness team are proud to present the April Calendar for 2014. Many of the programs which were developed over the last 18 months will now be offered regularly throughout the year and



Newsletter No: 129

Next Meetings: 9th & 24th April 2014

we look forward to bringing you a range of new programs as the year progresses.

Some of the highlights in **April** include:

1. **Boost Your Energy** (Managing Cancer Fatigue) Thursday 3rd April 1-3pm
2. **Understanding Legal & Financial Issues** Friday 4th April 10.00am- 12.00
3. **Learn to Massage with Confidence** 7th April 2-4pm
4. **Learn to Relax** 11th April 11.00am- 12.00
5. **The Music Group** 11th April 2.30- 4.00pm

Coming up in **May**:

1. **Yoga** (Term two) commences 8th May
2. **Supporting Someone with Cancer** - Carer's Group Evening 15th May

For any queries relating to the calendar or programs, please contact the **ONJ Wellness Centre** on **03 9496 3799**.

PLEASE RETURN BOOKS or DVDs BORROWED from the LIBRARY

Prostate Heidelberg currently has a significant number of books and DVDs that have not been returned. The usual borrowing period is one month. As there are other people who would like to use these library resources on their cancer journey, please return them at the

next available meeting. If you borrowed a book and since lost it, please send a note to that effect to prostateheidelberg@gmail.com; we may be able to replace it.

FINANCIALS MARCH 2014

As of 24th March 2014, Prostate Heidelberg had \$4,928 (23rd February: \$5,324) in its NAB bank account, and \$100 as a petty cash float.

MEETINGS MARCH 2014

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www.ProstateHeidelberg.info

PCFA support group contact for Victoria and Tasmania is Amanda Pomery. Her email is amanda.pomery@pcfa.org.au. If you have not received the support you expected, or have suggestions you wish to give confidentially, contact Amanda.



USEFUL PROSTATE CANCER WEBSITES

ProstMate, individualised Prostate Cancer support www.ProstMate.org.au;

Prostate Cancer Foundation of Australia www.pcfa.org.au;

Cancer Council Victoria www.cancervic.org.au; HELPLINE - 13 11 20

Beyond Blue: www.BeyondBlue.org.au; HELPLINE: 1300 22 4636

Continence Foundation of Australia www.continence.org.au; HELPLINE: 1800 33 00 66

Royal Australian and New Zealand College of Radiologists www.targetingcancer.com.au;

National Cancer Institute: www.cancer.gov;

Cancer Council Australia: www.cancer.gov.au;

Lions' Australian Prostate Cancer Collaboration www.prostatehealth.org.au;

USA Prostate Cancer Foundation www.pcf.org

Life Extension www.lef.org;

Us Too International Prostate Cancer Education and Support Network www.UsToo.org;

American Institute for Diseases of the Prostate www.prostateteam.com (Dr Charles "Snuffy" Myers);

Australian Advanced Prostate Cancer Support Groups website www.jimjimjimjim.com;

Commonwealth site for palliative care <http://www.health.gov.au/palliativecare>;

Banksia Palliative Care <http://www.BanksiaPalliative.com.au>