



COMMITTEE:

Bob Cook, Treasurer
Chris Ellis
Spiros Haldas,
Max Shub, Facilitator
Peter Stanley
Patrick Woodlock, Convenor
03 9459 0131

ProstateHeidelberg@gmail.com
PO Box 241 Ivanhoe Vic 3079

Annual subscription - \$5

Meetings: 10:00am -12:30pm
Uniting Church Meeting Room
Seddon St, Ivanhoe

CALENDAR 2012

Wed 12th December 2012
followed by [Xmas lunch](#)

CALENDAR 2013

Wed 13th February 2013

[David Gray](#)

[Nursing Prostate Cancer](#)

Wed 13th March 2013

Wed 10th April 2013

Wed 8th May 2013

Wed 12th June 2013

Wed 10th July 2013

Wed 14th August 2013

Wed 11th September 2013

Wed 9th October 2013

Wed 13th November 2013

Remember, the PCFA's Localised Prostate Cancer Patient Pack is available to newly diagnosed men from PCFA or contact Patrick Woodlock on 03 9459 0131.

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. Listen and allow people to speak;
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 particular circumstances. This disclaimer is issued without prejudice.

The Prostate Heidelberg Cancer Support Group last met on 14th November 2012 at the Ivanhoe Uniting Church Meeting Room at 10:00 am with 14 members in attendance.

NEXT MEETING

Our next meeting is 10:00 am Wednesday 12th December 2012. Partners or carers are welcome to all meetings. The meeting will be followed by a **Christmas Lunch** for all members and their partners.

CHRISTMAS LUNCH

The meeting of Wednesday 12th December, will be followed by Christmas Lunch. All members, wives, partners and carers are welcome. Please RSVP to prostateheidelberg@gmail.com. **RSVP is essential, as we have to pay a deposit, by 7th December.**

The venue is the Ivanhoe Hotel.

(www.ivanhoehotel.com.au).

Each attendee must contribute \$10 for 1 main course or one Seniors Lunch. The \$10 does not include drinks, or other courses (entree or dessert, except for the Seniors menu).

2013 SPEAKERS

Max is attempting to get together next year's speakers. Give your suggestions to prostateheidelberg@gmail.com



NEVER TOO YOUNG FOR PROSTATE CANCER: “A Couple’s Path to Education and Empowerment”

By Rikki and Terry Robinson, PCRI Insights: November 2012 Vol. 15, No. 4

<http://prostate-cancer.org/wp-content/uploads/2012/11/Insights-Nov-2012-ROBINSONS.pdf>

What follows is an extract from the above article.

(Terry Robinson was 45, a PSA of 17 and rising, a Gleason Score of 4+3=7. The Robinsons opted for surgery.)

Life Moves Forward

There is a stigma that comes with prostate cancer. Most men don’t want to talk about it, especially because it involves that part of the body. Couple that with someone so young, and the silence is deafening. We decided early on, not only would we be advocates and educators, but we would also be open about the side effects. Terry never felt ashamed. Our hope is that the next generation of men and women will use their voice to help raise awareness. Yes, there is much work that still needs to be done, and we lag behind other major cancer awareness campaigns. Still, we are hopeful, and can’t help but feel major breakthroughs headed our way in terms of medical research and social awareness.

Attitude is everything during the healing process. We managed to laugh quite a bit through cancer, probably to keep from crying. We even laughed the day Terry had to put on a diaper following catheter removal. He snapped a picture of himself in the doctor’s office with a big smile on his face. He was completely dry within six weeks of surgery.

Terry’s doctor prescribed him Levitra (“*FDA approved oral medication for the treatment of erectile dysfunction*”) as part of his penile rehabilitation plan. It didn’t do anything for us sexually at first, but we understood why. I guess it’s at this exact juncture couples get tripped up sexually. When you focus on the part of the body that isn’t working, you stay stuck right there, and hinder the healing process both physically and emotionally. The key for us was acknowledging sex as different, but not broken.

We stayed light about the subject of ED (erectile dysfunction), because we knew from the beginning that he needed time to heal. With a ton of physical and emotional love for each other, help of supportive doctors, a solid sexual rehab plan in place which included an arsenal of medication, we persistently and successfully pushed forward, with amazing results. What a team!

The truth is sexual side effects from surgery can wreak havoc on an already unstable marriage, and be a major blow to a man’s ego.

Even if a couple is stable, a mere lack of communication and poor understanding of the healing process and side effects can be detrimental to a marriage. We encourage all men and couples to talk openly and honestly about the issue first, to come up with a sexual rehabilitation plan beforehand, and most importantly, to stay positive and never give up hope.

Cancer will steal your joy if you let it. Even after a successful treatment, anxiety about recurrence is real. I am learning to live fully present in the moment, and not worry about tomorrow. If cancer gives you anything, it is a realization that life is precious. I adore my husband. He is the hero in this story. He’s working through prostate cancer like a warrior. His positive attitude truly sets the tone for our healing process post-surgery. He’s



confident with his body's ability to heal itself, and is always willing to be open and honest about his experience.

Prostate cancer has been stressful, but we manage to love and support each other through the hardest of times, and as a result, we are stronger. With our faith in God, hope, support from family and friends, and most importantly, our love for each other, we persevere.

LIBRARY SNIPPETS

From the PCFA, the Cancer Council and other expert organisations, the library includes books, pamphlets and DVDs on topics such as advanced or localised prostate cancer, treatments, incontinence, sexual dysfunction, diet and health, and a myriad of other titles. If you borrow material you found useful, let us know so others can share your enlightenment.

New Books in the Library

INVASION OF THE PROSTATE SNATCHERS

“No More Unnecessary Biopsies, Radical Treatment Or Loss Of Sexual Potency”

By Ralph Blum and Mark Scholz (291 pages)

The title and subtitle of this book state its theme clearly and set the tone as well. It is lively and conversational and includes a lot of personal and anecdotal material. It also has a strong basis of statistical data, medical information and a background of years of experience in the treatment of men with prostate cancer.

Ralph Blum is a cultural anthropologist and author who has lived with prostate cancer without radical intervention for twenty years and Mark Scholz MD has been a specialist in the treatment of prostate cancer since 1995.

The evidence of statistics is quoted to claim that only one out of seven men in the US with prostate cancer is truly at risk from the disease. “New research shows that there is an indolent variety of the disease that is not life threatening, a type that can be safely monitored without immediate treatment.” says Scholz.

The two authors alternately present chapters with the heading ‘The Patient’s Track’, ending with ‘The Doctor’s View’ and ‘The Doctor’s Track’ ending with ‘The Patient’s View’, providing two perspectives on the topics discussed.

A wide range of issues is examined and the titles of the chapters are often quirky, but stimulate the reader’s interest: “All the Decision Makers are Surgeons!”, “The Quest for an Enchanted Shotgun”, “Life in the Libido-Free Zone”, “The Return of the Prodigal Hard-On and Invitation to the “Ice Ball”.

There are also less colourful but simply informative chapter headings: “Introducing Active Surveillance”, “A New Look at Radiation”, “Deciding your Treatment”, “Diet and “Supplements: An Overview” and finally “Genuine hope for Men with Relapsed Disease”.

This readable and informative book is directed at the newly diagnosed prostate cancer patient but it is also of interest and value to a wider readership.



[A New Publication Available from Cancer Council](#)

MESSAGE AND CANCER

“A Guide For People With Cancer, Their Families And Friends”

A Cancer Council Publication, www.cancercouncil.com.au

Available from the Cancer Council Helpline on 13 11 20

Touch therapies - Touch through massage:- holding hands, hugging or sitting close to someone are ways a person with cancer can receive touch. You can also receive touch through massage. Massage can reduce anxiety and pain, decrease nausea, and improve energy and well-being. Touch through massage is a way to communicate love or care, and to help re-connect with yourself and others. It can also create a nurturing environment.

Body-based practices involve a series of specialised movements or strokes on the client's body to provide relaxation or relief from physical and emotional symptoms. They are sometimes called touch, physical or manual therapies, or bodywork. Massage is a body-based practice.

Massage is an ancient technique that involves moving (manipulating) muscles and rubbing or stroking soft tissues of the body. Massage is considered a type of complementary therapy. Complementary therapies aim to treat the whole person, not just the symptoms of disease. They are used together with conventional or mainstream medicine. Complementary therapies are not used instead of cancer treatments such as chemotherapy, radiotherapy, surgery or drug therapy.

While massage doesn't treat the cancer itself, it may help reduce the side effects caused by conventional treatments and improve quality of life.

Massage may be offered to cancer patients in some hospitals and hospices. Ask your doctor or nurse if massage is available at the centre where you are having your treatment. Some patients are able to have chemotherapy and a massage at the same time, or you may prefer to have the massage after the treatment has finished. You can also have a massage from a private practitioner in their own rooms.

Scientific studies have been done to show the effects of various body-based practices on people having cancer treatments such as chemotherapy and surgery. These studies have shown that massage may reduce pain, fatigue, nausea, and anxiety and depression. Massage may also improve sleep, nerve damage (neuropathy), quality of life, and mental clarity and alertness.

Another benefit of massage is reducing lymphoedema, which is swelling in the tissues caused by a build-up of fluid after surgery or radiotherapy to the lymph nodes.

Light, relaxing massage can safely be given to people at all stages of cancer. Tumour or treatment sites should not be massaged to avoid discomfort or too much pressure on the affected area and underlying organs. If you have any concerns, you can talk to your doctor or call the Cancer Council Helpline on 13 11 20.



WORLD CANCER DAY 4 FEBRUARY 2013 - "CANCER - DID YOU KNOW?"

Union for International Cancer Control (UICC) is organising the World Cancer Day 2013 campaign for 4th february 2013. The focus is on Target 5 of the World Cancer Declaration: Dispel damaging myths and misconceptions about cancer, under the tagline "Cancer - Did you know?"

UPCOMING EVENTS and SPEAKERS CONFIRMED;

Christmas Lunch - Wednesday 12th December 2012, after normal meeting. Wives, partners and carers are welcome. Please RSVP to prostateheidelberg@gmail.com. **RSVP is essential, as we have to pay a deposit, by 7th December.**

The venue is the Ivanhoe Hotel. (www.ivanhoehotel.com.au). Each attendee must contribute \$10 for 1 main course or one Seniors Lunch. The \$10 does not include drinks, or other courses (entree or dessert, except for the Seniors menu).

Wednesday 13th February 2013, David Gray, Prostate Cancer Nurse at the Austin Olivier Newton-John Cancer & Wellness Centre. His position is funded by PCFA using the 2011 Movember monies.

Topic: "Prostate Cancer Nursing"

NEXT MEETING: 10:00 am to 12.30 pm, Wednesday 12th December 2012 at the Ivanhoe Uniting Church Meeting Room, Seddon Street Ivanhoe (Melways 31 F8) - behind the Commonwealth Bank in Upper Heidelberg Rd.

CORRESPONDENCE:

Prostate Heidelberg, PO Box 241 Ivanhoe Vic 3079

ProstateHeidelberg@gmail.com

www.ProstateHeidelberg.info

PCFA support group contact for Victoria and Tasmania is Amanda Pomery. Her email is amanda.pomery@pcfa.org.au.

USEFUL PROSTATE WEBSITES

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;

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

National Cancer Institute: www.cancer.gov;

USA Prostate Cancer Foundation www.pcf.org

Steve Dunn's Cancer Guide www.cancerguide.org;

Life Extension www.lef.org;

Us TOO International Prostate Cancer Education and Support Network www.prostatepointers.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.