

Prostate Cancer Support Group - Northern Beaches

Affiliated with the Prostate Cancer Foundation of Australia

Proudly sponsored by Hammond Care, Health and Hospitals Limited
*A program of support serving men of all ages, their families, carers and friends
before, during and after diagnosis*

Newsletter No. 187 - March 2019

Editor: Mary Jones

Our next meeting will be held on

Tuesday, 2 April 2019

Our speaker will be Assoc Prof. Michael Izard

Radiation Oncologist Mater Hospital

Everyone is welcome, bring your partners along

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Monthly Meetings

All people are welcome to attend our regular monthly meetings. No notice is required - simply come along and introduce yourself, or contact us via the website.

When:

Meetings of our support group are held on the 1st Tuesday of the month except in January.

Usual Location:

The Cottage, Mona Vale Hospital, Coronation Street, Mona Vale.

Time: 6:30pm till 8:30pm

Tuesday 2 April

Our speaker for April, Dr Michael Izard began his medical career at The Middlesex Hospital in London. Moving to Australia he completed training in radiation oncology at Sydney's St Vincent's and Westmead Hospitals in 1993. Come along and hear his presentation.

March Meeting Report.

Dr Zaklina Kovacevic is senior researcher at the University of Sydney School of Medicine. The topic of her presentation was -

A Promising New Molecular Target for Castrate Resistant Prostate Cancer

Zaklina said that Metastasis is the leading cause of mortality, being responsible for >90% of cancer related deaths. To date, there has been limited progress in the development of treatments that can specifically inhibit the onset and progression of metastasis. Her research has been focused on understanding metastasis, identifying molecular markers that control this process and developing novel treatment strategies designed to inhibit metastatic progression.

She explained that Prostate Cancer cells are 'fed' by testosterone and that these cells have androgen receptors that bind testosterone to the cells that in turn promote the growth of the cancer. The first line of therapy for PC is androgen deprivation therapy that aims to stop the production of testosterone, but over time the cancer cells become resistant to this treatment and begin to produce their own testosterone. This then becomes Castrate Resistant Prostate Cancer (CRPC)

Enzalutamide is the leading treatment for CRPC, but eventually the PC cells devise a way to resist the effect of this drug.

Zaklina's research is centred on the need to develop a novel multi-faceted approach to overcome the development of resistance by the cancer cells.

Lead anti-cancer agents have been developed in their lab that are highly potent against multiple cancer types.

The most potent and effective anti-cancer agent they have developed is DpC.

Its benefits include:

- It is highly potent against very aggressive cancers
- Very small doses required therefore minimal side effects
- Orally active for easy administration
- Overcomes resistance to current chemotherapies
- Inhibits metastasis
- Very easy and inexpensive to produce

DpC has now entered Phase I clinical trials for advanced solid tumours in Sydney and Melbourne. They recently examined the effect of DpC and AR levels and activity and discovered that DpC:

- Promotes AR degradation – reducing its levels in PC cells.
- Inhibits AR activity and down-stream signalling → including PSA.
- Inhibits testosterone mediated activation of AR signalling.
- Inhibits key pathways that contribute to resistance.

They have compared DpC to Enzalutamide in mice and are now investigating the potential of combining DpC with Enzalutamide to see if these agents can synergise to overcome development of resistance.

The team is investigating the molecular mechanisms by which DpC inhibits the development of resistance which they now need to understand in order to identify which patients will best respond to this therapy.

As always, funding for research programmes is a competitive area but Zaklina hopes to attract an investment in the research of her team to further the development of DpC and hopefully provide an answer to the problem of castrate resistant prostate cancer as well as its application for other cancers.

Everyone enjoyed Zaklina's presentation and we thanked her very much for sharing her time and information with us.

Prostate cancer in younger men

By Wendy Winnall on March 12, 2019

Younger men who are diagnosed with prostate cancer face many challenges. They may be fighting this disease at a busy time in their working lives, or whilst looking after a young family, or dating or trying to conceive children. Younger men with advanced prostate cancer face having their lives cut dramatically short by this disease. New research is helping to understand the nature of early-onset prostate cancer and the best strategies for management and treatment.

Prostate cancer in younger men

Younger men, such as those less than 55 years old, often face additional challenges when diagnosed with prostate cancer. Their diagnosis is usually a big shock to them, as they considered this an older men's disease. Younger men are diagnosed at what seems like the prime of their lives. They may have young families, mortgages to pay, busy jobs and social lives.

After initial treatment for localised prostate cancer, younger men usually need to return to work and to "normal life". Few of their colleagues and friends understand the challenges they face soon after treatment. Whilst their friends are leading active lives, such as playing sport and taking holidays, recovery from prostate surgery makes these activities difficult. These men are often struggling to cope with temporary or long-term incontinence. This is difficult to manage in the workplace, makes sport and other daily activities much more challenging. These men face everyday challenges such as finding toilets where they can dispose of incontinence pads.

Treatments for both localised and advanced prostate cancer can have a terrible effect on a man's sex life. This is perhaps more distressing for younger men. These men are more likely to be in new relationships or dating. Couples in their 40s and 50s expect to enjoy a full sex life and are often devastated when this is taken from them by the cancer treatment. Men in their 40s and 50s may be still trying to conceive children. But most prostate cancer treatments will leave them sterile. Whilst these are all issues that affect older men too, they can be more problematic for younger men.

To read the full article go to -

<https://tinyurl.com/y3y7bzho>

Rethink Prostate Screening?

An article in the *Daily Telegraph* on Monday 11 March 2019 stated that almost half of prostate cancer diagnosed in Australia as a result of screening tests would cause no harm if left undetected. In an Australian-first study, led by Bond University, researchers estimated the extent of 'over-diagnosis' in prostate cancer for the first time using statistical software and Australian Institute of Health and Welfare data.

The research published in the medical journal *BMJ Open*, found the lifetime risk of being diagnosed with prostate cancer rose from 6.1 per cent in 1982 to 19.6 per cent in 2012 with a rapid increase following the introduction of prostate-specific antigen (PSA) screening in 1989.

Bond University professor of evidence-based medicine Paul Gasziou, one of the authors of the study, said the results clearly demonstrated Australia had been over-diagnosing prostate cancer for decades.

"We are detecting dormant cancers that would never become symptomatic," he said.

The researchers have called for general practitioners to talk more openly with men about the risks and benefits of PSA testing before screening them. Surgery to remove the prostate gland can result in incontinence and impotence. The psychological effects of cancer diagnosis can also be mentally debilitating.

To test or not to test?

Congratulations

Our sincere congratulations go to our very own Jo-Ann Steeves who has been awarded a Fellow at the Australian and New Zealand Institute of Management and Leadership. As a member of the association Jo-Ann has received the highest ranking in this peak body for managers. The award is based on a combination of work, awards and academia and celebrates Jo-Ann's Palliative Care Award of 2013, NSW Woman of the Year 2015 and her Management Masters Degree at UTS. Well done Jo-Ann!

Advanced Care Planning

Advanced care planning gives you the options and a say in your medical decisions, if you are ever too unwell to speak for yourself.

On Tuesday 2 April (*yes the same day as our meeting*) a workshop will be held at the Palliative Care Cottage at 10am. Make your voice heard.

Ring Kelly Arthurs on 0434 309 724 or email gmarr@hammond.com.au Morning tea provided.

Norma's March Quiz

- 1 In the original Roman calendar which month was March - 1st 2nd 3rd or 4th?
- 2 March is named after which Roman God?
- 3 What is the flower for March?
- 4 March has more than one birthstone, TRUE or FALSE? Name it or them
- 5 Which of these occurs in March, SOLSTICE or EQUINOX?
- 6 Complete the saying. Mad as a March
- 7 Finish the saying, March comes in like a lion and goes out like a
- 8 What date was Caesar warned "beware the Ides of March"?
- 9 Why are the 1st and 17th March important dates?
- 10 Which important Jewish Special day is celebrated in March, Yom Kippur, Purim or Chanukah?

Answers to Norma's February Quiz

1. Which old time comedian said A rich man is nothing but a poor man with money? *W.C Field*
2. Which well known writer and cynic said "A man can be happy with any woman as long as he does not love her."? *Oscar Wilde*
3. Which Elizabethan writer said "God made him and therefore let him pass for a man" *William Shakespeare*
4. What does Veni, Vidi Vici mean? *"I came, I saw, I conquered"*
5. What is Madonna's real name? *Madonna Louise Ciccone*
6. What is a Chino o mania? - mad about, dogs, snow, Chinese culture? *Snow*
7. What do you get if you cross a frog with a calendar? *A Leap Year!*
8. What is the chemical symbol for Tungsten? *Tungsten 9*
9. Who recorded the albums 'Born to Run' and 'Born in the USA'? *Bruce Springstein*
10. Why did David Beckham's football boots upset Aussies? *They were made from Kangaroo*

Meetings for 2019

- Tuesday 7 May - Assoc Prof Celi Verol
Urologist Macquarie University
- Tuesday 4 June – Prof Keall,
Prostate Cancer Clinical Trials
- Tuesday 2 July – Christmas in July DY RSL
- Tuesday 6 August – TBA
- Tuesday 3 September – Mens' Night Only
- Tuesday 1 October – TBA
- Tuesday 5 November – TBA
- Tuesday 4 December – Christmas Social

Publicity

One of the main aims of the NB Prostate Cancer Support Group is to reach out to men and their families and provide information and emotional support for those diagnosed with Prostate Cancer. PCFA Ambassador Programme we may be able to reach more men's groups and clubs and spread the word about the importance of regular testing for prostate cancer.

This year, we are hoping that with the support of the PCFA Ambassador Programme we may be able to reach more men's groups and clubs and spread the word about the importance of regular testing for prostate cancer.

If you know of any organisation that may benefit from having one of the Ambassador Speakers visit them please let one of the committee members know.

We are always seeking ways to reach the public and articles about our Group have appeared in Pittwater Online News and the 'What's on Pittwater' website provides information about our meetings.

Disclaimer

From time to time in our newsletters we provide information about developments in the diagnosis and treatment of prostate cancer, research articles, documents, presentations and other interesting materials. However, the Group's Executive and the editor of this newsletter do not have the medical expertise required to make an informed evaluation of the conclusions and recommendations presented in such materials, and we have not verified such conclusions and recommendations through The information presented in this newsletter must not be interpreted as being endorsed or recommended by the Executive or the editor. Any recommendations made in such materials may not be applicable in your particular case. Before implementing any recommendations made in the materials that are reported, it is essential that you obtain advice from appropriately qualified medical professionals. The view of the Group's Executive is that no two prostate cancer cases are alike and that no single treatment option is better than any other in all cases. While the information in this newsletter should be of interest, there is no substitute for getting informed medical advice from your own GP, specialists and other medical professionals

Contact Us

Postal address

Northern Beaches Prostate Cancer Support Group
PO Box 324, Mona Vale, NSW 1660

Web site

Our web site provides details about the activities of the group, meetings, contact persons and lots of other useful information:

www.prostate-cancer-support-nb.org

Personal support

If you would like support, advice or assistance contact any of the committee:

Treasurer - Alan Taylor Phone: 02 9981 2616

Library - Ron Jones Phone: 02 9997 2709

Programme Organiser -

Denise Taylor Phone: 02 9981 2616

Catering - Jo-Ann Steeves Phone: 02 9918 6575

Eleanor Swansbra Phone: 02 9918 6428

Norma Norman Phone: 02 9918 4929

Committee member, newsletter editor and web site manager:

Mary Jones Phone: 0409 909 356

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Useful websites:

www.pcfa.org.au Telephone: 02 9438 7000

See PCFA Newsletters online at:

www.pcfa.org.au/articleLive/pages/PCFA-Newsletters.html

Other useful links-

www.prostatehealth.org.au

www.cancercouncil.com.au, www.acf.com.au

www.prostate-cancer-support-act.net

www.prostate-cancer-support-sydneynorth.org

If you are aware of news, products, publications, web sites, services or events that may be of interest to members of the group I'd be happy to be informed of them.

Past issues of our newsletters can be viewed on our website: www.prostate-cancer-support-nb.org

