

Managing Advanced Stage Prostate Cancer

The term advanced stage prostate cancer means that your cancer has spread to other parts of your body. Prostate cancer most frequently spreads to the bones and lymph nodes but it can spread anywhere, including the bladder, the kidneys and the bowel. Tumors can also press against the urethra, causing pain and problems with urination.

There is no cure for advanced stage prostate cancer, however, it can be controlled, sometimes for years. Because cancer develops differently in

each person, there is no way of knowing how your cancer will develop, how quickly it will develop and what your life expectancy is. Your doctor may be able to give you some idea based on your current health, your health history and how your cancer has developed thus far.

Palliative care

You might hear the term “palliative” care and worry that it means you are near the end of your life. This isn’t

necessarily true. Palliative care applies to care for a terminal illness. It focuses on managing symptoms as well as providing physical, practical and spiritual care. Some men receive palliative care for years.

Treatment

There are four main types of treatment used when you have advanced stage prostate cancer:

(Continued on page 2)

Medical Advisors

Paul Daeninck M.D.
Medical Oncologist

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John Milner
M.D. Urologist

Jeff Sisler M.D.
Family Practitioner

Thanks!

Next meeting: October 15, 2015

Dr. Kelli Berzuk,

Incontinence Physiotherapist

Topic: Living With Incontinence:
Do I Have To?

Location: Lower level Auditorium
Seven Oaks General Hospital

Time: General Discussion 7:00 pm
Speaker with Q & A 8:00 pm



*The Manitoba Prostate Cancer Support Group
does not recommend treatment modalities,
medications, or physicians.*

MPCSG – active since 1992.

Thought of The Day

You can't be old and wise if you were never young and foolish.

(Continued from page 1)

Hormone therapy - Testosterone helps to fuel the growth of prostate cancer. Hormone therapy blocks the production or absorption of testosterone. This type of treatment often shrinks tumors or slows down their growth. Possible side effects include erectile dysfunction, loss of libido, hot flashes, enlarged breasts, bone loss and insulin sensitivity.

Radiation - Radiation therapy targets cancer in the prostate and in other parts of your body. It works to kill the cancer cells. If your cancer has spread to your bones, there are several ways radiation therapy can be administered, including, external radiation or administered through the bloodstream. It may not kill all of the cancer cells in your bones but often kills enough to lessen your pain. Possible side effects include erectile dysfunction, frequent urination, blood in urine, diarrhea, rectal bleeding, discomfort during bowel movement.

Immunotherapy - This type of therapy “boosts” your immune system to help it fight the cancer cells. The medication Provenge is approved by the FDA to be used for advanced stage prostate cancer. Side effects include running a fever.

Chemotherapy - This treatment uses a combination of different drugs to kill the cancer cells. It usually has severe side effects and is often used only when other methods of treatments have failed. Chemotherapy is usually given in several cycles, so that your body has a chance to recover from the side effects before the next cycle begins. Possible side effects include hair loss, fragile bones, nausea, constipation, vomiting, diarrhea, headache, confusion, depression.

Your doctor might suggest that you use more than one type of treatment at the same time, for example, hormone therapy and radiation. Your treatment plan should include strategies for minimizing and coping with side effects.

Managing symptoms

It might sometimes be hard to know whether your symptoms are caused by your cancer or the treatment you are receiving. Keep in mind that it doesn't matter - managing each symptom, no matter the cause, is important. Controlling symptoms provides you



with a more comfortable life and gives you a higher quality of life. It can help you carry on your daily activities or spend more time with the people you love. Some of the common problems associated with advanced stage prostate cancer include:

=> Fatigue

What you can do –

- o Try to stay active by walking each day
- o Plan rest into your daily schedule
- o Talk to your doctor if you are not sleeping

=> Pain

What you can do -

- o Follow your treatment plan, this should help lessen the pain
- o Talk to your doctor about pain medications

=> Urinary problems

What you can do -

- o Talk to your doctor about medications and/or a catheter
- o Use absorbent pads and underwear
- o Talk to your doctor about surgery

=> Bowel problems

What you can do -

- o Use diet to help manage bowel problems - high fiber if constipated or cutting down on fiber for diarrhea
- o Drink plenty of water
- o Avoid spicy foods

=> Bone fractures

What you can do -

- o Talk to your doctor and/or a dietitian about foods that will help maintain bone health
- o Find out about medications that might help

Your treatment team is in place to help you. If you are uncomfortable, in pain or no longer able to participate in daily life, talk to your treatment team to find out what can be done to help you live a better life.

Source: www.healthcentral.com/prostate
June 2015

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Early Chemotherapy Important When Treating Advanced Prostate Cancer

Chemotherapy using the drug docetaxel is usually used once prostate cancer is in an advanced stage. However, a recent study has shown that adding this type of chemotherapy early in treatment can help extend the life of those with this type of cancer.

Treatment for prostate cancer is based on your specific situation. Your gleason score, which “grades” your cancer, along with information on whether and how much your cancer has spread outside of the pelvic region, is used to determine which type of treatment would be best. When cancer has reached stage III or stage IV, one of the treatments is hormone therapy. This type of treatment lowers androgen levels, such as testosterone, or blocks them from reaching the cancer cells in the prostate. Because these hormones stimulate prostate cancer cells, this type of therapy often helps but it does not cure prostate cancer.

According to Professor Nicholas James, one of the researchers at Warwick

University, chemotherapy is often not used until after hormone therapy, once the cancer has reached “a much more advanced stage of the illness.” The recent study shows that it is beneficial to add the chemotherapy at the beginning of treatment.

The study looked at almost 3,000 men. Some were given six doses of docetaxel at the start of their treatment and some were given hormone or other treatments without the addition of the drug. The study showed that those who received the drug lived 10 months longer. For those whose cancer had spread outside the pelvic region, this increased to 22 months. Professor James believes that, based on the results, all men with prostate cancer should be given docetaxel at the start of their treatment.

With only about 30 percent of men living five years after diagnosis with advanced stage prostate cancer, adding 10 to 22 months is a large improvement. John Angrave told *BBC News* that he was diagnosed with

advanced stage prostate cancer seven years ago and was given three to five years to live. He received docetaxel at the start of his treatment and not only is still alive but has a “good quality of life” that includes fishing, walking and spending time with his grandkids.

There are some side effects with docetaxel, however, the researchers noted these were manageable. The most common side effects include redness or swelling at the injection site as well as nausea and diarrhea. Those taking this medication should not get “live” vaccines. Some people may also experience allergic reactions to the medication - hives, difficulty breathing, swelling of the face, lips, tongue or throat. Should you take the medication you should tell your doctor if you experience any serious side effects or an allergic reaction.

source: www.healthcentral.com

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Cryotherapy: How it works for Prostate Cancer

Cryotherapy uses very cold temperatures to kill prostate cancer cells.

Technique has improved since first introduced in the 1960’s.

Used to treat localized prostate cancer and recurrent cancer following radiation therapy.

Freezes and immediately kills prostate cancer cells.

Performed under anesthesia, uses ultrasound-guided placement of cooling probes into the prostate.

Hormone therapy can be used prior to cryosurgery to decrease prostate size.



Long-term effectiveness is not well known.

Advantages of Cryosurgery

Avoids major surgery.

Less likely to cause urinary tract damage, obstructions, or bowel difficulties than radiation.

Procedure takes an hour and a half or less and patients often fully recover within days.

This procedure is becoming more reliable and with less complication in the hands of an expert.

Disadvantages of Cryosurgery

Impotence due to nerve damage is a common occurrence.

Urinary incontinence can occur but is rare.

Approximately 2% of men develop an abnormal tissue mass (fistula) that connects the rectum and the bladder that may require surgery to repair.

source: www.ustoo.org

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On Your Mark, Get Set



hair. This scruffy ritual is a fun display for both men and women to support and raise awareness for prostate cancer. We appreciate and offer our thanks to all you men who have put down your razors to show your support.

Put Your Razors Down

Typically November is the time of year when we see men of all ages sporting some "extra" facial

If you would like to support the **Manitoba Prostate Cancer Support Group**, you can make a secure online donation through our website at

www.manpros.org or send us a cheque to: Box 315 – 971 Corydon Ave., Winnipeg, MB, R3M 3S7. A tax receipt will be issued. You can also support our services by letting others know that we are here to help. All our services (newsletters, meetings, information booklets, etc.) are free of charge.

Note: We receive no financial assistance from Movember or Prostate Cancer Canada.

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High-Intensity Focused Ultrasound (HIFU):

How it works for Pca

HIFU is a treatment that uses the energy from ultrasound waves to produce very high temperatures of about 100°C or 212°F delivered to the prostate through a probe inserted into the rectum after spinal or epidural anesthesia has been administered.

=> Probe emits a beam of high intensity focused ultrasound.

=> At the point where the ultrasound is focused (focal point) the sudden and intense absorption of the ultrasound beam quickly raises the temperature which destroys targeted cells.

=> The area destroyed by each beam is very small and precise.

=> By repeating the process and moving the focal point it is possible to destroy the prostate tissue.

=> The treatment takes from 1 to 3 hours depending upon the size of the prostate and is usually performed on an outpatient basis.



Advantages of HIFU

=> Destruction of the cancerous tissue with no risk of injury to the surrounding organs.

=> No chance of rectal injury.

=> Patient does not undergo any radiation exposure.

=> Usually no hospital stay is required.

=> Treatment is performed under spinal or epidural anaesthesia.

=> Treatment can be repeated if necessary.

=> Other therapeutic alternatives can be considered in case of incomplete results.

=> Nerve sparing procedure can

be performed.

=> HIFU can be used for the treatment of local recurrences (i. e. after external beam radiotherapy).

Disadvantages of HIFU

=> No pathology (no tissue) to be examined following the procedure.

=> A transurethral resection of the prostate (TURP) may be required prior to treatment or at the time of the HIFU because many men develop urinary difficulties.

=> Not covered by many insurance plans.

=> HIFU treatment does not preclude other treatments. In those developing a recurrence, they remain candidates for surgery, radiation or hormone therapy.

Source: www.ustoo.org

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What is Cancer Immunotherapy?

Immunotherapy is treatment that uses certain parts of a person's immune system to fight diseases such as cancer. This can be done in a couple of ways.

Stimulating your own immune system to work harder or smarter to attack cancer cells

Giving you immune system components, such as man-made immune system proteins

Some types of immunotherapy are also sometimes called *biologic therapy* or *biotherapy*.

For a long time doctors suspected that the immune system could affect certain cancers. Even before the immune system was well understood, William Coley, MD, a New York surgeon, first noted that getting an infection after surgery seemed to help some cancer patients. In the late 1800s, he began treating cancer patients by infecting them with certain kinds of bacteria, which came to be known as *Coley toxins*. Although he had some success, his technique was overshadowed when other forms of cancer treatment, such as radiation therapy, came into use.

Since then, doctors have learned a great deal about the immune system and how it might be used to treat cancer. In the last few decades immunotherapy has become an important part of treating some types of cancer. Newer types of immune treatments are now being

studied for many other types, and they'll impact how we treat cancer in the future.

Immunotherapy includes treatments that work in different ways. Some boost the body's immune system in a very general way. Others help train the immune system to attack cancer cells specifically. Clearly there are limits on the immune system's ability to fight cancer on its own, because many people with healthy immune systems still develop cancer. Sometimes the immune system doesn't see the cancer cells as foreign because the cells are not different enough from normal cells. Sometimes the immune system recognizes the cancer cells, but the response might not be strong enough to destroy the cancer. Cancer cells themselves can also give off substances that keep the immune system in check.

To overcome this, researchers have found ways to help the immune system recognize cancer cells and strengthen its response so that it will destroy them.

Other treatments sometimes thought of as immunotherapy use immune system components (such as proteins called *antibodies*) that are made in the lab. Some of them boost the immune system once they are in the body. Others don't really affect the immune system much, if at all. Instead, the antibodies themselves target certain proteins that help cancer cells grow. By

binding to these proteins, the antibodies stop cancer cells from growing or make them die. These types of antibodies are also known as *targeted therapy*.

The main types of immunotherapy now being used to treat cancer are discussed in the following sections. They include:

Monoclonal antibodies: These are man-made versions of immune system proteins. Antibodies can be very useful in treating cancer because they can be designed to attack a very specific part of a cancer cell.

Cancer vaccines: Vaccines are substances put into the body to start an immune response against certain diseases. We usually think of them as being given to healthy people to help prevent infections. But some vaccines can help prevent or treat cancer.

Non-specific immunotherapies: These treatments boost the immune system in a general way, but this can still help the immune system attack cancer cells.

In addition, many newer types of Immunotherapy drugs are now being studied for use against cancer.

Source: American Cancer Society (Oct. 2014).

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Announcing Changes to MPCSG Board

Effective September 30th, 2015, **Brian Sprott** stepped down as Chair of the Board of the Manitoba Prostate Cancer Support Group. He has served in this position since 2008. Brian will remain on the Board as Past Chair and will use his knowledge and experience to assist in a variety of capacities.

Jos Borsa has assumed the position of Chair of the Board. The Board appreciates his commitment in taking on this responsibility. After joining the Board in October 2014, he became the Information Chair and is presently heading the Speaker Committee.

John O'Grodnik will take over the newly created position of Vice Chair. John has been on the Board since February 2014 and currently works on a number of committees.

5 Ways to Cut Stress

Money. Family. Work. Health issues. Sometimes it can seem hard to find a reason not to feel stressed.

But here's a good reason to unwind: "Chronic stress affects almost every system in our bodies and wreaks havoc on their functioning," says Lorenzo Cohen, Ph.D., professor and director of integrative medicine at MD Anderson. "It weakens the immune system, affects tumor development and makes it harder for your body to remain healthy."

And that's not all. Chronic stress ups your risk for heart disease, sleep difficulties, digestive problems and depression. It also makes you more likely to ditch healthy eating and exercise habits that help prevent cancer and other diseases.

"Some factors that cause stress can't be controlled, but for things you can control, find ways to avoid them or balance them with stress-reducing activities," Cohen says. "And, for stressors in your life you can't control, you've got to focus on yourself and make time to do things you enjoy."

Try these strategies for stress management:

1. Practice yoga or seated meditation.

"Movement-based mind-body activities like yoga are very helpful forms of stress management," Cohen says. "Yoga's focus on gentle movements, breathing and meditation helps relax both the mind and body." Yoga's benefits include improving sleep, mood and quality of life.

Any kind of mind-body practice can get the job done. This includes practices from the Chinese tradition, such as Tai Chi or Qigong, or practices from Tibetan traditions that focus on meditation and quieting the mind.

2. Sign up for art or music therapy.

People have been making music and art for thousands of years to heal — and express — themselves. Today, many people are working with art and music therapists to curb stress and improve self-esteem and communication, Cohen says. Best of all, you don't need to be a talented artist or musician to reap the benefits.

3. Take a hike.

Ward off the stress of urban crowds, noise and traffic by putting on your tennis shoes and taking a hike. People who spend time walking through the forest experience far less stress and have a lower heart rate, pulse rate and blood pressure than those stuck in the city, according to a recent study. It's no wonder the American Cancer Society says exercise reduces stress.

4. Get a massage.

By stroking, kneading or stretching different muscle groups, a masseuse can relax areas that have tensed up. Plus, research shows that massage can reduce pain and anxiety. "Massage won't eliminate stress for the long-run," Cohen says, "but it can really help lessen tension short-term."

5. Resist sugar cravings.

"While sugar may cheer you up and give you a big energy boost, it's very short-lived," Cohen says. "When the sugar rush disappears, you end up feeling worse than before. You feel drained of energy. And in many cases,

people end up feeling depressed or guilty for eating unhealthy, which just feeds their stress."

If you really need your sugar fix, eat a piece of fruit. The fiber will keep you from crashing after your sugar high and keep you full longer. Plus, you won't feel guilty about making unhealthy food choices — and you'll pack on cancer-fighting nutrients, according to the American Institute for Cancer Research.

It's okay if these stress reduction strategies don't appeal to you. "Different things work for different people," Cohen says. "You can reduce stress just by doing your favorite hobby."

The most important thing is to find what works for you and make time regularly for relaxation.

"Many people think they don't have time to relax," Cohen says. "But five minutes a day is often enough, and the reality is we need to make time to take those five minutes."

Source: mdanderson.org

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New Wellness Program at CancerCare Manitoba

Moving Forward After Cancer: What You Can Do to Stay As Healthy As Possible.

“Many people have mixed feelings once their cancer treatments are over,” says Jill Taylor-Brown, Director of Patient and Family Support Services. “On the one hand, there is relief to be through the physical and emotional demands of treatment. On the other hand, there is anxiety about the future.”

“*Moving Forward After Cancer Wellness Program* is designed to help with all these concerns and is available to men and women who have completed treatment within the last two years,” says Elizabeth Payne, CCMB social worker and program facilitator.



“The program is designed to help former cancer patients transition from active treatment to life after treatment, through topics on nutrition, exercise, emotional health and wellbeing, what to expect in follow-up care and more. It is held twice a week for eight weeks and each session includes a period of exercise at your own pace led by an exercise specialist.”

CancerCare Manitoba has partnered with the Winnipeg Reh-Fit Centre to enhance an earlier program, and all sessions are now held at their facility located at 1390 Taylor Avenue.

One participant expressed how the program has helped them, “I learned that I was not alone with my anxiety about transitioning back to normal life”. Other participants commented, “It helped me to improve my physical well-being, stamina and mental state.” and “It was exactly what I needed!”

The program is available at no cost to participants, thanks to funding from the CancerCare Manitoba Foundation. The next session begins in October. Register now to save your spot by calling 204-787-2109.

Source: *The Navigator*, August 2015 – courtesy CancerCare Manitoba.

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ASCO Endorses Adjuvant and Salvage Radiotherapy After Prostatectomy

The American Society of Clinical Oncology (ASCO) today issued an endorsement on the use of adjuvant and salvage radiotherapy after prostatectomy. It was published today

in the *Journal of Clinical Oncology*.

The guideline recommends that physicians discuss adjuvant radiotherapy with patients who have adverse

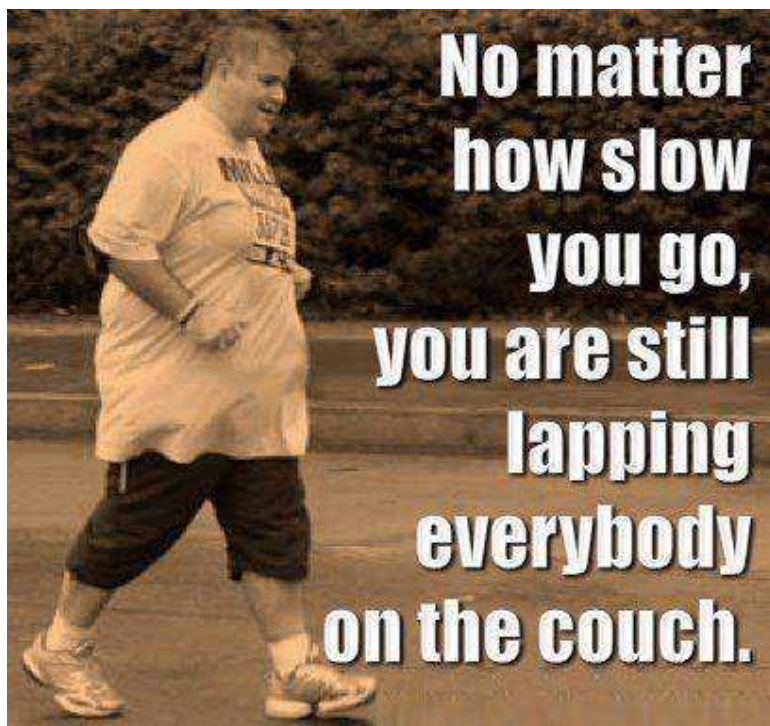
pathologic findings at prostatectomy (i.e., seminal vesicle invasion, extensive positive surgical margins) and salvage radiotherapy with patients with detectable postoperative prostate-specific antigen (PSA) or local recurrence after prostatectomy. Patients should be informed

that, while adjuvant radiotherapy reduces the risk of recurrence and disease progression, its impact on preventing metastases and extending survival is less clear.

An ASCO guideline endorsement panel added one qualifying statement that not all men who are candidates for adjuvant or salvage radiotherapy have the same risk of recurrence or disease progression, and thus, not all men will derive the same benefit from adjuvant radiotherapy. Those at the highest risk for recurrence after radical prostatectomy (including men with seminal vesicle invasion, Gleason score 8 to 10, extensive positive margins, and detectable postoperative PSA) are likely to derive the greatest benefit.

Source: urotoday.com
November 2014

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 THIS GIFT IS IN MEMORY/HONOUR OF _____ PLEASE SEND NOTIFICATION TO: _____
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Make payment to: Manitoba Prostate Cancer Support Group;
 Box 315 – 971 Corydon Ave., Winnipeg, Manitoba, R3M 3S7
 *A tax deductible receipt will be issued. Charity number: 88907 1882 RR0001

Credit Card donations can be made by going to our website at: www.manpros.org and clicking on the donate tab.
 Canada Helps will issue a tax receipt. **Amount:** \$25 \$50 \$75 \$100 Other _____

Thanks to Manitoba Community Services Council

The Board of the MPCSG would like to thank the Manitoba Community Services Council for giving us the opportunity to participate in a bingo fund raiser at the Regent Casino. Established in 1984, MCSC allocates funds and/or bingo events to non profit, volunteer community service, recreation and health-related organizations in Manitoba. As a result of our participation, we were given a generous donation. We are indeed grateful for their financial contribution and support. We also sincerely thank the following workers: Jos Borsa and his team of Al and Doreen Petkau and John Fritz; also Darlene and Kirby Hay and their team of Barry Malenko and Don Sterry who all attended the bingo and did the work on our behalf. Many thanks!



MANITOBA COMMUNITY SERVICES COUNCIL INC.

Email - manpros@mts.net

ALL MEMBER INFORMATION IS KEPT CONFIDENTIAL

Answering Machine - (204) 989-3433

Help us lower our costs :

Receive this newsletter by email ~ Please notify us and we'll make the changes. Thank-you

2015 MEETINGS

- Jan. 15 Dr. Rashmi Koul**, Radiation Oncologist
Topic: Prostate Cancer and Bone Health
- Feb. 19 Bill Martin**, Gimli Author
Topic: Ripped Out: One Man's Journey Surviving PCa
- Mar. 19 Dr. Robert Wightman**, Pathologist
Topic: Biopsy Report and its Role in Determining Therapy
- Apr. 16 Dr. Sabeer Rehsia**, Urologist
Topic: Biochemical Recurrence: What are Your Options?
- May 21 Dr. Paul Daeninck**, Medical Oncologist
Topic: Medical Marijuana: Is This "Bud" For You?
- June 18 Edith Mulhall**, Lymphedema Assoc. of Manitoba
Topic: Lymphedema Basics
- July No Meeting**
- Aug. 20 Dr. Reece Malone**, Sexuality Educator
Topic: Reclaiming Intimacy and Nurturing Connection after Prostate Cancer.
- Sept.17 Prostate Cancer Awareness Evening** at Caboto Centre - 1055 Wilkes Ave. 7 – 9 pm
Dr. Rashmi Koul, Radiation Oncologist
Dr. Piotr Czaykowski, Medical Oncologist
- Oct. 15 Dr. Kelli Berzuk**, Incontinence Physiotherapist
Topic: Living With Incontinence: Do I Have To?
- Nov. 19 Christmas Pot Luck Party**
- Dec. No Meeting**

All meetings 7 – 9 p.m. at
 Seven Oaks General Hospital Auditorium
 (except September)
 Everyone Welcome

MPCSG BOARD

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 publication



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