Manitoba Prostate Cancer SUPPORT GROUP

Newsletter

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Thanks!

Thought of The Day

"Let perseverance
be your engine
and hope your fuel."

H. Jackson Brown, Jr.

Public meetings cancelled until further notice

Covid-19 Update

Covid is still with us. However vaccinations are now progressing at an increasing pace so we are optimistic that in a just a few more months the crisis will end. Because the majority of our support group participants fall into the age category that is most vulnerable to Covid, we will be especially careful to be sure that we sit tight until the health authorities say it's safe to move forward once again.

Watch our newsletter for updates on this changing situation.

In the meantime, stay safe.

The Board

Top Cancer-Fighting Foods

Mounting evidence shows that the foods we eat weigh heavily in the war against cancer.

As researchers continue to wage war against cancer, many have begun to focus on what could be the most promising ammunition to date: diet.

"The easiest, least-expensive way to reduce your risk for cancer is just by eating a healthy diet," says Rachael Stolzenberg-Solomon, PhD, MPH, RD, a researcher at the National Cancer Institute.

When it comes to a diet rich in cancer-fighting substances, most experts agree that it should consist of a predominantly plant-based diet. "If you have two-thirds of plant food on your plate, that seems to be enough to avoid excessive amounts of food high in saturated fat," says Karen Collins, RD, nutritional advisor for the American Institute for Cancer Research.

That seemingly simple advice could mean a drastic change in diet for many people.

"People who are thinking that this is like a diet, and are trying to choke this stuff down, it's never going to last," Collins tells WebMD. "You're looking at creating something for a lifetime. If it takes you awhile, but each month or so you enjoy [one more vegetable], then that's great," Collins.

You may want to start with some of the following food substances, all of which show promise as cancer-fighting agents.

Folate-Rich Foods
This B-complex vitamin can be found in many 'good for you' foods. Plus,

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SHARING IS CARING

The Manitoba Prostate Cancer Support Group offers support to prostate cancer patients but does not recommend any particular treatment modalities, medications or physicians ; such decisions should be made in consultation with your doctor.

MPCSG – active since 1992.

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manufacturers of cereals, pastas, and breads often fortify their products with folate.

How It Works
"The thought is that when someone has low levels of folate, it's more likely for mutations in DNA to occur," Stolzenberg-Solomon says. Conversely, adequate levels of folate protect against such mutations.

Cancer-Fighting Abilities
In a large-scale study, researchers evaluated the effects of folate on more than 27,000 male smokers between ages 50 and 69. Men who consumed at least the recommended daily allowance of folate - about 400 micrograms - cut by half their risk of developing pancreatic cancer.

How to Get It
Starting with breakfast, a glass of orange juice is high in folate; so are most cereals (check the box to see how much). For lunch, try a hearty salad with either spinach or romaine leaves. Top it with dried beans or peas for an extra boost. Snack on a handful of peanuts or an orange. At dinner, choose asparagus or Brussels sprouts as your vegetable.

Vitamin D
This fat-soluble vitamin which helps absorb calcium to build strong teeth and bones may also build protection against cancer.

How It Works
Researchers suggest that vitamin D curbs the growth of cancerous cells.

Cancer-Fighting Abilities:
A report presented at the latest meeting of the American Association for Cancer Research (AACR) showed a link between increased vitamin D intake and reduced breast cancer risk. It found vitamin D to lower the risk of developing breast cancer by up to 50%. Vitamin D may also improve survival rates among lung cancer patients, according to a Harvard study reported in 2005. Patients who received surgery for lung cancer in the summer, when vitamin D exposure from sunshine is greatest, and had the highest intake of vitamin D, reported a 56% five-year survival rate. Patients with low vitamin D intakes and winter surgeries had only a 23% survival rate.

How to Get It
In light of these recent findings, many researchers consider the current RDA of 400 international units (IU) too low. William G. Nelson, MD, PhD, of Johns Hopkins University in Baltimore, Md., suggests that the RDA recommendations for vitamin D be increased to 1,000 IU for both men and women. "Higher amounts may eventually prove better, but for now that amount is likely to be safe and have a protective effect," he tells WebMD.

While vitamin D is often associated with milk, high concentrations also can be found in these seafood choices: cod, shrimp, and Chinook salmon. Eggs are another good source. And don't forget sunshine. In just 10 minutes, you can soak up as much as 5,000 IU of vitamin D if you expose 40% of your body to the sun, without sunscreen.

Tea
If you enjoy sipping tea, you'll be happy to know that it appears promising against some forms of cancer.

How It Works
Like many plant-based foods, tea contains flavonoids, known for their antioxidant effects. One flavonoid in particular, kaempferol, has shown protective effects against cancer.

Cancer-Fighting Abilities:
A large-scale study evaluating kaempferol intake of more than 66,000 women showed that those who consumed the most of it had the lowest risk of developing ovarian cancer. Researcher Margaret Gates, a doctoral candidate at Harvard's School of Public Health, suggests that consuming between 10 milligrams and 12 milligrams daily of kaempferol - the amount found in four cups of tea - offers protection against ovarian cancer.

A separate study showed a link between consuming flavonoids and reducing the risk of breast cancer. The study, analyzing the lifestyle habits of nearly 3,000 people, showed that postmenopausal women who got the most flavonoids were 46% less likely to develop breast cancer than those who got the least. However, flavonoid consumption had no effect on breast cancer risk among premenopausal women.

How to Get It
Hot tea can be warming in the winter; ice tea offers cool refreshment in the summer. So enjoy tea year-round to boost cancer prevention.

Cruciferous Vegetables
They may not have been your favorite as a kid, but cruciferous vegetables - members of the cabbage family that include kale, turnip greens, cabbage, cauliflower, broccoli, and Brussels sprouts - can help you ward off cancer.

How They Work
In lab experiments, substances released during either cutting or chewing cruciferous vegetables produced a cancer-killing effect.

Cancer-Fighting Abilities
Recent studies on cruciferous vegetables show promising results against prostate and colon cancers. In mice grafted with human prostate tumors and then treated with one of these cancer-killing substances, tumors

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began to shrink to half their size after 31 days. In another experiment, mice engineered to be a model for an inherited colon polyp condition that is at high risk for developing into colon cancer were fed the antioxidant called sulforaphane, also released when chewing cruciferous vegetables. The mice developed about half as many polyps as expected.

How to Get Them
Swallowing them whole won't do. The protective effect of cruciferous vegetables seems to occur when they are cut or chewed. They're great in stir fry, as side dishes, or tossed into salads raw. Experiment with flavors like lemon or garlic. "Vegetables can be a fabulous-tasting centerpiece of cuisine," says Collins.


Mounting evidence shows that the foods we eat weigh heavily in the war against cancer.

Curcumin
By sprinkling curcumin into your favorite dishes, you could be adding much more than a little zest to your meal -- you could add years to your life.

How It Works
Experts credit curcumin's anti-inflammatory effects for its ability to fight cancer. "Most diseases are caused by chronic inflammation that persists over long periods of time," says Bharat B. Aggarwal, PhD, a biochemist at The University of Texas M. D. Anderson Cancer Center. Recent studies have shown curcumin to interfere with cell-signaling pathways, thereby suppressing the transformation, proliferation, and invasion of cancerous cells.

Cancer-Fighting Abilities
Curcumin's protective effects may extend to bladder and gastrointestinal cancers. Some say they don't stop with these types of cancer. "Among all the cancers we and others have examined, no cancer yet has been found which is not affected by curcumin. This is expected, as inflammation is the mediator for most cancer," Aggarwal tells WebMD.

How to Get It
Curcumin flavors lots of popular Indian dishes, as it is the main ingredient in curry powder. It complements rice, chicken, vegetable, and lentils. Some chefs sprinkle the bright, yellow powder into recipes for a burst of color.

Ginger
This popular spice, long used to quell nausea, may soon be used to fight cancer, too.

How It Works
Working directly on cancer cells, researchers discovered ginger's ability to kill cancer cells in two ways. In apoptosis, the cancer cells essentially commit suicide without harming surrounding cells. In autophagy, "the cells are tricked into digesting themselves," explains J. Rebecca Liu, assistant professor of obstetrics and gynecology at the University of Michigan in Ann Arbor, who has been studying ginger's effects on ovarian cancercells. While this preliminary evidence shows promise, ginger's cancer-fighting effects must still be proven in animal and human trials.

Cancer-Fighting Abilities
Armed with ginger, ongoing research is taking aim against the most lethal of gynecological cancers: ovarian cancer. "Most women [with ovarian cancer] develop resistance to conventional chemotherapy drugs," Liu tells WebMD. Because ginger may kill cancer cells in more than one way, researchers are hopeful that patients would not develop resistance to it.

Because ginger's effects on cancer haven't been tested directly on human subjects, researchers can't yet offer specific dietary recommendations. "We don't know how it's metabolized," Liu says. But that needn't stop people from adding ginger to their diet. "We know it's relatively nontoxic," Liu tells WebMD.

How to Get It
Go beyond the obvious choices, like sipping ginger ale and eating gingerbread cookies. Countless soups, sumptuous marinades, and zesty sauces call for ginger.

By Elizabeth Heubeck

Medically Reviewed by Louise Chang, MD
on April 24, 2006

Source: https://www.webmd.com/cancer/features/top-cancer-fighting-foods

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The Game Changer: New Test Helps Doctors Find Hidden Prostate Cancer

Dennis Brod is a husband, father and grandfather. He is also the living definition of a Renaissance man: a retired attorney, former public elected official, author, and self-described philosopher.

But his full life took a pause in 2014, when the North Bay resident got some bad news.

"I was diagnosed with a very severe case of prostate cancer," explained Brod.

At that time, there was no indication that the cancer had spread. But, in Brod's case, there was a high volume of cancer and experts deemed the cancer was aggressive.

Brod decided to have surgery. His surgeon was Dr. Peter Carroll at UCSF. After surgery, his treatment team told the retired attorney that they anticipated a cure. His blood tests 90 days later were causes for cautious celebration: still no detectable cancer cells.

However, one year later, another blood test told a different story: his PSA levels were rising again. It was a suspicious sign that prostate cancer cells were indeed hiding somewhere in his body.

"Something else had to be done, and my question was 'Where are the tumors?'" recounted Brod.

In cases like these, doctors don't really know.

Prostate cancer is one of the most common causes of cancer in men in the United States. More than 190,000 new cases are diagnosed every year

Most cancers are confined to the prostate gland and remain localized. Many men can safely surveil their cancers and in fact, the majority of men diagnosed with the disease are unlikely to die from it. However, in cases like Brod's where certain factors are linked to a higher risk of cancer eventually spreading or having already spread, there is a dilemma. The National Cancer Institute estimates 33,000 men will die from prostate cancer every year.

"The problem really is because we don't know where the disease is, it's very hard to treat," explained UCSF's Dr. Thomas Hope.

Dr. Hope is a nuclear medicine physician. Along with researchers at UCLA, including Dr. Jeremie Calais at the David Geffen School of Medicine, Dr. Hope and a virtual army of specialists collaborated on clinical trials designed to validate a new way to find these hidden prostate cancer cells. The technique is called a PSMA PET scan.

These specialists came from all walks of life in the medical community. It took a virtual village of experts from nuclear medicine technologists, as well as those with expertise in chemistry, and regulatory advice.

A PSMA Pet Scan involves special small molecules, a radioactive tag, and PET imaging.

"In my opinion, I would describe it as a game changer," remarked Dr. Carroll.

PSMA stands for Prostate Specific Membrane Antigen. It is a unique protein that's made excessively by prostate cancer cells and is detected in abundance on the surface of the tumors. It turns out that these special small molecules, like heat-seeking missiles, will seek out this PSMA protein and attach to them. What's key in this test is that on these molecules, a small radioactive tag or tracer has been added.

By infusion, doctors inject patients with a drug containing the molecules

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and radioactive tags. As expected, the molecules seek out the protein. When the molecule finds and binds to the protein on the prostate cancer cell, it releases the radiation – lighting up the location of the hidden cancer. It's then seen on the PET scan. The radioisotope used here is called Gallium-68 or Ga-68.

"The contrast of the brightness to the dark allows us to see it," explained Dr. Hope.

The clinical trials found the results of the test is so accurate, it can detect prostate cancer cells anywhere in the body.

"It's allowing us to localize the disease much more accurately and easily," noted Dr. Hope.

Prostate cancer specialists say that accuracy carries a huge benefit. It will allow doctors to more precisely determine where the disease is coming from in a substantial number of patients.

"It gives us an idea of how extensive the disease is and allows us to develop a treatment plan which is more precise in men," noted Dr. Carroll.

Dr. Carroll told KPIX 5 that the test allows doctors to develop treatment plans in certain newly diagnosed patients who are at high risk, or to shift gears in patients who have had a recurrence.

"And we'll change the treatment plan. It turns out there are many men who recur in sites we didn't think were sites they were most at risk for," explained Dr. Carroll.

Since his diagnosis, Brod has undergone five scans. He was part of the clinical trials at UCSF. He told KPIX 5 that the scans help him make choices regarding several different treatments.

"It's part of the whole package that my treatment team has delivered to me to keep me alive," said Brod.

Researchers are now studying if the technique can not only detect the cancer, but also perhaps serve as a treatment.

They are testing if these small molecules can carry a more-potent payload of radiation. The idea: first find the hidden tumors, then deliver the molecule carrying a stronger radioactive payload in order to kill the cancer itself.

PSMA PET has been used for several years in Australia and Europe. The USFDA has approved its use at UCSF and UCLA. Several other U.S. Medical Centers are currently using it as an "investigational technique".

But experts tell KPIX 5 that thanks to the work done at UCSF, and UCLA, that more medical centers can now apply to use the technology under expedited FDA approval.

CBS San Francisco (KPIX) 2021 / 2 / 25

Source: https://www.msn.com/en-us/health/medical/the-game-changer-new-test-helps-doctors-find-hidden-prostate-cancer/ar-BB1e2esz

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Fewer PSA Screenings May Be Associated With Metastatic Prostate Cancer Cases on the Rise

An increase in metastatic prostate cancer cases were reported in the United States and investigators are suggesting that this may be due, in part, to reductions in prostate-specific antigen (PSA), according to epidemiologic data from a study presented during the 2021 Genitourinary Cancers Symposium.

"To reduce the incidence of metastatic prostate cancer in the United States, we support policies that promote shared decision making to optimize PSA screening, such as the updated United States Preventive Services Task Force [USPSTF] guidelines," presenting study author Vidit Sharma, MD, a chief resident in the Department of Urology at Mayo Clinic, said during a poster presentation of the data.

PSA screening was found to reduce metastases and mortality in patients with prostate cancer, according to results from the randomized ERSPC trial. However, screening has also been known to result in significant harms from overdiagnosis and overtreatment of low-risk prostate cancer, Sharma noted. As a result, the USPSTGF found insufficient evidence to recommend PSA screening in 2008 and went on to recommend against it in 2012.

"Several subsequent studies have found that there has been a rise in prostate cancer diagnosis since that change," Sharma said. "Although the implication of these studies is that decreases in PSA screening were responsible for the rise in metastases, this has not been directly demonstrated."

The objective of this study was to test the hypothesis that reductions in PSA screening were responsible for increased incidence of metastatic prostate cancer at diagnosis. To do this, investigators examined statewide variation in PSA screening, as well as statewide variation in the incidence of metastatic disease at diagnosis from 2002 to 2016.

Investigators extracted age-adjusted incidence of metastatic prostate cancer diagnosis per 100,000 men from the North American Association of Central

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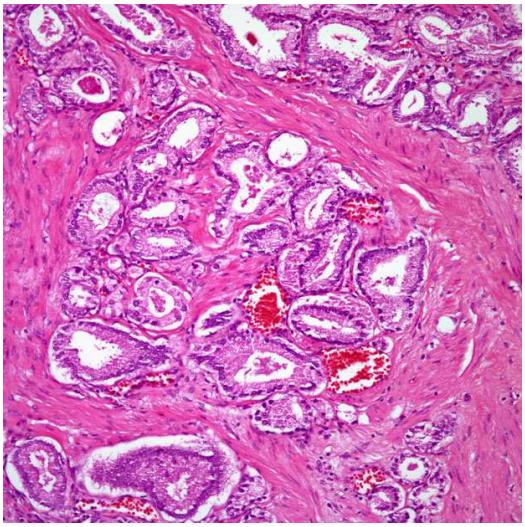
Cancer Registries for each state. Additionally, survey-weighted PSA screening estimates for men 40 years of age or older were extracted from the Behavioral Risk Factor Surveillance System, which collected data on PSA screening every 2 years from 2002 onward.



These data were then analyzed in a multi-panel time series by state, using a random effects linear regression model, which looked at random effect at the state level, as well as related changes in PSA screening to incidence of prostate cancer metastases within and between states.

Results showed a significant variation in the incidence of PSA screening between states in men aged 40 years or older (range, 40.1%-70.3%). However, after 2010, a significant decrease in the median percentage of PSA screening across all states (range, 61.8%-50.5%) was observed. Additionally, investigators also noted a significant variation in the incidence of age-adjusted metastatic prostate cancer at diagnosis by state (range, 3.3 to 14.3 per 100,000 men) until 2010, when median incidence increased across all states.

Investigators found that states with larger decreases in PSA screening, there was a larger increase in the incidence of metastatic prostate cancer at diagnosis. Data from the random effects linear regression model confirmed that reductions in PSA screening were related to rises in metastatic disease at diagnosis (-14.9; 95% CI, 12.3-17.5 per 100,000; P <.01).

"Overall, variation in PSA screening explained 27% of variation in metastatic disease at diagnosis," Sharma concluded.

Courtney Marabella
February 13, 2021

Reference
Vidit Sharma, Abhishek Venkataramana, et al. Association of reductions in PSA screening across states with increased metastatic prostate cancer in the United States. J Clin Oncol. 2021;39(suppl 6):228. doi:10.1200/JCO.2021.39.6_suppl.228

Source: https://www.targetedonc.com/view/fewer-psa-screenings-may-be-associated-with-metastatic-prostate-cancer-cases-on-the-rise

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What is the 4Kscore?

A test, known as the 4Kscore, could help from 30- to 58-percent of men could avoid an unnecessary prostate cancer biopsy.

It has been shown to reliably predict the likelihood of a man's prostate cancer spreading to other parts of his body in the next 20 years. The results offer degrees of risk that can be shared and discussed with a patient.

"This is a large step forward for the field," says Dr. Oleksandr Kryvenko, a urology specialist at Sylvester Comprehensive Cancer Center and the University of Miami Health System. "More than 12 percent of all men will develop prostate cancer in their lives. A much smaller number of these men will require a biopsy, as their risk for a significant cancer is low," he explains. "This test can give men the information they need to make more informed care decisions."

Until now, a man's choices were very limited, Dr. Kryvenko adds.

"If you had an elevated prostate specific antigen (PSA) blood test result, and your doctor felt a nodule or growth during a digital rectal exam (DRE), nine times out of 10 you would be recommended for a biopsy," he says.

What's the problem with a biopsy? During a core needle biopsy, a thin, hollow needle is used to remove several small pieces of prostate tissue. The procedure can cause anxiety, pain, bleeding and/or infection in some patients. The core needle biopsy is still standard procedure for men deemed high-risk. But the 4Kscore test provides a way to weed out men who may have far less aggressive prostate cancers.

"This test offers additional knowledge," says Kryvenko. "It lets us tell men if their cancers are likely to be fast-growing, and a threat to their lives."

What does 4Kscore measure?
The 4Kscore takes the results of four blood tests and factors in a man's age, DRE results, and if he had a prior biopsy. A number is created. It reflects the percentage likelihood that if that patient had a biopsy, an aggressive prostate cancer would be found.

The tests included in a 4Kscore assessment are measures of Total PSA (PSA molecules attached to proteins in the blood), Free PSA (free

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floating PSA molecules in the blood), Intact PSA (currently inactive PSA molecules in the blood) and of Human Kallikrein 2 (or hK2)—a genetic cousin to PSA.
Depending on the result, a low-risk patient can continue to have his PSA results monitored, without proceeding to biopsy or treatment. A high-risk patient can choose to have a biopsy performed. The results of the biopsy then help guide and direct the most appropriate treatment plan.

Dr. Kryvenko offers that the 4Kscore test has also been shown to predict the presence of aggressive cancer cells not seen in a biopsy.

"As pathologists, we interpret what we see under a microscope as best as we can. But sometimes, there are things we cannot see or predict. The 4Kscore test can tell us if a man may have aggressive prostate cancer cells growing somewhere else, but that have not yet surfaced. It is data, not human interpretation."

Is it accurate?
Before it came into use, the 4Kscore test was studied in clinical research of 10,000 men, and proved to be extremely accurate. After that, the test was used with an additional 1,000 patients across the country, including local patients with a consistent level of accuracy.

A retrospective study was later done, looking at men who archived their blood when they were in their 50s, says Dr. Sanoj Punnen, a urologist with Sylvester. The blood was studied 20 to 30 years later using PSA tests and configuring 4Kscore results.

"We found that among those identified by their PSA tests to be at risk for prostate cancer, the 4Kscores accurately selected those who were at risk of metastatic prostate cancer 20 years later," he says.

Dr. Punnen and his colleagues also tested the 4Kscore test in African-American men—a group that was not initially part of the clinical research. A total of 366 cases were reviewed from eight Veterans Affairs hospitals in Florida from July 2015 through October 2016. The result? The test was accurate for all men, regardless of race.

"This finding was especially important to us," adds Dr. Punnen. "African American men are more at-risk for prostate cancer, and are more than twice as likely to die of the disease than Caucasian men, and over five times as likely to die of prostate cancer than Asian Americans."

Which men need the test?
All men, according to Drs. Kryvenko and Punnen, should continue to follow national guidelines for prostate cancer screening, based on age, race, family history and other risk factors. The digital rectal exam (DRE) and the PSA test remain the first two steps of screening.

"The 4Kscore test is an option after the DRE and PSA tests," says Dr. Punnen. "If after PSA blood testing, your doctor says that a surgical biopsy may be needed to check for prostate cancer, that is when a 4Kscore test may help."

A potential treatment option
Of interest to men already diagnosed with prostate cancer is another discovery by researchers at Sylvester. The findings could lead to new therapies for prostate cancer patients with few options.

Men with prostate cancer are often given androgen deprivation therapy, which blocks the hormones that cause cancer growth. Unfortunately, over time, tumors change by increasing the number of androgen receptors and adopting other mechanisms to resist treatment.

Working with animal models, the researchers demonstrated that that S-nitrosoglutathione (GSNO), a compound that increases nitric oxide (NO) levels, suppresses castration-resistant prostate cancer and has a major impact on tumor microenvironments. Their findings were published in the journal Proceedings of the National Academy of Sciences.

"By using the nitric oxide donor GSNO, we increased nitric oxide levels and suppressed the growth of this particular type of prostate cancer," says Dr. Ranjith Ramasamy, senior author of the study.

According to Dr. Himanshu Arora, a researcher in urology and first author of the manuscript, the research generated another hopeful finding. "Even more important, the tumors did not develop further resistance that commonly occurs with most therapies currently available for prostate cancer."

These findings could have a significant impact in a relatively short time. GSNO is already in clinical trials for asthma and pulmonary fibrosis. With additional work, the compound could be used against castration-resistant prostate cancer, as well as other tumor types.

Written by John Senall,
a staff writer at UMiami Health News

Source: https://news.umiamihealth.org/en/4kscore-test-improves-screening-for-lethal-prostate-cancer/

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FUTURE MEETINGS 2021

Our public meetings will not resume until the covid-19 restrictions are lifted.

Watch this space for information on the latest status.

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