
ADAM'S GLAND

NEWSLETTER OF PROSTATE CANCER CANADA NETWORK MONTREAL WEST ISLAND

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Monthly Meetings

We meet the fourth Thursday of the month at the Sarto Desnoyers Community Centre, 1335 Lakeshore Dr. in Dorval. Parking is free.

Upcoming:

May 25, Dr Fred Saad, "Prostate Cancer Treatment Options in 2017"

June 22nd, TBA

In This Issue

Outstanding Man	1
Editor's Desk.....	2
One Man's Story.....	4
Acupuncture	6
Benefits of Exercise.....	7

Booksigning May 25th

Dr Saad will sign copies of his book, "PROSTATE CANCER: Understand the Disease and Its Treatment, Fourth Edition" Donations of \$25 and over will qualify for a tax receipt.

The book is free.



Outstanding Contributor

At its upcoming Monthly Meeting on May 25, 2017, Dr. Fred Saad will be presented Prostate Cancer Canada Network – Montreal West Island Support Group's 2017 Outstanding Contribution Award. He is receiving the award "in appreciation of his distinguished career dedicated to the treatment of so many of us in the Montreal area so afflicted."

Dr Saad is Full Professor and Chief of Urology and Director of G-U Oncology at the University of Montreal Hospital Centers. Since 2004, he has held the University of Montreal Endowed Chair in Prostate Cancer Research and is Director of the Molecular Oncology Research Lab in Prostate Cancer at the Montreal Cancer Institute. His main research interests include molecular prognostic markers in prostate cancer and new therapeutic approaches to metastatic prostate cancer.

From the Editor:

Welcome to **ADAM'S GLAND**. This is the 97th issue of our Newsletter and we have put together a new look that we are very excited about and we hope that you will be as well.

The title itself is somewhat biblical in nature with *Adam* being our first human, at least in *Genesis*, and the aforementioned *Gland* is of course the prostate. While Adam gave up a rib to Eve, she had her own equivalence of every body organ and/or function, save one: the Prostate. Accordingly, in recognition of our sole anatomical difference from the fairer sex, we give you, **ADAM'S GLAND**. We hope that you will enjoy it.



In this issue, we pay tribute to Dr Saad and wish to announce that after his presentation, he will have a book signing of his incredibly insightful book, "**PROSTATE CANCER, Understand the Disease and Its Treatments**". This 4th edition provides a layman's practical guide that will help patients and their families to understand prostate cancer.

While the book is free, it's an opportunity for you to support our group, and to that end, we've included an envelope for your convenience. We are all volunteers, so 100% of your donations go to our operation costs: hall rental; advertising; phone helpline; printing and mailing of the newsletter, etc. Donations of \$25 or more will receive a tax receipt. We encourage you to become a member. Women are most welcome.

We believe that HOPE and optimism are key parts of a successful and positive result

and our feature, "One Man's Story", certainly displays those traits. We realize that is why many of you attend our meetings and we are available to answer your questions. You can leave a message

24/7 on our Help-Line: 514-694-6412, or if you prefer, send us an email pccn.mtlwi@gmail.com.

There are many things that we, as cancer patients, can do to help ourselves to emerge successfully from the challenges that we face and taking responsibility for our own bodies should be top of the list. Far too often, patients abdicate that responsibility to their doctors, in the belief that he/she knows best, a decision that is far too often motivated by FEAR. In the words of Yoda, "Fear can only lead to the Dark Side".

Many ingredients go into a recipe for success and having an open mind is crucial. We believe that an integrative approach to medicine is worthy of your attention and to that end we have invited Elizabeth Segura to share her wisdom.

Elizabeth is a medical doctor, certified in acupuncture and naturopathy. Her skills and advice will complement those of your doctors, not replace them.



<http://mtlwiprostcansupportgrp.ca/>

PCCN Montreal West Island is not responsible or liable for the contents or opinions expressed in this newsletter. The opinions expressed are solely for the information of our membership and are not intended as an alternative to medical advice and care.

PCCN Montreal West Island Mission Statement

We provide information about prostate cancer to those in need, gathered from a variety of sources. We support newly-diagnosed, current, and continuing patients and their caregivers. We participate in events that provide a venue for promoting awareness of prostate cancer through our informed member interaction at public gatherings or as speakers. We collaborate with local organizations such as the MUHC, the CHUM, the Canadian Cancer Society, urologists and oncologists for information and support.



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ONE MAN'S STORY

My prostate cancer journey started in the spring of 2003 at age 48. Worried about constant urination during the night, I booked an appointment with my GP. When told of my concerns he gave me a digital rectum (DR) exam. Within minutes he was writing me a referral to an urologist. When I visited the urologist Dr. Westend, he also gave me a DR exam. Again within minutes after the exam he was setting up appointments at the local hospital for scans and a biopsy. When I returned to Dr. Westend's office for the results, he saw me immediately and told me the bad news. I had incurable metastatic prostate cancer. When my partner asked the doctor how severe it was, he replied that I had a life expectancy of two to three years; possibly, five tops! The good news I was eligible for any pain killers I wanted for the expected pain to come! It was a quiet ride home.

After telling my family the news, there was much discussion. Mostly disbelief that there was nothing to be done. Then one family



member suggested that I go talk to Ms. Neighbour who worked in the radial oncology department of the downtown hospital. She was most sympathetic and brought up my case with her boss, Dr. Centreville. He was also receptive to my case and suggested that I get a copy of the results and come see him. I was in his office within the week. After examining the results, Dr. Centreville said that he agreed with the diagnosis, but was willing to proceed with hormonal therapy (Casodex), and external beam radiation therapy. Stating that I would not be cured but, definitely he could extend my life. I was grateful for this prognosis and set out immediately to follow it.

By the year 2006 my PSA had risen high enough to cause concern. It was then suggested that I undergo a Brachytherapy operation (radioactive isotopes are injected directly into

the prostate to kill the cancerous cells). The operation was performed. It was a three day stay at the hospital with one very minor irritation, the catheter.

Life after the operation was as well as to be expected. I continued with the hormonal treatment (Casodex) and it seemed to keep my PSA at an acceptable level. My visits to the oncologist became once a year (my choice) with little change in PSA levels or in my overall health. But in 2012, my yearly blood test result came back at 375 ng/ml! Once again I was told that I had a life expectancy of two to three years but now my cancer was considered stage four. I sat in the doctor's office in shock.

I did not expect to hear another time limit put on my life. I knew that the treatments were not a cure but often I had read and been told that I would probably die of something else, not prostate cancer. I always viewed myself as a strong, healthy person who didn't let illness get in my way. After all, I never missed a day of school or work due to sickness. It was only professional appointments that would keep me from school/work, never sickness. I would be that guy in your office coughing all over the place, sharing my germs, but no way was I staying home. Now, here I was facing death!!! Somehow I muddled through that appointment, not knowing what to say or ask. But I did get a prescription for a drug called Lupron, which is

another form of hormonal therapy. Only Lupron is a four month, time-released drug which is injected into your body. Repeated twice more over a period of one year.

Starting the Lupron treatments brought my PSA from 375 ng/ml. to two years later, 205 ng/ml; and most recently, 7.5 ng/ml. Still 3.5 ng above the target of 4, but I am happy with that number!

The strange thing about my case is that there were never any significant tumours. A couple of scans did turn up some small indications of suspected tumours which seemed to disappear in the following year's scans! Nor did my bones ever seem to be at risk!

At a recent visit to my oncologists, he introduced me to his attending students as "my miracle case." I was a little embarrassed by that statement but it has been a journey of fourteen years, far beyond the two to three year original prognosis! Well, if I'm to be the "miracle case" then you Dr. Centreville, are the miracle worker!



ACUPUNCTURE CAN HELP PROSTATE CANCER

By *Elizabeth Segura*

Acupuncture is a time-tested system of medicine used to maintain and improve your health.

How Does Acupuncture Work For Prostrate Health?

The principle behind this practice is that our bodies have a natural energy flowing through them at all times. When our body's energies become stuck or stagnant, our bodies are susceptible to disease and illness, including prostate cancer and prostatitis. Prostate cancer is the most frequently diagnosed cancer in Canadian men and there are more than 23,600 new cases diagnosed each year, according to the *Canadian Cancer Statistics 2014*. Although it's a common diagnosis after 70, prostate cancer is also occurring in men in their forties and fifties. If you are currently dealing with prostate cancer or prostatitis, you are not alone.

Whether you are looking to reduce your risk of prostate disease or treat an existing condition, acupuncture can help prostate issues.



Laboratory and animal studies exploring the mechanisms of acupuncture for cancer treatment have focused mainly on the role of acupuncture in the activation of neurohormonal pathways and immunomodulation.

With its holistic approach, acupuncture can help relieve symptoms associated with prostate problems like frequent and painful urination, nausea and vomiting from chemotherapy, cancer-related pain that often happens when cancer has spread, particularly to the bones, fatigue, hot flashes, xerostomia (oral dryness), neuropathy, anxiety, depression and sleep disturbances.

Elizabeth Segura practices Acupuncture and Naturopathy. In her practice she sees a large array of different conditions, among them, cancer patients. For more information, please call: 514 436 1325 or email: lizaely14@gmail.com

Documentary and Studies Confirm Benefits of Exercise for Cancer

The documentary "Exercise and Cancer," produced by the Australian Broadcasting Corporation's Catalyst television program, highlights the use of specific, targeted [exercises for cancer patients](#) receiving chemotherapy and radiation treatments at the Exercise Medicine Research Institute (Exercise Medicine) in Perth.

Professor Robert Newton, Exercise Medicine Research Institute co-director, suggests the idea for the use of exercise with cancer treatment stemmed from observations by oncologists that patients in their care often became too ill and weak to fight the disease.

In the interest of boosting energy, minimizing side effects and preventing further physical decline, Newton's guiding question became something to the effect of: "If we prescribed a tailored exercise program our patients could complete during their cancer treatment, would it make a difference?"

During the exercise trial highlighted in the documentary, doctors at Exercise Medicine marveled at how well their patients were doing. The 38 patients who exercised regularly seemed to be experiencing less of the usual side effects of chemotherapy — particularly less nausea and fatigue.

Not only were Exercise Medicine patients exercising on cancer-treatment days, but also three additional days a week. Based on results gleaned so far, Newton highlights the value of

completing any exercise — even modest exercise — toward helping you beat cancer. He states: "We now have a growing number of research studies showing that if people hit a certain level of physical activity, which is relatively modest ... they'll more than double their chances of surviving cancer."

Exercising during cancer treatment also helped patients sustain muscle mass. The average cancer patient, Newton said, loses between 10 to 15 percent of their muscle mass, depending on the type and duration of their drug therapy.

Remarkably, patients participating in the exercise program reported little to no muscle loss; some even gained muscle mass. Says Newton:

"The benefit, in terms of muscle mass, is absolutely extraordinary, because we know there's no pharmaceutical intervention that can actually stop the decline in muscle mass. The only thing that will do it is highly targeted, prescribed, tailored exercise.

Just be sure to recover in between workout sessions. Exercise causes damage and adequate recovery is what actually provides the benefits. Exercise should be a vital part of nearly every cancer-treatment program. After all, exercise can help you overcome the most common side effects of conventional cancer treatment, having been shown to: Alleviate [anxiety](#), [depression](#), low mood and stress; Bolster bone health; Build muscle strength and improve range of movement; Fuel your appetite; Help you [sleep better](#); Maintain a healthy weight; Prevent constipation; Reduce fatigue and improve your energy levels.

Regular Exercise May Boost Prostate Cancer Survival

Men diagnosed with [prostate cancer](#) can also benefit from exercise, according to a 2016 study⁸ by the American Cancer Society. A 2014 Swedish study⁹ on the effects of exercise among men diagnosed with prostate cancer indicated men with active lifestyles achieved higher survival rates than those who were sedentary. "There is great potential for men diagnosed with prostate cancer to improve their own survival by being physically active," stated Stephanie Bonn, the study's lead author, of the Karolinska Institute in Stockholm.¹⁰

Men who biked or walked for at least 20 minutes a day after their diagnosis had a 39 percent decreased risk of dying from prostate cancer, compared to men who were less active. Moreover, daily exercise slashed the men's risk of dying from any cause by 30 percent.

Men receiving treatment for prostate cancer are often put on anti-androgen drugs, which causes them to become lethargic, gain weight and sometimes experience bone loss to the point of developing osteoporosis. Eight years ago, the Exercise Medicine team prescribed three types of exercise to a group of men on anti-androgen

therapy.

One group did aerobic exercise only, another aerobic exercise plus resistance training and the third resistance work plus impact training. The impact work was composed of bounding, jumping and skipping. Notably, men in the third group maintained or improved their bone mineral density, while the others lost, on average, 3 percent over a six-month period. Newton said: "It was only the combination of resistance exercise and the impact loading that totally obliterated the bone loss.

Here's the Australian Broadcasting Corporation Catalyst TV exercise video:

<https://www.youtube.com/watch?v=ffgAVrANmS4>

Summer is here. Get out and walk with a friend. You needn't start a parade! Just go for it!

