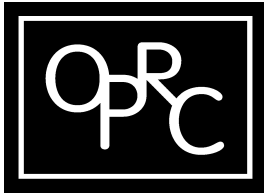


KELOWNA PROSTATE CANCER SUPPORT & AWARENESS GROUP NEWSLETTER



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The guest presenter at the March meeting of the Kelowna Prostate Cancer Support and Awareness Group meeting was *Dr. Ross Halperin* a Radiation Oncologist at the BC Cancer Agency Centre for the Southern Interior in Kelowna. Dr. Halperin gave those present a brief overview on prostate Cancer and then got to the real meat of his presentation and that was an update on Brachytherapy in B.C. and in particular locally. Since 1998 when they began doing Brachytherapy in B.C. over 1,850 procedures have been performed. Prior to Dr. Halperin moving to Kelowna in 2003 only 11 patients went down to Vancouver for assessment and treatment. Dr. Halperin was instrumental in getting the ultra sound assessment and pre-planning equipment in Kelowna these needed medical assessment tools were up and operating in 2005. In 2006 36 patients were sent down to Vancouver for Brachytherapy. Dr. Halperin announced that on March 29, they are scheduled to treat the first local patient Brachytherapy. Kelowna is the second location in B.C. to perform Brachytherapy. Dr. Halperin also mentioned that IMRT used to treat prostate cancer would begin locally sometime this year. He also mentioned that some big changes would be taking place at the BC Cancer Agency Centre for the Southern Interior in Kelowna in the next couple of years, this includes adding a fifth Linear Accelerator, the commencement of replacing the other Linear Accelerators and the addition of a procedure room.

BC Cancer Agency Study Halts Growth of Prostate Cancer –

The following information was obtained from the BC Cancer Agency website – www.bccancer.bc.ca

A new study at the *BC Cancer Agency (BCCA)* sets the stage for the development of innovative approaches to treat androgen-independent prostate cancer, the advanced stage of the disease for which there is currently no cure.

Dr. Marianne Sadar a senior research scientist at the BCCA, engineered a molecule in her lab that blocked the growth of prostate cancer and shrank the size of the tumor.

The results, published in the *Proceeding of the National Academy of Sciences*, build on previous discoveries made in Dr. Sadar's lab regarding the important role androgen receptors play in the progression of prostate cancer.

Prostate cancer is fuelled when the receptor is activated, which occurs when the male hormone testosterone (androgen) binds to it. However, the receptor can also be activated without testosterone – a process that may underlie androgen-independent tumor growth. Dr. Sadar discovered that an unknown agent causes this activation when the agent binds to a unique region of the androgen receptor.

“We were able to block the unknown agent from binding on the vulnerable

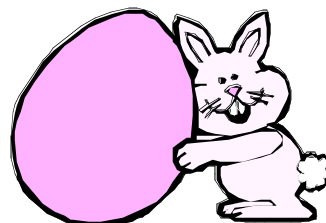
area of the androgen receptor, thereby stopping the growth of prostate cancer cells,” says Dr. Sadar.

Dr. Sadar and her team created decoy molecules that are copies of the region on the androgen-receptor believed to be essential for the unknown agent to connect. These decoy molecules were tested on mice inoculated with human prostate cancer tissue.

“By flooding the specimen with these engineered decoys, the unknown agent is fooled into binding onto the decoys instead of the androgen receptor,” says Dr. Sadar. “It's really a matter of statistical competition – the more decoys you have ‘competing’ with the receptor to connect with the agent, the better your chances of stopping cancer growth.”

This study opens the doors to possible new therapies to treat or prevent advanced prostate cancer, explains Dr. Sadar. “With the understanding of how androgen receptors are activated at this stage of the disease, we have identified a new drug target.”

The study was funded by the *US Department of Defense Prostate Cancer Research Program*. Critical equipment was purchased with funds raised by the Country Meadows Senior men's Golf Charity.



Selenium Reduces Prostate Cancer Risk in Men Taking Extra Vitamin E-

The following information was obtained from the Internet and originated with *News-Medical.net*.

A new study is suggesting that for certain groups of men a high dietary intake of selenium may reduce their risk of prostate cancer.

The study has found that the benefit applied only to those who reported a high vitamin E intake and those who were taking multivitamins.

Dr. Ulrike Peters, of the *Fred Hutchinson Cancer Research Centre* in Seattle, and colleagues used data from the Prostate, Lung, Colorectal, and Ovarian Cancer Screening Trial and tracked 724 incident prostate cancer case subjects and 879 control subjects over an eight year period.

The team compared selenium in blood samples collected before diagnosis from the subjects who developed prostate cancer and from a comparison group of similar men who remained free of the disease and participants were surveyed before entering the study for their dietary habits.

Previous studies have also found that high serum levels of selenium were linked with reduced risk of prostate cancer; a study published in the December 2001 issue of *The Journal of Urology* found that low levels of serum selenium was associated with a 4 to 5 times increased risk of prostate cancer.

This latest study set out to examine interrelations between selenium as an antioxidative agent and oxidative stressors such as smoking and also establish if serum selenium is linked with a lower risk of prostate cancer.

The researchers found that overall there was no link between serum selenium and prostate cancer risk in the cohort, but those in the highest quartile of serum selenium who reported a high vitamin E intake experienced a 42 percent reduced risk of prostate cancer compared to those in the lowest.

While among men who used multivitamins, those in the highest quartile of selenium in their blood were 39 percent less likely to develop prostate cancer.

Among smokers, the high serum selenium was linked to a 35 percent reduced risk of prostate cancer.

The intention of the study was not to establish a casual relation between serum selenium and prostate cancer and the results do not suggest that taking selenium supplements would or would not reduce risk of prostate cancer.

However, selenium is regarded as an antioxidant that helps prevent cells from being damaged by free radicals, which can cause damage to DNA leading to cancers.

Selenium is found naturally in Brazil nuts, shrimp, crabmeat, salmon, halibut, and brown rice.

This study was published in the January issue of the *American Journal of Clinical Nutrition*.

WITT'S WIT (ON THE LIGHTER SIDE) -

Two Horses

Just up the road from my home is a field, with two horses in it. From a distance, each looks like every other horse. But if you stop your car, or are walking by, you will notice something amazing.

Looking into the eyes of one horse will disclose he is blind. His owner has chosen not to have him put down, but has made a good home for him. This alone is amazing.

If nearby and listening, you will hear the sound of a bell. Looking around for the source of the sound, you will see that it comes from the smaller horse in the field. Attached to her halter is a small bell it lets her blind friend know where she is, so he can follow her.

As you stand and watch these two friends, you'll see how she is always checking on him and that he will listen for her bell and then slowly walk to where she is, trusting that she will not lead him astray. When she returns to the shelter of the barn each evening, she stops occasionally and looks back, making sure her friend isn't too far behind to hear the bell.

Like the owners of these two horses, friends do not throw us

away just because we are not perfect or because we have problems or challenges. Friends watch over us and even bring others into our lives to help us when we are in need.

Sometimes we are like the blind horse being guided by the little ringing bell of those who enter in our lives. Other times we are the guide horse, helping others see.

Good friends are like this. You don't always see them, but you know they are always there.

Please listen for my bell and I'll listen for yours. "Be kinder than necessary, for everyone you meet is fighting some kind of battle."

Prostate Specific Antigen Velocity –

The following information was obtained from the March 2007 issue of *The Journal of Urology* - the authors of this article were Stacy Loeb, Kimberly A. Roehl, William J. Catalona, and Robert B. Nadler.

Prostate Specific Antigen Velocity Threshold for Predicting Prostate Cancer in Young Men –

Purpose –

Longitudinal changes in prostate specific antigen are increasingly used to guide the recommendation

for biopsy. Prostate specific antigen (PSA) velocity 0.75 ng/ml yearly has been proposed to distinguish prostate cancer from benign prostate conditions. However, this threshold might be too high in young men with lower total prostate specific antigen.

Materials and Methods –

In a large prostate cancer screening study 6,844 men were 60 years or younger at study entry and prostate specific antigen velocity calculation was possible. Of these men 346 (5%) were subsequently diagnosed with prostate cancer and various prostate specific antigen velocity thresholds were examined for prediction of prostate cancer risk. Multivariate analysis was performed to determine whether prostate specific antigen velocity is an independent predictor of prostate cancer in men younger than 60 years.

Results –

Median prostate specific velocity was significantly higher in men who were later diagnosed with prostate cancer than in those who were not (0.840 vs. 0.094 ng/ml yearly. On multivariate analysis prostate specific antigen velocity greater than 0.4 ng/ml yearly was more predictive of prostate cancer than age, total prostate specific antigen, family history or race. Multivariate analysis in the subgroup of men with total prostate specific antigen less than 2.5 ng/ml had similar results. Overall a cutoff of 0.4 ng/ml yearly was associated with 67.3% sensitivity, 81.2% specificity, 16% positive predictive value and 98% negative

predictive value for prostate cancer detection in young men.

Conclusions –

The traditional prostate specific antigen velocity threshold of 0.75 ng/ml yearly is too high for men younger than 60 years and it misses 48% of prostate cancers. Young men with prostate specific antigen velocity greater than 0.4 ng/ml yearly are at significantly greater risk for prostate cancer and close follow up is warranted.

Cough Medicine Effective Against Prostate Cancer –

The following information was obtained from the *Google alerts-prostate cancer website* and originated with *www.medicalnewstoday.com*

A presentation made at the 17th International Prostate Cancer Update Conference in Vail, Colorado, has shown *noscapine* to be effective against prostate cancer.

Noscapine, a non-addictive derivative of opium, has been used worldwide since the 1950's as an anti-cough medication. Noscapine was originally proposed as an anti-cancer agent in the early 1960's. However, major studies of its broad anti-cancer effects were only done in recent years.

The study in prostate cancer is the result of ongoing collaboration between the *Prostate Cancer Research and Educational Foundation (PC-REF)* and *MedInsight Research Institute*.

Dr. Israel Barken, Founder and Medical Director of the Prostate Cancer Research and Educational Foundation (PC-REF) in San Diego, California, has used noscapine for treating prostate cancer for over a decade. Encouraged by successful results, Dr. Barken's foundation funded a laboratory study to confirm noscapine's effectiveness and mode of action in treating prostate cancer.

"In our study noscapine administered orally to animals had a tumor inhibition rate of 60%, and reduced metastasis by just over 65%. Incredibly, this was achieved with no toxicity thus demonstrating noscapine's potential not only as an effective anti-cancer agent, but a very safe one too," says Dr. Barken.

Dr. Barken is now planning on facilitating clinical trials with noscapine in patients suffering from prostate cancer. He has also pioneered a web-based patient tracking system, which allows for trials to be carried out with ease, and at substantially reduced costs. This will allow global participation of patients, which will drastically cut the time necessary to complete the study.

Moshe Rogosnitzky, Director of Research at MedInsight Research Institute, is very encouraged by the findings. "Noscapine has been used for cough-suppression for close to half a century. Recent discoveries are pointing to its effectiveness in treating a broad variety of cancers."

"Additionally, Iranian scientists have shown it very effective in treating strokes. It is a drug that is readily available, and in many countries can be

bought without a prescription. Noscapine is a safe low-cost option that has the potential to successfully fight several life-threatening diseases.

White Birch Bark Compound in Fight Against Prostate Cancer

The following information was obtained from the Internet and the *googlealerts-prostate cancer website* and originated with *wwwtopcancernews.com*.

Although researchers have considered the possibility that the bark of the White Birch tree might contain a compound, known as *betulinol*, with the ability to fight prostate cancer, until recently there was no way to test it because they did not know how to make the compound water-soluble.

Now that *Weill Medical College of Cornell University* researchers have solved that problem, laboratory tests on mice are showing it is indeed effective in killing prostate cancer cells.

"Years of research appear to have paid off, and now animal tests on this potential anti-cancer agent can finally proceed. Already, in mouse studies, we've found that our water-soluble compound – called Boclysinated-betulonic acid – has achieved up to 92percent inhibition of prostate cancer tumor growth compared to controls," states lead author *Dr. Brij Saxena*.

While the study into the cancer-fighting properties of the White Birch tree might be new, the White Birch tree has a history of

medicinal uses. According to the Living Memorials Project website White Birch tree information page, native American Indians used the leaves and bark of the tree as a tea to treat fevers, stomach upset, and rheumatism. The bark was boiled to make poultices for minor wounds, and oil made from the bark was used to treat bladder infections, rheumatism, gout and nerve pain. In Europe the leaves were used to treat skin rashes, hair loss, rheumatic complaints, and to purify the blood. Birch tar oil was used to treat chronic skin diseases.

The Phytochemical and Ethnobotanical Databases of United States Department of Agriculture includes information on betulin and betulinic acid as showing that it inhibits cancer, and the compound is also known to be anticarcinomic; anti-flu; anti-inflammatory; anti-viral; and a prostaglandin-synthesis inhibitor.

Variation in the Definition of Biochemical Recurrence in Patients Treated for Localized prostate Cancer -

The following information is an excerpt of information that was obtained from *GoogleAlerts-Prostate Cancer* and originated with *Medical News Today*.

One of the problems with prostate cancer outcomes studies is the lack of standardization in the definition of “treatment failure”. While after radical prostatectomy most experts

would agree that a serum PSA concentration greater than 0.2 ng/ml constitutes a recurrence, some institutions use 0.1 ng/ml and others use 0.4 ng/ml. What may seem like minute differences in PSA become relevant and provoke anxiety to the physician and patient trying to decide when to begin salvage radiotherapy. Furthermore, varying definitions makes comparisons across studies difficult.

For patients treated with radiotherapy, the most commonly used definition for biochemical recurrence has been ASTRO “3 consecutive PSA rises” definition. In the last several years some experts have suggested that a “nadir plus 2 ng/ml” definition may be more accurate. This defines the biochemical failure event when the patient’s PSA rises 2 ng/ml above the nadir.

After reviewing available data, the panel recommended using serum PSA or 0.2 ng/ml or greater for biochemical recurrence after prostatectomy and the ASTRO definition for patients treated with radiotherapy. The authors acknowledge that in the future ASTRO may change the “3 consecutive rises” definition to a “nadir plus 2 ng/ml” or “nadir plus 1 ng/ml” definition. Most importantly these definitions are intended to be used to facilitate comparisons between studies, and not as guidelines to initiate salvage treatment.

The authors of this report reviewed over 13,800 articles published between 1991 and 2004, which included the terms prostate cancer.

The Kelowna Prostate Cancer Support and Awareness Group does not recommend treatment modalities; however, all information is fully shared and confidential. The information contained in this newsletter is not intended to replace the services of your health care professionals. You are advised to consult with your health professional regarding matters of your personal health.

UP COMING MEETING DATES-

May 12th – June 9th – July 14th – August 11th – September 8th

Our regular monthly meetings are held on the second Saturday of each month in the meeting rooms of the Kelowna Health Centre – 1340 Ellis Street. Our meetings begin at 9:00 A.M. and are generally over by 11:00 A.M.

I would like to thank Sanofi Aventis manufacturer of Eligard®, Taxotere® and Xatral® for their support in producing this newsletter.

Thank you for helping us *“Win the War Against Prostate Cancer.”*

The Okanagan Prostate Resource Centre operates on donations. We would like to thank the Companies, Service Clubs, Organizations and Individuals that have made donations in order to help us operate this very valuable center. If you wish to make a donation please feel free to fill out the form below. Your support is gratefully appreciated. Our official Registered Charitable Number is - 89269 1718 RR0001

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