

PROSTATE CANCER CANADA - NEWMARKET

Volume 14, Issue 10,

June 15th, 2010

**A support group that provides understanding,
hope and information to prostate cancer patients and their families**

For this last meeting of the season before we take off for the cottages or camping, we were very fortunate in arranging a guided tour of the new Southlake Regional Cancer Centre. Medical staff plan to be available at every station to explain to us what goes on there. Our plan is to meet at 7 P.M. just inside the entrance of the centre (Several of our executive will be their to direct you to the group). In keeping with the talk that Dayton gave us at the May meeting, and if the weather is good, many of us plan on parking at the Senior Centre and enjoying a nice short walk to Prospect street and the front entrance of the centre. There probably will be a few parking spots available across the road at the Cancer office or on the street if you already have completed your daily exercise schedule and would like to park closer. To get to the centre, just go in to the entrance of the parking building and immediately to your right you will see several doors to the Cancer facility. We'll see you there

Meeting Date: June 17th, 2010

Place: Southlake Regional Cancer Centre

Time: 7:00 pm to 9:00 pm

Speakers: Medical staff at the centre

Subject: A tour of the Cancer Centre.

Prostate Cancer Canada - Newmarket

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a member of the



Assisted by the Canadian Cancer Society

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The Newmarket Prostate Cancer Support Group does not recommend products, treatment modalities, medications, or physicians. All information is, however, freely shared.

May Notes . . . Dayton Dysart, a physiotherapist from Southlake Regional

Subject: "Use It or Lose It".

Dayton Dysart, our physiotherapist speaker at the May meeting, gave us a very basic informative talk on the importance of exercise in maintaining and improving our overall health as we deal with the side effects surgery, radiation or hormone treatment. Much of his talk was illustrated with a powerpoint presentation. He also supplied us with, as promised, two websites that he felt would help us to develop a meaningful action plan for focusing on prevention and maintenance of health as it relates to cardiovascular exercise, flexibility and strength.

Beginning an exercise program... <http://www.myexerciseplan.com/assessment/>

and Exercise Videos....<http://www.exerciseismedicine.org/keys.htm>

When it comes to physical exercise, you've got to put in the effort and when you do, you get the payoff. Today, what I want to do is go over with you the concepts of physical fitness and what is currently recommended by the American College of Sport Medicine and their guidelines for physical fitness and health. I want to bring this to you as a real simplistic view, so if I get too complicated or complex, stick up your hand and tell me to simplify this because that's what I really want to do. Make it easy to exercise, make it easy to implement in your life and give you clear, easy guidelines that you can use yourself. Then I'm going to talk a bit about the benefits of exercise, which you've probably heard drawn out over the years. And then a little bit on how that might reflect on prostate health.

First of all, exercise is not a dirty word. I'd almost like to use the word activity instead of exercise. Any activity is exercise, vacuuming, loading the dishwasher, mowing the lawn is certainly activity. It's not as if you have to go to a gym, or even physiotherapy department to engage in exercise. The one bonus is, your body adds up exercise sessions. So, if I recommend that you do 30 minutes five days a week of moderate intensity exercise, well, it doesn't necessary mean that you have to sit down or stand up or run or walk to the cancer centre for 30 minutes. You don't have to go back and forth to the cancer centre three times. If you go there once and it's ten minutes of exercise and you mow the lawn for twenty minutes when you get back home, then you've got your 30 minutes. It's cumulative in its effect, you don't have to do it all at one time and, one thing we know for certain, activity is preventative medicine, it can prevent chronic diseases as well as assist you in controlling them. It's preventative for a number of things, such as obesity, heart disease, etc. Exercise is the poor man's plastic surgery. There's that tummy tuck you always wanted, you can get it with a few months of exercise.

Why do you exercise? There's certainly evidence to show that it improves your mood. Actually, There's some evidence in younger individuals, college age males and females that I've read that it actually can combat depression.

Certainly weight management, when you exercise you burn calories. When you exercise it provides strength training and increases muscle mass; you burn more calories sitting in a chair than you would have if you had less muscle mass. When you exercise for 30 minutes, it's not solely that 30 minutes that you burn calories. You're burning calories

for probably a number of hours afterwards.

Exercise improves sexual function.

It improves sleep, the more you exercise, the more tired you become. If you have issues with sleep, if you try regular exercise that will help with creating more fatigue at the end of the day. Inversely, though, if you exercise far too close to when you're going to sleep, sometimes it can make it more difficult for you to sleep.

You certainly have improved energy levels. If you engage in a regular exercise program, that is a progressive exercise program, that helps you improve your cardiovascular status. Things like mowing the lawn, which once was 50% of your total ability to that exercise, after a few months maybe it's only 35%. If you find at the end of the day you're quite fatigued after playing with your grandchildren, the more you exercise, the less they'll fatigue you, so you can engage in more and more activities throughout the day.

Cholesterol: we all know that the high density level proteins are good cholesterol; the low density level proteins are your bad cholesterol and the triglycerides are bad, too. Exercising has been shown to improve the high density level proteins and reduce the low density level and triglycerides. Cholesterol is one of those things that can effect and can have an impact on heart disease. The more we work out our heart, the more we diffuse it with blood, the more we stress it in controlled manners, the better off we become in regards to our heart health.

As I said before, it can help avoid or control chronic disease. Diabetes, in particular Type 2 diabetes, is drastically effected with exercise. Some people use exercise instead of medication to control diabetes and some people can actually reverse Type 2 diabetes with exercise, particularly cardiovascular exercise.

Some types of cancers can be avoided. Studies have shown that colorectal cancer can be avoided with regular exercise.

Osteoporosis: the weakening of bones and the deep density of bone mass is certainly effected by exercise, especially for women. When you're younger in your pre-adolescent years, you're starting to build up bone mineral density at that point in time, so you basically build up a reserve or a bank of bone mass and that bone mass depletes over time and over the years. Men are incorporated in that same conclusion but women, after menopause, will tend to lose more bone mass than men. Nonetheless, if you have osteoporosis, exer-

cise is never a bad thing. You are helping to increase bone density and one of the things they'll have you do, or encourage you to do, after giving you a long list of medications, is "Oh, by the way, you should exercise." I think it should be stressed how important it is in combatting this disease.

What is the impact of aging on exercise? We know that aerobic capacity or the ability to do aerobic work or cardiovascular exercise reduces 8.3% in your 40s and 23% per decade in your 70s. So, if you're a long distance runner as a young person and you carried it on into your 70s, we know you're not going to be as good in your 70s, no matter what. However, don't say, "Well, forget it. If I'm going to lose it anyway, I might as well not try." You can always improve your cardiovascular status from your current present state. That will help combat this natural loss of oxygen using capacity of the heart and lungs. Also, muscle mass declines with age, as well. Starting in the 40s, picking up speed after the 50s. It typically starts to outpace the rate of muscle gain after your 50s. However, again, it doesn't matter what time you start an exercise program, it doesn't matter what your age, you can always improve your strength. What the hope is and the desire is and what the evidence has somewhat teased out, is that if you do increase your strength through regular physical exercise, it can improve your functional status at home. e.g. You have trouble getting out of a low seat, the more strength you have, the better possibility to get out of those chairs.

These are guidelines for healthy adults under the age of 65: they recommend moderate cardiovascular, so something like a walk, a hike, a jog, you can mow the lawn, vacuuming, it doesn't matter what it is, 30 minutes a day, five days a week. Or, if you choose to spend less time exercising, you can cut it down to three days a week for 20 minutes, as long as it's vigorously intense exercise. They also recommend doing 8 to 10 strengthening exercises, 8 to 12 repetitions, twice a week. So you only get to do strength training two times a week and you'll improve your strength from that. Then for those of you who are over 65, or adults 50 to 64 with chronic conditions such as arthritis, it's much the same thing: moderate intensity, 30 minutes five days a week, vigorous intensity 20 minutes three days a week and strength training, 8 to 10 again, ten to fifteen repetitions, so just a bit higher in the repetition range. If you're are at risk of falling, do some balancing exercises. Have a physical activity plan. It could be something as simple as having a calendar, where you add up your exercise sessions, like mowing the lawn, going for a stroll, whatever it is that you might do to add up to 30 minutes a day and as long as you've got five Xs across that week, you've done your part to improve your physical fitness.

The thing that people most often think of related to fitness is cardiovascular fitness. That is doing a continuous activity for approximately 20 minutes, if it's vigorously intense, or 30 minutes at moderate intensity. If you haven't done jogging as a regular part of your routine, I wouldn't recom-

mend that right away. You may consider things like walking, or even walking and hiking, that's fine too. If you want to combine, you can do some cycling. One thing I want you to consider with this is impact. If you have conditions where you've undergone surgery, something like a joint replacement, you must consider the impact of the exercise you are doing (and the impact is not on your heart and lungs, so that's certainly going to be positive if you keep it at the moderate intensity) on the joints themselves. If you suffer from arthritis, if you suffer from sore and achy joints and you're starting a routine, consider the impact. Go with a lower impact routine. Something like a walk or a hike, or even water jogging, if you like, or swimming. That would be something you'd want to start before getting into a heavy impact, like a jogging or running. Another thing with regards to impact, is when you're talking about bone mineral density and improving your bone stock, swimming is not going to do it for you. You need to have the forces from the ground reacting through the bones to stress them in order to improve the strength of your bones. So something like water jogging wouldn't really work for you for improving your bone stock. However, something like water jogging would be excellent for someone who has undergone a joint replacement, because it will reduce the impact on that joint and increase its longevity. Don't forget, as I told you before, certainly along the lines of physical activity, canoeing with your family, what a wonderful thing for physical activity, using mostly arm strength there, too. Nonetheless, when you have to get out of that thing, you're going to be using lots of strength if you're going to be carrying the canoe.

When we talk about cardiovascular, what about intensity? I think that some people have a difficult time understanding what is moderate intensity and what is vigorously intense exercise. When you're starting on a routine and you're doing moderately intensive exercise, if you can have a conversation with the person you are exercising with and still feeling a light sweat coming on, you feel like you're working at a reasonable level, that's good. You are working at a moderate intensity rate. As long as you can say about two or three sentences while working out with somebody with you, that's probably moderate intensity. If you want to work at a vigorously intense rate, you can maybe complete a sentence before you have to breath and you might get two or three words in there and that's when you're working at a vigorously intensive level of exercise. That would require 20 minutes only 3 times a week. We have this technology which can give us our heart rate, we have heart rate monitors in a watch, or on a treadmill, if you're doing that kind of activity. I always encourage to just use the talk test. As long as you can talk to your partner, or if you're trying to be vigorous, if you get three words in then your huffing and puffing, that's basically all you're going to look for.

The next part of my talk is about strength. This is always good because people always get really complex with their exercises. A few recommendations when I talk about strength. The first recommendation is, start slow. Nine out of

ten times, people do far too much. While you're doing it, things feel pretty good, you get pumped up, your energy levels get fired, your testosterone gets going and you do way too much. Then you experience what is called the late onset muscle soreness. Basically, 24 hour or 48 hours later, you're really sore and you can't get out of bed and you're complaining to all your friends and family how sore your thighs are, and your arms are. It's not going to hurt you but it certainly going to impede potential exercise. If you went to the gym and did a big squat workout and the next day you've got to do your 30 minutes of exercise. Chances of you doing it? A little less once you've got really sore muscles. Something you want to look for is to do things a little slower, remember you always have two strength exercise programs a week. You can go a little harder the next time if you're feeling pretty good. Often times people in the clinic ask me, if it's sore while I'm doing it, is that good? No. That's never good. They say, "Well, you know two days later it was really sore in my leg." I say that's not so bad as it's delayed onset muscle soreness, most likely that's the problem there. In that same theme, we want you to allow time for your body to adapt. Remember it's going to take a number of weeks. It will take at least ten weeks, most likely twelve to notice any improvement in strength. But it will come, at any age group, within any gender, too. Ensure that you are able to complete all your workouts for the week. They all add up. My big pet peeve. Posture. I see many young people, especially young males in the gym, who are using poor posture while exercising and working their muscles into poor posture. When you're sitting, use good posture; walk with good posture, if you don't then there's no chance that you're going to have it. When you're exercising, don't strengthen your body to hold you in a bad posture. Strengthen your body to hold you in an upright, tall, good quality posture.

So strength, keep it simple. You don't have to have it complex. Make sure that the exercises promote functional movements. You don't have to go to a gym. In fact, get the idea of a gym out of your mind. You can use it and use the benefits of exercise equipment but you absolutely do not need

it. For example, a squat can be done standing, squatting and back up again. There's no sense in going to a gym to put 60 lbs and push that because it's not really as functional as doing a squat with your own body weight and doing exercise with your own body weight. Remember, when you are doing strengthening to incorporate all the muscle groups. Younger people just go to the bench presses. Also, if you're good at something, you should probably do the opposite, because you are probably not as good at that and people always tend to do what it is they're good at. Overall health requires strengthening of all muscle groups, so certainly incorporate all those groups and remember specificity. If somebody told you that they wanted to be an NHL hockey player so they were going to go swimming five days a week, you'd probably think they were crazy. If you told me you want to have a healthy lifestyle and have an overall fitness level that is improved, I wouldn't only go in the gym and strengthen your upper body. You have to do an overall approach if that's the case. If you want to get better at keeping your posture, certainly work on your posture. It's that specific. Whatever it is you want to improve then tailor your exercise program. Don't get complicated, be very specific. Dayton finished up his talk by showing us visually examples of lower extremity and upper extremity strengthening exercises. He reminded us that normal flexibility is the ultimate goal. Stretching should never hurt and perform adequate warm up prior to stretching. He said we should exercise in short bouts; change it up; try to include friends and family; forget about the gym; meet your schedule.

He then closed with a few words on exercising and prostate health. Both resistance and aerobic exercise reduced fatigue in men with PCa receiving radiotherapy. Resistance exercise generated longer-term improvements and additional benefits for quality of life, strength, triglycerides, and body fat.

Exercise improved sexual functioning of men receiving radiotherapy for prostate cancer.

Intensive lifestyle changes may affect the progression of early, low grade prostate cancer in men. He then spent about 20 minutes answering questions from members.

Keep these dates circled on your calendar and ask us for more information.



**September 22nd - 25th, 2010
Fairmont Royal York Hotel, Toronto, ON**

Save the date for this year's conference in the vibrant city of Toronto, Ontario. Join us for 3 days of inspirational and informative speakers and more. Topics and sessions will include medical updates and discussions on advocacy, support group improvements, awareness and team building.

Confirmed Speakers include:

Mr. W. Brett Wilson Canadian entrepreneur, philanthropist and prostate cancer survivor

Dr. Robert Buckman Author of "Cancer is a word, not a sentence"