



# 2008/09 ANNUAL REPORT

AWARENESS | SUPPORT | RESEARCH

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## THE STORY BEHIND PROSTATE CANCER CANADA

In May 2009, The Prostate Cancer Research Foundation of Canada became Prostate Cancer Canada. This name change was a natural evolution for our organization in the goal to become a national foundation focused on the fight against prostate cancer.

We recognized that this disease was not high enough on the public's radar, even though it is as common in men as breast cancer is in women. Our Foundation also did not have an identity that was immediately recognizable to Canadians. Additionally, there was a scattered approach to the fight against prostate cancer, as many different prostate cancer foundations across Canada were competing for the same attention. All of these obstacles were impeding the ability to maintain consistent messaging about the disease and to fundraise effectively.

*"The tie will inspire hope - that we will achieve the goal of eliminating prostate cancer."*

Working with Stellick Marketing Communications Inc., we developed what we believe to be the distinctive symbol for our Foundation. Prostate Cancer Canada and our blue necktie identity has now launched across Canada. Just as the pink ribbon became the instantly recognizable trademark for the battle against breast cancer, it is our goal that our tie will achieve the same for prostate cancer. The tie will inspire hope - that we will achieve the goal of eliminating prostate cancer, and is a symbol of unity - that we can only achieve this goal when we work together.

We are grateful for the support of the media and retailers across Canada who have helped us introduce the necktie to the Canadian public. News, sports and weather anchors from coast to coast have worn our tie on air. The National Post is running supplements to profile prostate cancer, and fine stores such as Korry's, Stonehouse and Golf Town are selling the Dion tie, with proceeds going to much needed prostate cancer research.

Under our new name and identity, we will become the most important resource for Canadians affected by prostate cancer - by increasing awareness of the disease and by providing support and compassion to those diagnosed.



Rebecca von Goetz  
Vice-President, Marketing and Communications

## A SURVIVOR'S STORY



Len Kurt and his wife Suzanne

If Len Kurt has his way, prostate specific antigen (PSA) blood tests will be a big part of his son Ryan's life. The recommended age for Canadian men to begin a discussion with their doctor about prostate cancer screening is 40, and Kurt is a strong believer in making it part of an annual physical check up.

Kurt, 54, an Ontario-based human resources professional, is a prostate cancer survivor. PSA testing helped detect his cancer when other diagnostic methods such as digital examination and ultrasound could not. His form of the disease was exceptionally fast growing.

"Time was definitely not my friend," he says. But thanks to repeated PSA testing and a biopsy, his hard-to-detect cancer was identified early last fall. Within little more than a month, doctors at Grand River Hospital in Kitchener performed a radical prostatectomy, removing the prostate gland and surrounding tissue and, with it, giving him a new lease on life.

Len, who has been married for 32 years and has two children: Anita, 31, and Ryan, 27, did not experience typical symptoms associated with prostate cancer. "There was no frequent or painful urination, no back pain and no fatigue. The diagnosis came right out of the blue."

Aware of the potential for prostate cancer, (as two uncles were diagnosed with the disease), Len's physician started making PSA tests part of his annual physical checkup at age 45. It was during an annual physical in October, 2006 that his doctor noticed an elevated PSA score of 3.9. He did another test. By November 2007, the score read 4.8 and in December 2007, 5.9. "What that suggested was that there was something very wrong going on, and whatever it was, it was growing very aggressively," Len says.

"All through that time the PSA scores kept rising," he says. "In early January, 2008, my family physician referred me to a urologist. A biopsy was ordered in March. Frustrated with the delay in receiving results, Len's urologist had the tissue samples sent to Credit Valley Hospital in Mississauga, home to one of Ontario's leading team of experts in prostate diagnosis. The results, which came back in August, were inconclusive. A subsequent biopsy done in September provided a definitive answer. He did indeed have prostate cancer, and it was an especially aggressive tumor.

"We were overwhelmed," Len says. "I felt like I had been given a death sentence. "Given the advanced state and aggressive nature of the tumor, the urologist gave two options: surgery to remove the prostate and perhaps some surrounding tissue as well, or radiation therapy. The downside with radiation was that if it did not work, surgery would no longer be an option. Len chose surgery. "I just figured it would be best to get it right out of me."

Six weeks after the three-hour surgery, he met again with the urologist. There was evidence of some remaining cancer cells, so another PSA test was ordered. When it came in four weeks later, the score was .003. Len's entire family breathed a collective sigh of relief. Len will continue to monitor his progress with regular PSA testing.

"Today I am feeling pretty well," he says. "I have almost 100% bladder control, my energy and stamina are almost back to normal and I am not on any medication." There are the expected issues with erectile dysfunction, but as Mr. Kurt says: "My wife Sue and I are working on them. It may just be a function of time. When you have a 50-year-old body it takes longer to recover than when you had a 30-year-old one." Len's story is not uncommon. About 25,500 Canadian men will be diagnosed with prostate cancer this year. During his lifetime, 1 in 6 men will face the same diagnosis. When detected and treated in its earliest stages, prostate cancer is over 90% curable.

**"If I offer any advice to people, I would start with being vigilant; get regular PSA tests. Pursue information; know what is involved, talk about your disease and ensure you are confident in your doctor. Finally, have faith and hope for the future. Above all, take responsibility. You are responsible for your own health."**

## CHAIR'S MESSAGE

Our Foundation found itself at a crossroads during the past year. While our donations continued to grow, and we were privileged to have excellent relationships with key partners such as Safeway and Golf Town, we went through a period of self-examination.

The numbers don't lie. During his lifetime, 1 in 6 Canadian men will be diagnosed with prostate cancer, and 4,400 will die from the disease this year alone. Current projections have maintained that within a decade, 1 in 4 men will develop the disease. Prostate cancer has become the most common cancer to afflict Canadian men.

*"We are well prepared to meet the challenges facing us, and are excited about the future."*

This means that the Foundation needed to recommit – to redouble efforts to fund research that will one day lead to a cure. We also decided that it was time to become front and centre in the minds of the Canadian public, to educate men, women and young people about the effects of prostate cancer on families across Canada. We also wanted to reach out to more people to talk about prevention and support. Finally, we wanted to create a national focus, with all of us joining together in a united fight against the disease.

In order to accomplish these long-term goals, our Foundation has embraced a new chapter with its new name, identity and mission. You will read more about this elsewhere in our Annual Report. We are now well prepared to meet the challenges facing us, and are excited about the future.

I would like to thank all of the dedicated individuals who join me as part of the Board of Directors. Thanks as well to all of the committed donors and volunteers who support us across the country. We are going to work even harder to earn your future support.

Prostate Cancer Canada is a national foundation dedicated to being a global leader in the fight against prostate cancer, earning the enthusiasm and support of Canadians through integrity, compassion, and innovation. We hope you will join us in our mission.



Lee Watchorn  
Chair, Board of Directors

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## A MESSAGE FROM THE CHAIR OF THE SCIENTIFIC & MEDICAL ADVISORY COMMITTEE

Over the past year, Prostate Cancer Canada has grown on many fronts. Through a major re-brand, the Foundation has not only changed its name and identity, but has also refined its mission. While our principal focus will always be on funding new research that will one day lead to the elimination of prostate cancer, the Foundation is now a truly national organization, with a vision of becoming the global leader in the fight against prostate cancer.

We have been supporting innovative research in Canada for over ten years, and have made enormous advancements in education, support and awareness as well.

Consider this - in 1997, the Foundation raised enough to invest \$30,000 into a single research grant. Today, that number has grown to over \$1.6 million in grants each year to researchers and scientists from across Canada, many of whom have promising careers ahead of them and have never before received Foundation funds.

*"Today, national campaigns are raising millions of dollars that will make a difference in the lives of so many men."*

In fact, it is because of Prostate Cancer Canada initiatives that new opportunities, such as the Clinician-Scientist Award, are available. This award, offered for the first time in 2009, will provide salary and research support for outstanding clinician-scientists launching a career as independent investigators in prostate cancer research. These awards secure the time, staff support and lab resources for busy clinicians who also have innovative research ideas, but might not otherwise have the opportunity to pursue them.

Prostate Cancer Canada presents a new future for the Foundation, one which will excel on a national level with support from people and organizations across Canada and throughout the world. When individuals, corporations, researchers and doctors come together to support the cause and the Foundation, there is no telling what we might discover. But one thing remains certain - our future is very bright.



Dr. Yves Fradet, MD, FRCSC  
Chair, Scientific & Medical Advisory Committee

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## CORPORATE PARTNERSHIPS ARE THE BACKBONE OF ANY CAUSE-RELATED CHARITY

Beyond fundraising for mission programs, strategic associations with strong brands can help broadcast a charity's message to a wide audience. They also validate the importance of a cause with a target audience of customers and employees. Prostate Cancer Canada is proud to have a wealth of partnerships with corporate Canada that serve these needs as we continue to grow.

Canada Safeway was a standout partner in 2008, nearly doubling their support from the previous year. In addition to signing on as the title sponsor of the Safeway Father's Day Walk/Run for Prostate Cancer, the company raised a **record \$1.3 million** through an in-store fundraising campaign. Customers at over 200 stores across western Canada were asked to support Prostate Cancer Canada at the register, and were offered special coupon books for use on return visits as a thank you. The company also staged an awareness campaign to educate their customers and employees about the prevalence of prostate cancer and the necessity of screening for men over the age of 50.

Funds from the Safeway campaign will support a number of new research studies conducted through Prostate Cancer Canada's pilot grant program, as well as two significant larger-scale projects.

In partnership with CancerCare Manitoba and its Foundation, campaign proceeds are funding a prostate tumour bank at the Manitoba Prostate Centre. This support will help build the tumour samples available at the Centre, educate tissue donors regarding their use and facilitate access by the research community. Safeway funding will also support the recruitment of Dr. Colin Collins, PhD, an internationally recognized genomics scientist from California, to a new research lab at the Vancouver Prostate Centre. Dr. Collins' groundbreaking research combines mathematics, genomics, computer science, and clinical science to improve diagnostics and therapeutics for prostate cancer. He will continue his work in refining his identified suite of DNA-based biomarkers that can predict a patient's risk of disease progression.

"Through our history of partnership with Prostate Cancer Canada, we've learned that our employees are committed to this cause and that our customers also support the work being done by the organization," said Reneé Hopfner, Manager of the Canada Safeway Foundation.

*"We're thrilled that both groups contributed so generously to the campaign and made these important research investments possible."*

Longtime partner Golf Town stepped up to the tee once again with two events in support of Prostate Cancer Canada. In June 2008, the company hosted the second annual Golf Town Invitational at Toronto's Magna Golf Club. The event featured an exhibition round and clinic with PGA Tour legends Tom Watson and Bernhard Langer. In September, the company also hosted the eighth annual Golf Town Charity Classic. Since 2003, Golf Town has raised over **\$1 million** for prostate cancer research.

"Prostate cancer is a tremendous threat to our community, and in our five years of partnership with Prostate Cancer Canada, we have worked hard to help the 1 in 6 men currently affected by the disease," says Stephen Bebis, President and CEO of Golf Town.

Prostate Cancer Canada gained a new partner in 2008 when Mr. Lube joined the fight against prostate cancer in Ontario. Already a supporter of the Vancouver Prostate Centre, the company launched the first annual Mr. Lube Tournament for Life golf event to raise funds and awareness for this disease. The event welcomed 144 participants at Copper Creek Golf Club in Kleinburg, Ontario and raised \$30,000.

"The Mr. Lube Foundation is pleased to support prostate cancer research with this important golf tournament," said Georgia Dahle, Director of Corporate Communications, Mr. Lube Canada. "Having the opportunity to increase awareness and donate funds to help find a cure is something that we are most proud of as an organization."

Prostate Cancer Canada thanks its 2008 corporate partners for their generous support:



## RESEARCH

In 2008/2009 Prostate Cancer Canada invested over \$2.7 million in research initiatives, with just over \$1 million going to pilot grants, \$600,000 to Clinician-Scientist Awards, \$200,000 for the Manitoba Prostate Tumour Bank and \$200,000 for the PCC Leadership Award at the Vancouver Prostate Centre. In addition, \$775,000 of the Research Reserve Fund has been earmarked for the development of the “National PCC Virtual BRCA 1/2 Clinic”.

### Funded Principle Investigators Pilot Grant Projects 2008/09

**Dr. Moulay Alaoui-Jamali**, MD, Ph.D.  
University of Saskatchewan, Saskatoon

**Dr. Maxime Bouchard**, Ph.D.  
McGill University, Montréal

**Dr. William Chu**, MD, Ph.D.  
Sunnybrook Health Science Centre, Toronto

**Dr. Gregory Czarnota**, MD, FRCSC Ph.D.  
Sunnybrook Health Sciences Centre, Toronto

**Dr. Yves Fradet**, MD, FRCSC  
Centre Hospitalier de L'Université  
de Montréal Hôtel-Dieu, Québec

**Dr. Bertrand Jean-Claude**, MD, Ph.D.  
McGill University, Montréal

**Dr. Andis Klegeris**, MD, Ph.D.  
University of British Columbia Okanagan, Kelowna

**Dr. Thomas Kislinger**, Ph.D.  
Ontario Cancer Institute, Toronto

**Dr. Leigh Murphy**, MD, Ph.D.  
CancerCare Manitoba, Winnipeg

**Dr. Michael Pollak**, MD, FRCPC  
McGill University, Montréal

**Dr. Paul Rennie**, MD, Ph.D.  
University of British Columbia, Vancouver

**Dr. Marianne Sadar**, Ph.D.  
BC Cancer Agency, Vancouver

**Dr. D. Robert Siemens**, MD, FRCSC  
Queen's University, Kingston

**Dr. Samy Suissa**, MD, Ph.D.  
Jewish General Hospital, Montréal

**Dr. Joan Sweet**, MD, FRCPC  
University Health Network, Toronto

**Dr. Damu Tang**, MD, Ph.D.  
McMaster University, Hamilton

**Dr. Theos Tsakiridis**, MD, Ph.D.  
McMaster University, Hamilton

## RESEARCH *(CONTINUED)*

### Clinician Scientist Awards 2008/09

Prostate Cancer Canada (PCC) awarded two Clinician-Scientist Awards which provide salary and research support for outstanding Clinician-Scientists initiating a career as independent investigators/junior faculty in prostate cancer research. These awards provide the opportunity for new faculty, with three or fewer years of service as independent investigators, to develop and demonstrate independence in initiating and conducting prostate cancer research.

**Dr. Vincent Fradet**, MD  
Université Laval, QC

There is evidence that the interaction of dietary fat, sex hormones and prostate inflammation can affect the development of prostate cancer. In this study, Dr. Fradet will work with a group of patients on a protocol of “active surveillance”—men who have been diagnosed with early-stage, low-grade prostate cancer that can be monitored over time to determine when treatment is required (if at all) based on the progression of the cancer.

Working with a nutritionist, Dr. Fradet will divide the patients into sub-groups and provide them with a drug commonly used to treat inflammation of the prostate (a condition known as BPH), and/or changes in their dietary intake of fatty acids.

The various combinations will allow for study of the various interactions in a group of men with low-risk disease, and will establish a basis for study on other combinations of drug and diet interventions. It will also help develop tools to better monitor the effects of non-invasive interventions in the context of active surveillance.

**Dr. Anthony Joshua**, MBBS, FRACP, Ph.D.  
Medical Oncologist, Princess Margaret Hospital, Ontario Cancer Institute

Research suggests that cancer is difficult to treat as it has the ability to adapt its growth processes and ensure its survival. One such process is “autophagy”, in which cells digest part or all of their “internal organelles” (specialized units within the cell) to allow for self-sustainment with nourishment during times of stress such as lack of oxygen or nutrients.

Autophagy has yet to be studied in prostate cancer, though it's known that about 40 per cent of cases have a deletion in one of the crucial genes involved in the process. This study will develop models of prostate cancer

## RESEARCH (CONTINUED)

that either have autophagy intact, or are deficient in this process. In both cases, the cells will be tested to see how well they grow and how they behave when they lack oxygen or other nutrients.

These experiments will also be complemented with an analysis of human prostate cancers to determine if there is any association with autophagy and aggressiveness of disease. In order to target these drugs to the right men, we need to fully understand the role of autophagy in prostate cancer.

### The Prostate Cancer “Virtual Clinic”—a National Research Collaboration

In 2009, PCC is launching our first national collaborative research project: the Prostate Cancer Virtual Clinic for men at risk of aggressive prostate cancer. This group has one common trait that makes them unique: they all share a gene mutation linked to aggressive breast cancer.

Studies have shown that the BRCA1 and 2 gene mutations lead to a highly increased risk of breast cancer in women. Dr. Stephen Narod of the Women’s College Research Institute in Toronto was a pioneer in making discoveries in this area, and in the course of his studies has tracked the progress of hundreds of patients related to their response to treatment.

What does this have to do with prostate cancer? Early studies have shown that the male relatives of these women have a higher susceptibility of developing prostate cancer—as much as a 22-fold excess risk.

It’s also evident that these men will be diagnosed younger than the typical prostate cancer patient, with aggressive forms of the disease, and with a higher chance of dying from it.

PCC is bringing together Dr. Narod with leading researchers across Canada to assess male carriers of BRCA1/2, including those who have not been diagnosed with prostate cancer, through analysis of their saliva or blood. The goal will be to offer novel and individualized treatments for BRCA1/2-associated aggressive cancers.

This five-year project will support genetic screening of hundreds of men through DNA sequencing. It will benefit from the input of experts in the fields of genomic counseling and surgical, radiation and medical oncology. And the expected results will inform new approaches to disease prevention and treatment through early genetic assessment.

As there is currently no group of researchers specifically studying this rare group of patients in Canada, PCC is proud to lead the charge in this exciting collaborative effort.

## PSA SCREENING: A POSITIVE STEP FOR ONTARIO

Like their counterparts in many other provinces, Ontario men over the age of 50 now have access to PSA screening. Beginning in January 2009, the Ontario government implemented OHIP coverage of the PSA test if authorized by a physician or nurse practitioner. Until now, men in the province had to pay approximately \$30 to have the test administered. Further, the government has authorized community labs to do the test rather than just hospital labs, allowing greater accessibility for those who want to assess their risk of prostate cancer.

Prostate Cancer Canada (PCC) has long supported free PSA testing for men beginning at age 40. The test measures PSA (prostate-specific antigen) that is found in the bloodstream. A high PSA score, or a score that is higher than a benchmark score established at age 40, can indicate the presence of prostate cancer. Although the test does produce false positives, the PSA test remains the most effective way of helping discover prostate cancer at its earliest and most treatable stage.

The government policy advises the physician or nurse practitioner to “order a PSA test for patients considered to be at risk of prostate cancer due to family history, their own health history, or their race.” Ontario Health Minister David Caplan notes, “Contrary to some misconceptions, a man does not need to be showing symptoms of prostate cancer in order to get a free PSA test. Also, there is no age condition for a free, OHIP-insured test.”

While most physicians will read this policy and begin regular PSA testing for their male patients at age 40, the wording can be interpreted in a narrower sense. Some doctors may choose to order a PSA test only after a DRE (digital rectal examination) reveals an abnormality in the prostate. If a doctor refuses to order a free PSA test, the patient will have to either pay for it himself or see another physician.

To help clarify the messaging, PCC has engaged the support of our volunteer Scientific & Medical Advisory Committee to review the existing guidelines and help generate recommendations for the Ontario Ministry of Health in the near future.

What’s next for Prostate Cancer Canada’s advocacy program? This year we will begin discussions with the remaining provinces that still do not insure the PSA: British Columbia, Alberta and Quebec.

## OUR RECOMMENDATION ON PSA TESTING:

**Age 40:** Establish a baseline PSA score. While the threat of prostate cancer is minimal at this age, it also precedes the onset of benign prostatic hyperplasia (BPH), the natural enlargement of the prostate that commonly occurs with age. The onset of BPH often results in rising PSA over time, and can be confused with the onset of prostate cancer.

Unless your resulting baseline PSA score is of concern to your doctor, the PSA need only be repeated every 5 years until age 50.

Men at higher risk of prostate cancer (those with a family history and/or those of African or Caribbean descent) should begin annual PSA testing at age 40.

**Age 50:** All men should begin annual or semi-annual PSA testing if they have not yet done so. Results that show minimal increase in PSA against your baseline score (at the discretion of your physician) require no further action until your next annual test. Those with significant increases should prompt a consultation with your doctor about follow up PSA tests and possibly a biopsy to test for cancer.





## THINGS GOT HAIRY IN MOVEMBER 2008



When Movember partnered with Prostate Cancer Canada (PCC) in 2007, very few people could have imagined the success that the campaign would have 12 months later. After raising over half a million dollars last year, we set our expectations very high...little did we know that all of our expectations would be surpassed. After a month long campaign that drew in more than 9,400 participants, 1,200 teams from across the country, and over 44,740 individual donations, Movember 2008 raised a staggering \$2.4 million dollars.

This past November, Bros and Sistas got together once again for a hairy initiative – Movember.

“We heard about this campaign and thought that it sounded like an interesting initiative”, says Steve Losty, Captain of the Mo CIBC World Markets team. Losty and his team of 118 moustached Bros and supporting Sistas went far above the call of duty, becoming not only the number one fundraising team in Canada, but also worldwide. “We all got together for a good cause and made this a team effort. At the end of the day it was for prostate cancer, but watching everyone grow a moustache throughout the month was a lot of fun.”

While the end of 2008 marked a difficult economic time in Canada, there were a great number of teams and individuals that saw Movember as an opportunity to increase employee morale. “Aside from the obvious benefit of raising needed funds for prostate cancer research”, says Ewan Dunderdale, team captain of the Movember team SAS Canada - The Power to Mo, “Movember helps corporations in their effort to retain top talent through the camaraderie and cross-departmental relationships that are built over the month of November. We are still talking about the impact Movember had and can’t wait to strut our stuff in 2009!”

Although the aim of Movember is to make the issue of male health fun, it is also a time to remind men that “below the belt” issues are not something to be shy about. “The first thing we said when we heard about this was ‘why can’t we do this?’” says Mike Miller, a second year Mo Bro in Edmonton. “It’s a disease that has affected so many people and I wanted to be able to do my part to help raise awareness. For so long, guys didn’t talk about it, certainly not guys in my age range. Movember helps lighten the issue but at the same time spread an important message.”

In addition to raising awareness, Movember has also given the Foundation the opportunity to raise funds for the development of programs related to awareness, public education, advocacy, support of those affected, and research into the prevention, detection, treatment, and cure of prostate cancer. With continued support for the campaign in the coming years, there is no limit to the success that a campaign like this can have. After two years of fundraising in Canada, one thing has become very clear, Movember is a shining example of how, when working together, we can all change the face of men’s health, one Mo at a time.

Prostate Cancer Canada would like to thank its Movember sponsors and supporters: *Canadian Club, Philips, Mercedes Benz, DC, Quick Silver, the Park Hyatt Toronto, FLIP video, Arbitrage, Golf Town, illnessPROTECTION.com, and Fabric.*

Prostate Cancer Canada would also like to acknowledge the following Movember teams, whose dedication and enthusiasm throughout the month of Movember did not go unnoticed. As well as the champion CIBC World Markets team, we would like to give special thanks to Michael Rossiter, captain of *Mo Money Mo Charity* (the second place fundraising team in Canada and third globally), *CMRL, KPMG-CM’s Mo Bros and Sistas, PwC Youthful, Voracious Rogues, The Goulet’s, Those Mustachioed Men in their Flying Machines, Calgary MO Bros & Sistas, The Big Mo.*

## OUR EVENTS

“We rely on a number of events to raise funds and awareness for the disease and the Foundation. This past year saw a number of events from across Canada engage Canadians through innovation and dedication.”

The 2008 Safeway Father’s Day Walk/Run for prostate cancer was an unprecedented success thanks to sponsors such as Boost and One A Day Vitamins. This year, Safeway and their staff went above and beyond the call of duty and clearly demonstrated their commitment to the cause. The event, which was held in Halifax, Toronto, Edmonton, Calgary, Kamloops, Kelowna, and Metro Vancouver raised over \$700,000 (compared to \$450,000 in 2007).

It was early on run day as participants filtered in with friends, family and coworkers ready to take on the 5k challenge. Monica approached the registration desk and the volunteer smiled, the women paused – the volunteer saw tears in her eyes and shook her hand as she handed over her registration information. She told the volunteer that her husband had passed away from prostate cancer earlier that year, and that she was determined to complete the walk in his memory. She had prepared for months, and now as she stood there, she didn’t know if she could complete the walk alone. A Safeway team saw her distress and immediately introduced themselves, and invited her to join their team. They walked with her the whole way, sharing stories, laughs and tears as they crossed the finish line.

Another signature event for the Foundation is the Wake Up Call Breakfast (WUCB) which attracted almost 1,500 attendees from across Canada and raised approximately \$370,000. In three of the locations, prominent senior community volunteers were recognized for their contributions. In Halifax, former Foundation Board member and long-time supporter, Fred MacGillivray was honoured. In Edmonton, John Stevens, founder of the successful Green and White Gala (GWG), and community advocate for prostate cancer awareness was chosen. In Toronto, Ed Clark, President and CEO of the TD Bank Financial Group and longtime sponsor of the WUC Breakfasts, was acknowledged before our largest audience of almost 500 attendees. Ed, a prostate cancer survivor, has been a devoted supporter of the cause and uses every opportunity to speak about the importance of regular testing and early diagnosis.

In addition, cities from Halifax to Victoria have started to contribute to the cause through a series of fun-filled community events. These are an important tool in raising awareness in smaller communities and with different groups of people. This past year, Prostate Cancer Canada (PCC) partnered with over 40 community groups, raising over \$500,000 for prostate cancer research.

Motivation for running an event can come from many different sources; it’s the memory of a loved one, the commitment to education or often just a drive to do better for a community. Bill Irvin and his group of friends from Edmonton, motivated by personal experiences and a commitment to help men their age learn more about health choices, walked the Cotswold Trail in England to raise funds. For the past eight years, Deborah Harper has been the driving force behind the Bill Harper Memorial Run at the Toronto Island and this year was no exception. Deborah’s motivation for continuing with the run has been to not only help men overcome the disease, but also to honour the memory of her father who lost his battle with prostate cancer. Over the years, Deborah has raised approximately \$40,000.

In 2008, the Randy Remington Charity Golf Classic in Calgary drove home a winner raising close to \$220,000 for the cause, the committee was driven by men who have made personal commitments to end the threat of prostate cancer.

Prostate Cancer Canada (PCC) is thankful to all the men and women across Canada who have donated their time and effort to raise funds and awareness for prostate cancer – a disease which, in his lifetime, will affect 1 in 6 Canadian men.



The Mr. Lube Tournament for Life gives golfers the opportunity to ‘take a swing’ at prostate cancer.

Detective Deborah Harper is joined by George Hubbard (from PCC) and fellow Metro Toronto Police officer, Sgt. Sandra Richardson, at the Toronto Wake Up Call Breakfast.



The “Daniels Angels” team is a motivated group creating lasting memories at the 2008 Safeway Father’s Day Walk/Run.

## THANK YOU TO OUR DONORS

Prostate Cancer Canada would like to recognize all donors whose generosity helps support our cause. Through research, public education, support and awareness, you are helping us become a global leader in the fight against prostate cancer. Due to space limitations we do not have the opportunity to recognize all those who make our work possible. As a result, this list includes donors who have made a financial contribution of \$1,000 or more from April 1, 2008 to March 31, 2009.

Should you note any errors or omissions, please accept our most sincere apologies and contact us at 1-888-255-0333 ext 263. Thank you.

### \$1,000-\$2,499

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## PROSTATE CANCER CANADA CONDENSED FINANCIAL STATEMENTS

### CONDENSED BALANCE SHEET

For 12 months ending March 31, 2009

	2008/09	2007/08
Current Assets	6,073,023	2,831,868
Capital Assets	172,759	97,226
<b>Total Assets</b>	<b>6,245,782</b>	<b>2,929,094</b>
Current Liabilities (note 2)	3,777,240	2,439,222
Net Assets (note 3)	2,468,542	489,872
<b>Total Liabilities and Assets</b>	<b>6,245,782</b>	<b>2,929,094</b>

### CONDENSED STATEMENT OF OPERATIONS AND CHANGES TO NET ASSETS

For 12 months ending March 31, 2009

	2008/09	2007/08
Gross Revenue	8,388,595	5,876,331
Expenses (Fundraising, management and general administration)	3,324,952	2,626,168
Net Revenue Before Charitable Disbursements	5,063,643	3,250,163
Charitable Disbursements (note 4)	3,092,973	3,050,163
Net Surplus After Charitable Disbursements	1,970,670	200,000
Net Assets Start of Year	489,872	289,872
Net Assets End of Year	2,468,542	489,872

### NOTES TO CONDENSED FINANCIAL STATEMENTS

- The condensed financial statements are derived from the financial statements audited by Deloitte & Touche. Copies of the audited statements are available on request. Certain prior year's figures have been reclassified to conform with current year's presentation.
- The Foundation makes research investments. Current liabilities include a provisional amount of \$2,992,531 for projects.
- Net Assets include a Research Reserve Fund of \$1,280,000, established to fund new prostate cancer related projects.
- Disbursements include mission investments in research programs and public education.

## THE LAST WORD

Bob Shiell knows all too well about prostate cancer. When Bob was 50, his 75 year-old father was diagnosed with the disease. At that point, Bob became proactive about his health and began having annual PSA and DRE tests. Six years later, Bob, who was very healthy and had no symptoms of the disease, was told he had prostate cancer. After being told he needed surgery, Bob decided to become an expert in this disease and learn more about his treatment options. Shortly afterwards, Bob opted for brachytherapy, a procedure that involves having radioactive seeds inserted directly into the cancerous tissue in the prostate. Today, 11 years later, Bob is considered cured. That could have been the end of the story. But Bob decided to help others, and now devotes all of his time to working with prostate cancer organizations, most recently, with the Canadian Prostate Cancer Network.

I met Bob shortly after I became President & CEO of Prostate Cancer Canada in October 2008. After much discussion, we decided to join together in the fight against prostate cancer. And as a result, as of June 1, 2009 the Canadian Prostate Cancer Network became the Prostate Cancer Canada Network, the voice of prostate cancer, and part of our Foundation. Bob is now the Managing Director of the Network, serving over 120 prostate cancer support groups across Canada. The Network helps individuals diagnosed with prostate cancer and their families, while increasing awareness of the disease and encouraging funding for research.

It is our belief that a national focus is required to better support those affected with prostate cancer. There are three things we must always remember:

1. Prostate cancer is the most common cancer to afflict Canadian men
2. Early detection is a man's best chance of surviving the disease
3. Continued research is essential if we are going to find a cure

*“Research dollars are needed – not only to eliminate this disease – but to lead to better diagnostic tests, improved treatments, awareness, advocacy and education.”*

Thanks to our staff, volunteers, sponsors and partners, and to people like Bob, who through leadership, dedication and inspiration, challenge us all to be our best.



Steve Jones  
President & CEO





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