



# THE WALNUT

September 2013

Newsletter of the Prostate Cancer Support Group - ACT Region Inc.

Affiliated with the Prostate Cancer Foundation of Australia



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## Monthly meetings

All men and women are welcome to attend our regular monthly meetings. No notice is required - simply come along and introduce yourself, or contact one of the people listed later in this newsletter.

### When

Meetings of our support group are held on every 3rd Wednesday of the month except in December.

### Usual Location

Room 22, Building 1, Pearce Community Centre, Collett Place, Pearce, ACT 2607. See our web site here for details and map showing the location:  
<http://tinyurl.com/bjoyczu>

### Time

6:30 for 7:00

### Next meeting

The next meeting will be on Wednesday, 18 September 2013. There will be no guest speaker. This will be our Annual General Meeting. After the formal matters relating to the AGM there will be lots of time for new and existing members to discuss their status and to raise questions for which they would like answers. Then supper, with the opportunity for more discussion and networking with other members who have similar interests.

## Contact us

### Postal address

Prostate Cancer Support Group - ACT Region Inc.  
PO Box 717, Mawson, ACT 2607

### Personal support

If you would like immediate support, advice or assistance contact any of the following people:

President: Peter Daley

Phone: 02 6291 0612

Email: [monashmm@bigpond.net.au](mailto:monashmm@bigpond.net.au)

Committee member:

John Lucas

Phone: 02 6293 2532

Email: [jandklucas@bigpond.com](mailto:jandklucas@bigpond.com)

Committee member, newsletter editor and web site manager:

Mike Boesen

Phone: 02 6254 3493

Email: [mboesen2@gmail.com](mailto:mboesen2@gmail.com)

## Web site

Our web site provides details about the activities of the group, meetings, meeting location map, contact persons and lots of other useful information:

[prostate-cancer-support-act.net](http://prostate-cancer-support-act.net)

## Disclaimer

From time to time in our newsletters we provide information about developments in the diagnosis and treatment of prostate cancer, research articles, documents, audiovisual products, presentations and other interesting materials. However, the Group's Executive and the editor of this newsletter do not have the medical expertise required to make an informed evaluation of the conclusions and recommendations presented in such materials, and we have not verified such conclusions and recommendations through appropriately qualified medical professionals.

The information presented in this newsletter must not be interpreted as being endorsed or recommended by

the Executive or the editor. Any recommendations made in such materials may not be applicable in your particular case. Before implementing any recommendations made in the materials that are reported, it is essential that you obtain advice from appropriately qualified medical professionals. The view of the Group's Executive is that no two prostate cancer cases are alike and that no single treatment option is better than any other in all cases. While the information in this newsletter should be of interest, there is no substitute for getting informed medical advice from your own GP, specialists and other medical professionals.

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## From the editor

This edition provides information about our last meeting, planned events and research and reports that could be of interest.

If you are aware of news, products, publications, web sites, services or events that may be of interest to members of the group I'd be happy to be informed of them. If you have received this newsletter indirectly and would like to be emailed a copy directly please send me an email. I'm happy to also add any of your friends to the email list. Past issues of *The Walnut* can be downloaded from this page of our web site: <http://tinyurl.com/42fyxrd>

## Mike Boesen

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## President's report

At our August meeting we welcomed Emily Wilford as Guest Speaker. Emily is a Clinical Trials Coordinator at the Clinical Trials Unit at The Canberra Hospital. The unit is involved in research studies investigating multiple areas of medicine including cardiology, gastroenterology, endocrinology, immunology, respiratory and preventative health. Emily's major interest currently is a large primary preventive study called ASPREE (ASpirin PReventing Events in the Elderly). This is a randomised double-blind trial of low dose aspirin being undertaken amongst people aged

70 or more in Australia and the USA. Emily gave a most interesting talk.

She indicated that participants in the study were still being sought. If you would like to volunteer for this study please phone 1800 728 745. Details about ASPREE are



provided on this page of our web site: <http://tinyurl.com/3dktzm5>



*Thanks to Emily after her talk*

For the past 4 years, members of the ACT Legislative Assembly have hosted a street BBQ outside King O'Malley's Pub in Civic as part of the September Prostate Cancer Awareness Month. It is being organised again this year but as I write this we still are to fix the date. We will require some volunteers to hand out the usual brochures and to answer questions about our group's activities. I will have a roster and details about the event at our September meeting.

We still require volunteers for our Awareness Table at the German Car Display on the lawns of Parliament House on Sunday, 22 September and we are still short of a few volunteers for the two-day Murrumbateman Field Days event on 19 and 20 October. Please have a think about both and if you can spare a few hours, put your name down on the roster sheets at the meeting.

At the September meeting each year we are obliged to conduct the Annual General Meeting at which the audited accounts of the Group are presented, the current Committee officially resigns and the Committee persons for the coming year are elected. At the August meeting I called for nominations and some members have responded but at this time there has been no nomination for the position of President. I have indicated, over the past few meetings, that I will not be standing for re-election this year and it is essential that this position is filled. A dedicated group of members have worked hard over the past seven years or so to build up a very active Group and my hope is that this momentum continues. Over this period we have been committed to our two primary objects of providing support and raising awareness making our Group well known amongst the NSW/ACT Chapter for its outstanding work. I would not want to see any reduction in our many activities over the coming years, so if you feel you would assist in the Group management, please nominate for a position on the Committee and, in particular, for that of President.

As this is my last note to members, I want to take the opportunity to personally thank all those who have

given their time over the past almost 6 years of my chairmanship to the activities of the Group. I consider myself fortunate to have led a group of such great people and I am looking forward to a continuation of all that we have achieved over this time. It is my desire that all will play a part in making this happen.

Best wishes and keep well,

**Peter Daley**

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## Continence Aids Payments Scheme (CAPS)

One of our members has drawn attention to the CAPS. This scheme provides up to \$533 pa (in 2013 - indexed) to assist eligible people who have permanent and severe incontinence to meet some of the costs of their incontinence products. Details, guidelines and application forms are available through:

Web site: <http://bladderbowel.gov.au/caps/>  
Phone: 1800 33 00 66  
email: [health@nationalmailing.com.au](mailto:health@nationalmailing.com.au)

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## Recent articles and reports that might be of interest

The following articles that have appeared recently on web sites or other sources may be of interest to some members. The group's Executive has not attempted to evaluate the articles' findings and conclusions or the credentials of the authors. The articles are simply being drawn to your attention so that you can make your own evaluations.

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### Movember funding for research being undertaken into exercise benefits for prostate cancer patients

There is an interesting short video produced by Movember Australia reporting its financial support to work being undertaken by Professor Daniel Galvão of Edith Cowan University in Western Australia. Movember states that: "Working directly with patients in a clinical trial, Professor Galvão and his team have linked the impact of muscle loss and the benefits of exercise for prostate cancer patients. Road-testing an exercise program design to build muscle, the trial has found that patients who maintain or build muscle with regular exercise during and post treatment, are shown to suffer fewer side effects such as reduced mobility, mental wellbeing and sexual function."

The video can be viewed here:  
<http://au.movember.com/news/view/?id=5205>

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### Positive effects of exercise before, during and after treatment for prostate cancer

A recent ABC Health & Wellbeing article by Dyani Lewis dated 8 August 2013 is worth reading. It is entitled *Cycling to chemo: exercise during cancer treatment*. The full article is here:

<http://tinyurl.com/krzvfk5> In part, the article states:

*Many of us are familiar with the notion that exercise reduces your chances of developing a range of cancers. Over the past couple of decades, strong evidence has found physical activity reduces the risk of colon, prostate, lung and gastrointestinal cancer in men, and breast and endometrial cancer in women.*

*It is also known that resuming regular exercise after cancer treatment can improve the long-term prognosis for people who have had cancer.*

*But it's only recently that researchers in the burgeoning field of exercise oncology have started honing in on the benefits of exercise for those currently undergoing cancer treatments, such as chemotherapy, radiotherapy and surgery.*

*The strongest evidence for the benefits of exercise during cancer treatment is for cancer-related fatigue, which is unlike that a healthy person experiences.*

*"It's an unremitting fatigue, and it's not alleviated by rest," explains Dr Catherine Granger, leader of physiotherapy research at Royal Melbourne Hospital and lecturer at the University of Melbourne.*

*This fatigue is caused by a toxic mixture of chemotherapy and radiotherapy, as well as the weakening effects of nausea, vomiting, anaemia and hormonal fluctuations that can result from the treatments.*

*"You'd think that by exercising you'd get tired, and that'd make it worse," says Denehy, "but it's actually the other way around." Resting is understandably an automatic response for many people when the fatigue sets in, but it promotes what Granger describes as a "vicious cycle" of further losses in fitness and strength, and a worsening of symptoms.*

*But a Cochrane systematic review – the gold standard in weighing scientific evidence – concluded exercise is an effective way of reducing cancer-related fatigue both during and after cancer therapy."*

An abstract of the Cochrane review that was undertaken by F Cramp and J Daniel is here:  
<http://tinyurl.com/nyorbx2>

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## **New data about use of finasteride for chemoprevention of prostate cancer**

In a Medscape Urology News web article dated 14 August 2013 by Zosia Chustecka it is stated that

"A major stumbling block to the use of finasteride (and also the similar drug dutasteride) in healthy men for preventing prostate cancer was a finding that emerged from the prevention clinical trials. Although both drugs significantly reduced the risk of being diagnosed with prostate cancer, paradoxically, they also increased the risk of being diagnosed with a high-grade prostate cancer."

Chustecka goes on to report new data, from an 18-year follow-up of men taking part in the Prostate Cancer Prevention Trial (PCPT). An abstract of the August 2013 article reporting the results of that large-scale follow-up study by Ian M Thompson *et al* is here: <http://tinyurl.com/lfbabd7> It concludes that:

"Finasteride reduced the risk of prostate cancer by about one third. High-grade prostate cancer was more common in the finasteride group than in the placebo group, but after 18 years of follow-up, there was no significant between-group difference in the rates of overall survival or survival after the diagnosis of prostate cancer."

The Chustecka article provides an informative background and context. It is here: <http://www.medscape.com/viewarticle/809446>

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## **A further study indicating lack of a relationship between statins and risk of prostate cancer specific mortality**

In an item in the October 2012 issue of the Walnut I cited a study undertaken by Alon Mass *et al* in which they concluded that "Our findings are consistent with the results of the meta-analysis, which indicated that preoperative statin use does not impact the overall risk of biochemical recurrence."

In the August 2013 issue of the Walnut I reported a 13 May 2013 article by Anna Azvolinsky that summarised a study undertaken by Milan S Geybels *et al*. She indicated that the study "...shows that those men who took cholesterol-lowering statins had a lower risk of dying from their prostate cancer Vs men who did not take these medications. The study also found that recurrence and progression were not related to statin use."

A new report by S J Freedland *et al* concluded that "Among men with a negative baseline biopsy and follow-up biopsies largely independent of PSA, statins were not associated with cancer or high-grade cancer." This study is reported in a 2013 article in *Prostate Cancer and Prostatic Disease*. It is based on analysis of data from the large-scale REDUCE study, a 4-year randomized double-blind trial of dutasteride

Vs placebo on PC diagnosis. The Freedland article is here: <http://tinyurl.com/mvv2tto>

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## **Metformin usage related to fewer prostate cancer deaths amongst diabetic men**

In a Medscape Urology News article by Janis Kelly on 8 August 2013 is a report on a retrospective research study undertaken by David Margel *et al*. The study examined the association between cumulative duration of metformin use after PC diagnosis and all-cause and PC-specific mortality in men with diabetes. The Kelly article is here: <http://tinyurl.com/lebtb4u>

An abstract of the research study was reported in the *Journal of Clinical Oncology* and is here: <http://tinyurl.com/mkw58q7> The authors conclude that "Increased cumulative duration of metformin exposure after PC diagnosis was associated with decreases in both all-cause and PC-specific mortality among diabetic men."

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## **Soy protein trial: no reduction in risk of recurrence of prostate cancer found in small double-blind trial**

In a Medscape Urology News article by Fran Lowry on July 10 2013 is a report on a small randomized, double-blind trial comparing daily consumption of a soy protein supplement Vs placebo in 177 men at high risk of recurrence after radical prostatectomy for prostate cancer. The Lowry article is here: <http://www.medscape.com/viewarticle/807609>

The objective of the trial was to determine whether daily consumption of a soy protein isolate supplement for two years reduces the rate of biochemical recurrence of prostate cancer after radical prostatectomy or delays such recurrence.

The study was undertaken by Maarten C Bosland *et al*. An abstract of the research study was reported in the *Journal of the American Medical Association* and is here: <http://tinyurl.com/muf3oz8> The authors conclude that "Daily consumption of a beverage powder supplement containing soy protein isolate for 2 years following radical prostatectomy did not reduce biochemical recurrence of prostate cancer in men at high risk of PSA failure." Note that this is a single study with a small number of subjects and hence making broad generalisations about the value (or lack of value) of soy intake would be inappropriate.

**Mike Boesen**

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## **Notice of 2013 Annual General Meeting**

Members are advised that the Annual General Meeting of the Prostate Cancer Support Group - ACT Region Inc. will be held on Wednesday, 18 September

2013 at the SHOUT Building, Pearce Community Centre, Collet Place Pearce, following the monthly meeting to be held at 7.00pm.

The Business of the meeting shall be:

- a. to confirm the Minutes of the last preceding Annual General Meeting;
- b. to receive from the Committee reports on the activities of the Group during the preceding financial year, including but not limited to:
  - the audited statement of the Group's accounts in respect of the most recently ended financial year of the Group; and
  - a copy of the Auditor's report to the Group in relation to the Group's accounts for that financial year;
- c. to elect the members of the Group's Committee for the coming year;
- d. to appoint the Auditor and determine remuneration for that work; and
- e. to determine the remuneration of any servants of the Group.

**George Kayaba**  
**Secretary**