

# THE WALNUT

#### **APRIL 2020**

#### Newsletter of the Prostate Cancer Support Group—ACT Region

Affiliated with the Prostate Cancer Foundation of Australia (PCFA)
Postal address: PO Box 650, Mawson ACT 2607

https://prostate-cancer-support-act.net





Image courtesy of Vecteezy.com

# President's Message

As part of measures to limit the spread of the Novel Coronavirus (Covid-19), our normal Group meetings and coffee mornings have been suspended until further notice. I know you will appreciate the need for this, particularly since most men with prostate cancer and their families are in the age group most severely affected by the virus and who often have co-morbidities.

We hope to start virtual meetings during this difficult period. In the meantime, anyone who would like to speak to Group members about their situation are encouraged to contact us (see 'Personal Support' on page 7) and we will be only too happy to assist.

John McWilliam

#### Keeping in touch

All normal meetings and coffee mornings have been suspended until further notice, as we play our part in helping to limit the spread of the Novel Coronavirus (COVID-19).

It is important that we keep in contact and so we are planning to hold 'virtual' coffee mornings (see page 3) and meetings using video-conferencing software. Many of you may already be using software, such as *Zoom*, for similar virtual meetings and get-togethers.

We are still available at this time to provide personal support and you are welcome to contact us using the contact information on page 7. If you want to speak to anyone, or you know of someone who would like to speak to us, you are welcome to call us.

We also plan to contact members whom we have not heard from recently to see how you are going.

# Appreciation

The Group recognises and expresses its appreciation for the support provided over the past year by: Harness Racing ACT; TAB Corporation; Holy Family School Gowrie; Paddywack Promotional Products; the Residents' Social Clubs at Isabella Gardens, Isabella Plains and The Grove, Ngunnawal; the ACT Masters Hockey Association; the PCFA; SHOUT staff; and the many individuals who have assisted in our fund-raising activities.

# April 2020 executive committee meeting

The committee met on 1 April 2020 using the video-conferencing software, *Zoom*, for the first time. This worked well.

The committee, among other things:

- agreed to arrange a 'virtual' coffee morning in April and a 'virtual' Group meeting, with a speaker, in May. This will be done using a video-conferencing application, such as Zoom;
- agreed that, during this difficult time with the restrictions imposed by the Government to limit the spread of COVID-19, it is important that we reach out to members whom we have not heard from in a while to see how they are going and to offer our support;
- agreed to progress work on our planned Facebook page to help increase awareness of the Group and the support that is available to men with prostate cancer and their families [Note: the Prostate Cancer Foundation of Australia (PCFA) also has a Facebook page that the public can access];
- noted that the PCFA has greatly increased the support that it is offering to support groups, such as ours;
- received a report on the Group's finances and that we have still to receive details of payment arrangements for the purchase of new bladder scanners from The Canberra Hospital;
- noted that we have still to receive an offer of support from members who may be willing to coordinate the publication of the Group's monthly newsletter; and
- noted that a second-year nursing student at the University of Canberra is doing an assignment on prostate health and has asked for information about the Group and the support we provide as part of her research.

## Coronavirus and cancer

The Prostate Cancer Foundation of Australia has issued a consumer advisory on coronavirus and cancer for prostate cancer patients and survivors in order to help safeguard patients and the community against spread of the disease.

The PCFA's latest advisory on Coronavirus and cancer can be accessed using this link.

If you have questions about prostate cancer and what to do in relation to Coronavirus and other infectious illnesses, please call PCFA on 1800 22 00 99, email <a href="mailto:enquiries@pcfa.org.au">enquiries@pcfa.org.au</a> or go to <a href="mailto:www.pcfa.org.au">www.pcfa.org.au</a>.

You can stay up-to-date on the Coronavirus by:

- accessing the Australian Department of Health's Coronavirus website page;
- downloading the Government's Coronavirus app. On your tablet or phone, download the 'Coronavirus Australia' government app in the Apple App Store or Google Play;
- use the official Australian Government chatbot, and type in #COVID;
- on your phone join the WhatsApp channel message +61 400 253 787, or go to <a href="http://aus.gov.au/whatsapp">http://aus.gov.au/whatsapp</a> and send your mobile number, or for a QR code go to <a href="https://web.whatsapp.com/">https://web.whatsapp.com/</a>.

# Virtual coffee morning

Would you like to participate in a 'virtual' coffee morning at 10 am on Tuesday 14 April? If you would like to take part, please email John McWilliam at <a href="mailto:president@prostate-cancer-support-act.net">president@prostate-cancer-support-act.net</a> and we will send you an invitation and instructions on what to do.

If you have any questions/issues you would like to discuss at the meeting, please also indicate what these are and we will try to cover them.

# **New Head of Community Services at PCFA**

PCFA has appointed a new head of Community Services, Chris McNamara. Chris has worked as a Prostate Cancer Specialist Nurse for 10 years and has a good understanding of community needs.

We welcome Chris and look forward to working closely with him in the future.

The Walnut, April 2020



# Stay up-to-date by joining the PCFA Online Community

The PCFA Online Community is open to anyone who has been impacted by prostate cancer to share their experiences and connect with others. Through the Research Blog, PCFA Online Community members can also learn more about the latest prostate cancer research developments and findings.

The Online Community Research Blog has recent articles on:

- A web-based prediction tool to help with decisions between treatment and management options for localised prostate cancer. Read more.
- Online support groups and online communities for prostate cancer. <u>Read</u> more.
- Male firefighters have an increased risk of prostate cancer. <u>Read more</u>.

It is free and easy to become a member of the PCFA Online Community. You can sign up at:

http://onlinecommunity.pcfa.org.au.

#### Volunteer needed

#### **Newsletter coordinator**

We are still seeking someone to coordinate the production of the Group's monthly newsletter, *The Walnut*.

Members of the committee will provide guidance on what is required and inputs. If necessary, the Group can also arrange for the compilation of the newsletter to be outsourced, under the direction of the newsletter coordinator.

The person we are seeking would have good writing (for example, to edit information that is provided) and coordination skills (bringing everything together).

If you are able to assist or would like more information, please click the button below:



# Borrowing items from the library

You can borrow items from the Group's library. There is a wide range of materials, from books to videos. Those who are interested in borrowing items from the library or finding out more about our collection can contact U.N. Bhati, email:

librarian@prostate-cancer-support-act.net

# Articles and reports of interest

The following articles which have appeared recently on web sites or other sources may be of interest to members. Any opinions or conclusions expressed are those of the authors. See Disclaimer below.

## Guidelines for radiation therapy with COVID-19 urge less treatment

New guidelines for radiation oncologists suggest that, during the COVID-19 pandemic, interactions with healthcare professionals should be done remotely where possible, and treatments should be avoided or delayed to minimise strains on the system and risks to the patient.

The guidelines, 'Prostate Cancer Radiotherapy Recommendations in Response to COVID-19', were published in the journal Advances in Radiation Oncology and were developed by a team of oncologists in the US and UK.

Radiation therapy is a common part of prostate cancer treatment. However, it requires repeat visits to a hospital, which could cause undue risks under the ongoing COVID-19 outbreak.

The framework developed by the team of radiation oncologists has been dubbed RADS — RADS for Remote visits and Avoid, Delay, and Shorten radiotherapy. The recommendations are:

 REMOTE visits should be used in place of in-person visits when patients don't need to be seen physically to determine a course of treatment. The added value of a physical exam is usually outweighed by the risk of COVID-19 exposure.

- AVOID radiation when evidence suggests it would be of little or no benefit to a patient. Multiple clinical trials have shown favourable outcomes with a watchful approach to monitoring patients with lowto intermediate-risk cancers.
- DELAY treatment for as long as possible, depending on each patient's individual circumstances. If a patient's disease is progressing rapidly, the benefits of treatment must be weighed against COVID-19 exposure and other potential risk factors, such as other chronic conditions the patient may already have.
- SHORTEN radiotherapy treatments to the shortest number that been shown to be safe and effective. This can help limit the number of visits each patient will need to make.

Of course recommendations in the COVID-19 environment are changing rapidly and these recommendations may continue to evolve.

Read more.

# Urine biomarkers can be used to develop test for prostate cancer

Patients with prostate cancer exhibit changes in the levels of some urinary molecules compared with people with benign prostate diseases and healthy individuals, a study published in the journal *Nature* found, suggesting that these changes could be used to develop a highly sensitive, non-invasive diagnostic test for the condition.

Measuring the levels of prostate specific antigen (PSA) in blood has been a mainstay in prostate cancer screening and diagnosis for three decades, but the test fails to identify many people with cancer, and incorrectly diagnoses many healthy men with prostate cancer. Moreover, PSA levels are not good at distinguishing slow-growing cancers from aggressive ones.

Cancer cells exhibit an abnormal metabolism that helps them proliferate and survive, the remnants of which (metabolites) are secreted in urine. Scientists believe that measuring metabolites in urine can be a good approach for the early identification of cancer in a non-invasive, accessible manner.

This was a 'proof of principle' study for the urine test, and it must be validated in additional, larger studies before it is ready for clinical use. However, its results are promising.

"We discovered cancer-specific changes in urinary RNAs and metabolites that, if confirmed in a larger, separate group of patients, will allow us to develop a urinary test for prostate cancer in the future," says Bongyong Lee, Ph.D., the study's first author and a senior scientist at the Cancer & Blood Disorders Institute.

Read more.

## PCFA funded study could transform the management of patients with aggressive prostate cancer

A medical imaging technique known as PSMA PET/CT that provides detailed body scans while detecting levels of a molecule associated with prostate cancer could help doctors better tailor treatments for their patients, by determining the extent of disease spread at the time of diagnosis, a randomised controlled trial involving 300 patients in Australia published in *The Lancet* journal has found.

The approach combines two imaging technologies — positron emission tomography (PET) and computed tomography (CT) — and is almost one third more accurate than standard imaging at pinpointing the spread of prostate cancer throughout the body. PSMA PET/CT proved to be 92% accurate compared with only 65% accuracy with standard imaging.

Prostate cancer is commonly treated by surgery to remove the prostate or intensive radiotherapy to target the tumour. If there is a high risk the cancer may have spread to other parts of the body, patients may be offered medical imaging — typically CT and bone scans — to help doctors determine if additional treatments are needed.

CEO of Prostate Cancer Foundation of Australia, Professor Jeff Dunn AO, hailed the study a game-changer. "These findings will transform the way we manage and treat prostate cancer, providing men around the world with much greater hope of combatting the disease effectively. Today we are one step closer to our vision of a future where no man dies of prostate cancer – standing on the shoulders of research leaders."

Read more.

# **Personal support**

For general information, please call SHOUT (Self Help Organisations United Together) during normal office hours on (02) 6290 1984, and their staff will arrange for someone to contact you.

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

President: John McWilliam Phone: 0416 008 299

Email: president@prostate-cancer-support-act.net

Secretary: David Hennessy Phone: (02) 6154 4274

Email: secretary@prostate-cancer-support-act.net

#### From the editor

If you are aware of news, products, publications, web sites, services or events that may be of interest to members of the group, we would like to be informed of them. If you have received this newsletter indirectly and would like to be emailed a copy direct, or if you would like to add any of your friends or carers to our distribution list, or if you no longer wish to receive copies of the newsletter, please send an email to: <a href="mailto:president@prostate-cancer-support-act.net">president@prostate-cancer-support-act.net</a>.

#### 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 does 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 Group. Any recommendations made in such materials may not be applicable in your 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 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.

The Walnut, April 2020 Page 8

# A bit of light relief





After 2 weeks of quarantine with her husband, Gertrude decided to knit him a scarf..



Quarantine week 4: I cut it myself

