

DECEMBER, 2004

# THE WALNUT



NEWSLETTER OF THE PROSTATE CANCER ASSOCIATION OTTAWA  
P.O. BOX 23122, OTTAWA, ON K2A 4E2; (613) 828-0762; [www.ncf.ca/pca](http://www.ncf.ca/pca)

## MESSAGE FROM THE CHAIR



At the end of November, the Ottawa Regional Cancer Centre Foundation (ORCCF) hosted its annual Recognition Breakfast for Special Event Organizers and Sponsors. Michel de Champlain, President of the ORCCF Board, said this was the opportunity for the Directors and staff of the Foundation to express their appreciation to all those who gave so generously of time, resources, creativity, and energy in raising a record \$766,193.00 in 2004. Bill McColm, your Treasurer, his wife Betty, and I were pleased to be present.

The ORCCF is still a young foundation that has been called one of the best kept secrets in Ottawa. It is an independent charitable organization that strives to heighten public awareness and increase funding support for the vital services provided by The Ottawa Hospital Regional Cancer Centre (TOHRCC). Bonnie Johnson, Executive Director, cited 51 events she attended this past year that contributed significantly to the results. The funds raised are distributed to the TOHRCC for essential pilot and feasibility studies on all cancers. Where proven and substantiated, these studies are extended to full scale investigation with significant funding from outside sources with the result that 50% of patients walk out cured, as stated by Michael W. McBurney, Director of Research.

A recent province-wide budget review has shown that the TOHRCC boasts the lowest cost per patient in Ontario. Capacity remains a concern that will become critical unless funding can support both current expansion plans and meeting other needs of the regional cancer centre. More than doubling the number of radiation bunkers from the current nine is one objective that will be facilitated by the recently launched **Courage Campaign** which has a goal to raise \$20 million that is intended to bring the Ottawa centre to a pre-eminent status in Canada – and the world.

This past year saw a dramatic increase in the number of Special Events, accounting for close to 48% of the Foundation's total revenue. High on the list were the *Motorcycle Ride for Dad*, and our *Do It for Dad Run and Family Walk*, a joint partnership between PCAO and CS CO-OP for which we were recognized at the breakfast. PCAO is indebted to the Foundation for needed support when we first approached it with this dream of holding an annual event to raise both awareness and research funds for prostate cancer. From that early partnership, *Do It for Dad* became a reality and continues to grow with the support of personally-dedicated professionals. We certainly thank the Foundation for presenting an award that recognizes "outstanding passion and dedication to the ORCCF and the patients we serve" and we respond with our sincere thanks to the Foundation and Centre for their dedication in assisting those in our community who require expert cancer care and treatment. We share that commitment in ensuring that cancer patients and families receive the best care in the world.

I want to wish them and all our members and supporters a Merry Christmas or Happy Seasonal Celebration and, for all, a very Happy and Healthy New Year.

John Dugan

### THURSDAY, DECEMBER 16

6:15 P.M. ORIENTATION FOR NEW PATIENTS

7:00 P.M. ASSOCIATION BUSINESS.

7:15 P.M.: JANET PODLESKI, CO-AUTHOR OF TWO GREAT COOKBOOKS, LOONEY SPOONS AND CRAZY PLATES, WILL OFFER UP HER IDEAS FOR NUTRITIONAL MEALS WITH GOOD TASTE QUALITIES. HAVE YOUR SPOUSE, GIRL FRIEND OR CAREGIVER BRING YOU TO THIS MEETING ... ☺



KEEP YOUR WITS ABOUT YOU – THERE WILL BE A QUIZ WITH PRIZES AT THE END

WE MEET ON THE THIRD THURSDAY OF EACH MONTH AT ST. STEPHEN'S ANGLICAN CHURCH, 930 WATSON STREET. FOLLOW THE QUEENSWAY TO THE PINECREST EXIT AND PROCEED NORTH, PAST THE TRAFFIC LIGHTS, TO ST. STEPHEN'S STREET ON THE LEFT.

## PROSTATE CANCER ASSOCIATION OTTAWA

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**Chair** John Dugan

**Vice Chair** Vacant

**Vice Chair (DIFD)** Ted Johnston

**Treasurer** Bill McColm

**Secretary** Eric Meek

### Committee Chairs

Member Services Vacant

Program David Brittain

CPCN Liaison Fred Hostetter

Church Liaison Bob McInnis

Setup Bob Blackadar

Orientation **Stewart Given**, Ken Cowan, Milan

Gregor, Ron Marsland, Harvey Nuelle,

John Webster

Hand-in-Hand Vacant

Publicity and Awareness Ted Johnston

Prostate Awareness Week Vacant

Newsletter Editor Ted Johnston

Newsletter Distribution Phil O'Hara

### Members at Large

Ken McClymont Jacques Mousseau

John Trant Herman van den Bergen

*PCAO is a member of the CANADIAN  
PROSTATE CANCER NETWORK:*

[www.cpcn.org](http://www.cpcn.org)

*The Prostate Cancer Association of Ottawa does not assume responsibility or liability for the contents or opinions expressed in this newsletter. The views or opinions expressed are solely for the information of our members and are not intended for self - diagnosis or as an alternative to medical advice and care.*

**The PCAO is a volunteer organization of prostate cancer survivors and caregivers. Our purpose is to support newly-diagnosed, current and continuing patients and their caregivers.**

### PCAO MISSION STATEMENT

We provide information on prostate cancer to those in need, gathered from a variety of sources. We participate in events that provide a venue for promoting awareness of prostate cancer through our informed member interaction at public gatherings or as speakers. Raising funds for prostate cancer research is a continuing challenge. We collaborate with local organizations such as the Ottawa Regional Cancer Centre, Canadian Cancer Society, and urologists and oncologists, as key sources for information.

## ASSOCIATION BUSINESS

### *By Eric Meek, Secretary-designate*

The Steering Committee met at St. Stephen's Church, November 25, 2004. Present: Messrs. John Dugan (Chair), David Brittain, Stephen Given, Fred Hostetter, Ted Johnston, Bill McColm Robert McInnis, Paul Rowe and Eric Meek. Paul Rowe, who is starting a francophone Prostate Cancer support group in Gatineau, was welcomed as an observer.

**Services:** At the **Christmas meeting**, December 16, **Janet Podleski**, the author of *Crazy Plates* will be guest speaker describing recipes and nutrition helpful to good health. The Dried Prostate Award may be presented.

**Web site maintenance** and design are in the capable hands of Wilfred Gilchrist and David Baker; improvements are anticipated for the future. Stewart Given, mentor coordinator, reported that starting **mentoring sessions** at 6:15 pm has made it possible for both the new members and the mentors to join in the main meeting. The Committee agreed this should continue.

**Publicity and Awareness:** **BODYWORK**, the City of Ottawa Public Health booklet is ready for publication and will include the PCAO website and telephone number. Eric Meek and Bill McColm, having attended the AGM of the Ottawa Regional Cancer Center Foundation, reported on financial issues and the amount of research and activities being carried out related to prostate cancer. We are pleased to collaborate with **emerging support groups** in Almonte, Brockville and Gatineau. The committee confirmed that the Association should bear the cost of printing ***The Walnut*** while searching for a sponsor.

**Outreach activities** continue to be held throughout the community. In the past month: Ron Marsland undertook two presentations at Immaculata High School on prostate and testicular cancer; Ron Marsland., Arland Benn and Ted Johnston were at Citizenship and Immigration; and, David Brittain spoke to the Navan Women's Institute.

**Treasurer:** Bill McColm reported \$15,405 in the chequing account, \$1,422 in the trust account (Nevada related), and \$55,000 invested. The committee expressed gratitude to all those who renewed their memberships, noting that the paid up 2004/2005 **membership** is expected to be over 300 as more renewals are received. It was agreed that the 2005/2006 membership drive would commence with a letter to the membership in May 2005..

**Secretary:** Eric Meek reported that the mail, telephone calls and e-mail activity have picked up in the fall. The majority of the mail has been to membership renewals.

**Special Events:** The **2005 Do It for Dad** event planning is underway and the membership will be kept posted of progress. The committee agreed to pay the Prostate Gurus entry fee of \$400 for the Team Challenge in *Do It for Dad*. As a result of the Prostate Gurus **tour of the Ottawa Regional Cancer Center** (ORCC), arrangements have been made for other PCAO members to tour on February 16 and/or March 2 (see Page 8).

**Other:** The Steering Committee has formed a committee to review improvements on the sound system of St. Stephen's Church. The committee agreed that the sound quality of the system tested at the November meeting was excellent but noted with concern that total cost of the system of \$4,000.

**The next Steering Committee meeting will be at the call of the Chairman.**

**Attendance is always open to all PCAO members..**

Members are reminded that contributions to the St. Stephen's food bank are welcomed and appreciated. Please bring one or more items of non-perishable food to the next meeting you attend as a contribution to our host body. You'll be glad you did.

## **PCa – It can recur**

# PSA RISING? POST-TREATMENT OPTIONS

Starting from the premise that prostate cancer can recur, Dr. Choan E delivered an informative November lecture on present methods to deal with its return.

The Radiation Oncologist, based at The Ottawa Hospital Regional Cancer Centre, opened by noting that, following diagnosis and treatment (by any available method), there is a disease-free interval that may last to the end of one's natural life, or may be marked by a rise in PSA and further treatment for progressive disease before death might occur. As already known, even with recurrence, patients may succumb to other causes before the prostate cancer has its way. (Missing from his opening remarks was an indication of the rate of recurrence from any and all forms of treatment.)

The primary indicator of recurrence after treatment is a rise in Prostate Specific Antigen (PSA). "While there is some controversy as to what is an acceptable level of PSA after a prostatectomy," said Dr. E, "Most clinicians feel that a detectable PSA means there is residual disease." After radiotherapy, there is no absolute value to indicate recurrence but the consensus is that "three consecutive rises over six months equals recurrence".

For the man who has a rising PSA following prostatectomy, salvage radiation is possible if the PSA is less than 2, had been undetectable following surgery and has risen slowly. For a radiotherapy patient with a rising PSA, removal of the prostate, bladder and rectum is the surgical option with significant side effects. Other post-radiation treatments are still considered experimental, although hormonal therapy is being extensively tested in clinical trials. Other treatments, which may also apply to first level approaches, include cryotherapy, thermal ablation, microwave therapy and brachytherapy.

Hormonal therapy is essentially blocking the production of androgens, principally testosterone. Surgical or chemical (Lupron, Zoladex, Suprefact) castration combined with oral anti-androgens (Casodex, Euflex, Anandron) will cause regression of the cancer, the duration of which will depend on tumour factors and the extent of the disease, i.e. whether it has progressed to tissues or bones. Side effects include decreased sex drive and performance, hot flushes, night sweats, some physical changes over time, and osteoporosis. Should the cancer overcome this therapy, clinicians will try different anti-androgen drugs, steroids and other emerging medicines.

Dr. E drew attention to a recent study that has shown for terminal prostate cancer patients, the use of Taxotere will prolong survival for a few months. This could replace the present standard chemotherapy which uses Mitoxantrone and Prednisone. Another development is newer technology expected to be under trial at The Ottawa Hospital Regional Cancer Centre in the spring of 2005: Tomotherapy which combines a CAT scan, radiation and x-ray, allowing clinicians to modulate the beam as it travels around the patient and to give higher dosages without affecting surrounding tissues.

The Q&A following his presentation addressed many individual concerns which were shared by various audience members.

**Members can review Dr. E's Power Point Presentation now posted on the PCAO website at [www.ncf.ca/pca](http://www.ncf.ca/pca). This is a 'first' for the website. It is a 3MB file to download and, because of this size, it will only remain posted until January 15, 2005.**

**Post Script to October's Meeting: The Canadian Continence Foundation publishes a newsletter, *The Informer*, has a website [www.continence-fdn.ca](http://www.continence-fdn.ca), and a toll-free number 1-800-265-9575.**

The Thursday meeting times have been slightly changed to accommodate the interests of the newly-diagnosed. Mentoring sessions for newcomers will now begin at 6:15 pm so that both they and the mentors may be able to hear the guest speaker. Church doors will be open at 6:00 p.m.

The main meeting will begin, as usual, at approximately 7:00 p.m. for the conduct of Association business, and the speaker will be scheduled for 7:30.

THE OTTAWA REGIONAL CANCER CENTRE FOUNDATION ANNUAL TELETION  
TAKES PLACE ON SUNDAY JANUARY 16 AT ST. LAURENT CENTRE AND  
BROADCAST ON THE NEW RO – CABLE 6 IN OTTAWA.

## NEWS TO USE OR JUST PERUSE

**DRUG IMPROVES SURVIVAL RATE FOR PROSTATE CANCER:** In September, a Canadian-led international study reported on clinical trials that indicate chemotherapy might be a viable means of treating prostate cancer. The Aventis-sponsored study showed that: "When given with prednisone, treatment with docetaxel every three weeks led to superior survival and improved rates of response in terms of pain, serum PSA level, and quality of life, as compared with Mitoxantrone plus prednisone." It was formally reported in the October 7 *New England Journal of Medicine*. (A copy of the report will be available for viewing at the December PCAO meeting.)

The present results are of primary interest to end-stage patients. Dr. Ian Tannock, oncologist at Princess Margaret Hospital in Toronto and the lead researcher said about the results: "For the first time, there is a drug that can have a small but definite effect to improve survival in patients with advanced prostate cancer that has spread to the bone and other parts of the body and become resistant to hormonal treatment.." On the horizon however, is the possibility it will become helpful at earlier stages. Dr. Andrew Loblaw, radiation oncologist at Sunnybrook and Women's Health Sciences Centre, noted that "This is the first randomized study to show that any chemotherapy agent actually improves survival in men with prostate cancer."

**FORTUNE AND FORBES HIGHLIGHT ADVANCES:** Two major American publications have recently visited the issue of prostate cancer. *Forbes* of November 1 takes an extensive look at "a research revolution...yielding a potent new arsenal of weapons to quell this killer.", while *Fortune* magazine profiles the vitally important economic contribution that American financier Michael Milken has made to research into prostate cancer in the United States. *Forbes* takes note of Milken's initial commitment of \$25 million in 1993 for prostate cancer research in describing advances made with new drugs, new surgery techniques, radiation, and genetic research. The *Fortune* article, by Cora Daniels, is titled "The Man Who Changed Medicine" and chronicles the paths of Milken's research grants that have been so effective in stimulating even greater investments in the U.S. during the last ten years. Find out more about Milken's Cancer Prostate Foundation at [www.prostatecancerfoundation.org](http://www.prostatecancerfoundation.org).

**DRUGS OR VITAMINS:** Ludwick Papaurelis draws attention to the newsletter, *PROSTATE FORUM*, Volume 8 Number 9 in which "I was particularly interested in Dr. Myer's article "**Keeping Prostate Cancer Dormant**". The article was accompanied by a list of some drugs or nutritional supplements that show promise in this regard. Dr. Myers, who publishes the US-based newsletter, told readers: "... all intermittent treatment approaches benefit from finding better means of keeping the cancer cells inactive. There's actually a growing list of drugs that may be helpful. In addition to drugs that block new blood vessel formation, anything that slows or arrests the growth of prostate cancer might well prolong the period of time patients remain off toxic treatments. We call these drugs "candidates" rather than "proven treatments" because, in every case, we lack the kind of randomized controlled trials required for true scientific proof."

Some of the drugs and nutritional supplements that are relevant to his views are Proscar or Avodart, Calcitriol, Celebrex, Thalidomide, Atacand, Leukine, Zometa or Aredia., Atrasenten, Mediterranean Diet, Vitamin E, Lycopene, Soy Isoflavones, Fish Omega-3 Fatty Acids, and Selenium. The merits of taking Vitamin E have been questioned and Ludwick will have something to report in a future issue.

Other helpful information in the issue includes these titles: *Intermittent Hormonal Therapy Revisited*; *Red Wine & Cardiovascular Health*; *The Bottom Line: Red Wine*; and, *Product Focus: King Oscar Sardines*. A subscription to this newsletter, can be found online at [www.prostateforum.com](http://www.prostateforum.com), or you can order a subscription by phone at 1-800-305-2432.

If you have concerns about taking vitamins, Ludwick suggests seeing a recent research report from the Linus Pauling Institute entitled "**What to Look for in Multivitamin Supplements**" which can be viewed at <http://lpi.oregonstate.edu/f-w03/multi.html>.

The Ninon Bourque Patient Resource Library at the General Site of the Cancer Centre and the Consumer Health Library on D-1 at the Civic Campus has longer hours to serve you, Monday – Friday from 8:30am –12:30pm and 1:00-3:30pm.



# NEW EQUIPMENT, DRUGS, AND TECHNIQUES UNVEILED FOR FUTURE USE LOCALLY

**DAVID BRITTAIN, PCAO Program Chair, reports on attending a meeting of Ottawa urologists, oncologists, and support staff in October where he learned much on coming changes and new techniques:**

This is an annual meeting where the Ottawa community comes together to share and exchange information and learn about what's coming down the road. The participants came from the ORCC, the hospitals, clinics and private practices and mingled with drug and equipment suppliers.

The primary guest speaker, Dr Kim Chi from the Vancouver Prostate Centre., spoke of the potential of chemotherapy for hormone resistant prostate cancer. His research has shown that there may be benefits by doing the chemotherapy along with the hormones rather than waiting for the cancer to become resistant. A second presentation covered refinements in hormone therapy. A second presentation by Dr Chi covered a study on the benefits of Docetaxel versus Mitoxantrone. Mitoxantrone plus Prednisone reduces pain and improves quality of life in men with advanced hormone resistant cancer. However, Docetaxel plus Prednisone when given every three weeks has superior survival time and better response for pain and PSA levels

A new PET-CT scan was described by Dr. Libni Eapen who said it will have the capability to allow radiologists to have a 3D picture of the tumour that also shows its metabolic rate (i.e., growth rate). It should be available at the ORCC this month. Dr Sean Malone talked about the ORCC's new helical tomotherapy for prostate cancer that will provide improvements in conformal radiation by shaping and varying the strength of the radiation to fit the size and position of the tumour. It is hoped to have it fully operational by August of 2005. (This was briefly described at our November meeting by Dr. E.)

Drs. Malone, Choan E, Chris Morash and Ilias Cagiannos engaged in a lively panel debate over whether there is a benefit for high risk prostate cancer patients to undergo surgery. In the end, it was agreed that there is a sub-section of patients who would benefit from surgery before radiation and hormone therapy.

Drs. Roanne Segal and C. Canil spoke about their work on using bisphosphonates to reduce pain for those with highly advanced prostate cancer. To date, their study indicated that further review is necessary

We can expect to hear more of these developments, hopefully at PCAO meetings, in the coming months.

## GROUPS FORM IN ALMONTE, BROCKVILLE, AND GATINEAU

There are three new support groups in the region that are of particular interest to prostate cancer patients. In **Almonte**, the group welcomes all cancer patients. Ordinarily, it meets on the fourth Tuesday of each month at the United Church. More details on the group's activities may be obtained from Margaret Gale in Almonte at 256-1041.

There is now a baker's dozen of prostate cancer survivors attending the **Brockville**-based support group, reports Art Brooks. "We started in the spring of this year and are pleased to have had this response so far," he said. The group draws its membership from Lanark, Lennox and Addington, and Frontenac townships. They meet usually on the last Tuesday of each month at 7:00 p.m. at the Salvation Army Citadel Hall on First Avenue in Brockville. For more information, please call Art Brooks in Perth at (613) 267-1256.

The third group, being formed in **Gatineau**, plans to provide support specifically for francophone men. Going under the name 'Entraide Cancer Inc.' details about meeting times and places may be obtained from Paul Rower at (819) 243-8013 or Claire Plouffe (819) 920-0808.

John Dugan, chair of PCAO, expressed his pleasure at the creation of these new groups and pledged support for their efforts. "We welcome them to share in our resources and to join in the continuing efforts to make men aware of this threat to their health and to help those newly-diagnosed deal with the issues before them."

The reef knot lapel pin is the symbol for prostate cancer survivors and their supporters. The four ends of the knot represent the interdependence, strength and unity shared among patients, survivors, their families, supporters and the links among support groups nationally.

You can obtain your pin at any Association meeting for only \$5.00.



# BEER AND WINE CAN MAKE LIFE FINE

The Prostate GURUs – which is short for “Guys Running” – meet socially on the first Wednesday of each month at Patty’s Pub, 1186 Bank Street at about 7:30 p.m. The GURUs welcome PCAO members both socially and athletically. If you would like to walk, jog, run or just chat with them, call Wilfred at 731-9722 or e-mail him at [wilfredg001@hotmail.com](mailto:wilfredg001@hotmail.com). (Note: this is the correct e-mail address – it was incorrect in November.)



When questioned by John Dugan about the choice of location of meetings and drinking beer, Chief GURU, Wilfred Gilchrist, replied:

“Why John, I thought you knew that beer has many health benefits. Beer is nutritious if consumed in moderation, fat free and cholesterol free, it has a relaxing effect on the body thereby reducing stress, it can help you sleep better, it helps prevent heart disease and improves the blood circulation. A study has shown that two drinks of beer a day for men will reduce your chances of strokes, heart, and vascular disease. A runners’ health study has shown that running distances and alcohol intake contribute independently and additively to the production of HDL-cholesterol (the good kind) concentration in runners. Other studies show that it may help control obesity, prevent dementia, reduce risk of cataracts, good for your brain, prevent Alzheimer’s, and it is good for vegetarians. The evidence is just overwhelming.” *(Editor’s note: You are not obliged to partake of the benefits of beer but may drink other beverages if you want simply to enjoy the social camaraderie.)*

A glass of red wine a day appears to cut the risk of prostate cancer, according to researchers from the Fred Hutchinson Cancer Research Centre in Seattle. The positive effect of the wine seems strongest against the most aggressive forms of the disease. Researchers interviewed 753 newly diagnosed prostate cancer patients, ranging in age from 40 to 64, as well as 703 healthy controls. They reported that the risk of prostate cancer decreased 6% for every glass of red wine consumed per week. That means that men who consumed four or more four-ounce glasses of red wine per week, had a 60% lower incidence of the more aggressive types of prostate cancer. The more clinically aggressive prostate cancer is where the strongest reduction in risk was observed. In the *International Journal of Cancer*, the investigators suggested the antioxidant resveratrol might account for the effect. They said they found no consistent risk reduction with white wine.



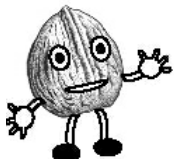
## PCAO PICKS OFF A PRIZE AND SHARES IN A SECOND

PCAO Chair John Dugan and Treasurer Bill McColm attended in late November the Special Events Breakfast of the Ottawa Regional Cancer Centre where they received more than a muffin and a coffee. The breakfast recognizes and honours individuals and organizations that have contributed to the Foundation each year. PCAO received a plaque citing the organization “for outstanding passion and dedication to the Ottawa Regional Cancer Centre Foundation and the patients we serve.” PCAO shared with its partner, CS CO-OP, a second plaque for the annual *Do It for Dad Family Run and Walk*.



The Canadian Prostate Cancer Network (CPCN) provides support to all local support groups through the maintenance of a comprehensive website, a quarterly newspaper, video and audio presentations, and general information materials. CPCN is currently presided over by Bob Shiell of Calgary and representatives of support groups from all across the country. Although organized in the mid 90’s, the first national conference of CPCN was held last August in Calgary (see the September *The Walnut*) and the second conference is now being planned for Toronto in the summer of 2005.

The website has several presentations made at the Calgary conference, either in video form or Power Point presentations. The website also regularly updates reporting from around the world on prostate cancer and provides links to other sources of information as well as links to the newsletters of many Canadian support groups, including PCAO. You can keep up to date on CPCN activity by visiting the website at [www.cpcn.org](http://www.cpcn.org).



HI! I'm Wally the Walnut, and I became a sort of mascot of the Prostate Cancer Association Ottawa after you named your newsletter in my honour. You did that because I look like a prostate gland in size and shape but NOT in texture. To be sure I understand the

distinguished group that I represent I did some research and found the following:

The Prostate Cancer Association Ottawa was formed in 1992. Each year it holds **12 monthly meetings** which are addressed by an expert in the field of prostate cancer research, treatment or support, or are open discussion forums for members to exchange information and views. Each meeting attracts an **average of 50 persons**. The Association publishes a **monthly newsletter** (except for August) and maintains a **website** as the principal means of communication with the membership. There are approximately **300 member-donors** in 2004. The Association is a registered charitable organization with a constitution. The elected executive is composed of a President, Vice-President, Treasurer, and Secretary, supported by other volunteers composing the steering committee. This committee meets monthly to conduct the association business. Reports of its activities are carried to the membership in the monthly newsletter and the minutes are available for viewing on request.

For newly diagnosed patients there is a special mentoring session held prior to the general meeting. This is led by competent volunteers who explain the supportive role of the Association and provide guidance on what the newly-diagnosed are facing in terms of self-education, decision-making and treatment options. Currently, the Association provides each person with the CPCN Prostate Cancer booklet and Dr. Larry Goldenberg's book, Prostate Cancer – All you need to know to take an active part in your treatment, along with pamphlets from the Canadian Cancer Society and other agencies.

In addition to conducting awareness with local groups and associations (approximately 18 events each year), the PCAO is a partner in the annual **CS CO-OP Do It for Dad Family Run and Walk** which raises each year well over \$100,000 for The Ottawa Hospital Regional Cancer Centre, and collaborates with the Canadian Cancer Society to mark **Prostate Cancer Awareness Week** each September. As well, the Association is a participant in the annual **telethon of The Ottawa Hospital Regional Cancer Centre**. And, PCAO is a founding member of the national support organization, the **Canadian Prostate Cancer Network**.

There is much more I found out about the group and the volunteers who have made it such an effective and respected organization in Ottawa. I hope that more of you will make your own investigation and be persuaded to continue the good work. I am proud to be with you.

### CCS HAS HANDY ADVICE ON DIET AND ACTIVITY

The Canadian Cancer Society has recently published two new booklets related to diet: Good Nutrition – a guide for people with cancer and Eat Well, Be Active – what you can do. In addition to the advice on nutrition needs when you have cancer and managing side effects during treatment, the former includes recipes for such items as milkshakes, frosties, oatmeal, and soup. The other booklet is more focussed on reducing the risk of cancer through “Eating well, being active and staying at a healthy weight” but the advice can equally apply to those under treatment or in the post-treatment stage.

The booklets are available at the Cancer Centre or wherever CCS pamphlets are displayed.

**CLEAN HANDS ARE HEALTHY HANDS – MAKE SURE YOU WASH THEM REGULARLY, ESPECIALLY BEFORE HANDLING FOOD.**

## WANT TO SEE THE ORCC FROM TOP TO BOTTOM?

Peter Jones, one of the Prostate Gurus who recently toured the Ottawa Regional Cancer Centre, told the November PCAO meeting: "The tour of the Cancer Centre is worthwhile. You are first taken by guides through the chemotherapy and radiation facilities, then into the centre of the "pods" where the doctors prepare for patient visits. The highlight of the tour is being taken around the research area where over 100 people are doing research for cures to cancer under the direction of 12 senior scientists. We were told that two projects are specific to prostate cancer, started after funds were made available from *Do It for Dad* and *Motorcycle Ride for Dad*. There are other projects that apply generally to prostate cancer. The results are truly amazing and give us cause for hope."

The Ottawa Regional Cancer Centre Foundation has offered two dates for PCAO members, spouses or others to tour the facilities in the New Year. Usually, the tours are in groups of eight and the Foundation is ready to accommodate more than one group at a time. Each tour – at the General site on Smyth Road - takes about 90 minutes and includes a welcome from Dr. Hartley Stern, CEO of the Cancer Centre, a visit to the research facilities and a brief slide show.

The present invitation is for Wednesday, February 16 and/or Wednesday, March 2, starting at 1:00 p.m. If you would like to attend, please call our Voice Mail (828-0762), or send an e-mail to [pca@ncf.ca](mailto:pca@ncf.ca) (Subject: TOHRCC Tour), or complete the following form and bring it to the next meeting.

*YES, I WOULD LIKE TO VISIT THE OTTAWA HOSPITAL REGIONAL CANCER CENTRE (SMYTH ROAD) AT 1:00 P.M. ON:*

*(CIRCLE ONE)*                      *WEDNESDAY FEBRUARY 16*

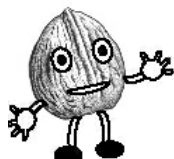
*WEDNESDAY MARCH 2*

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL \_\_\_\_\_

I WILL BE ACCOMPANIED BY \_\_\_\_\_



## TELL A FRIEND, A YOUNG FRIEND

The Foundation for Cancer Research and Education (FCRE), based in Virginia, has initiated a "Tell a Friend" campaign that is simple, to the point and can be easily picked up by every one of us. The Foundation is asking every man with prostate cancer to **tell one friend under thirty-five** about the links between diet, lifestyle, and prostate cancer. And, to make it easy, this is the

message they advocate:

### DIET:

- Avoid red meat, dairy fat, and egg yolks
- Eat fish three to four times a week.
- Use olive oil instead of vegetable oil.
- Avoid canola and flaxseed oils.
- Eat a variety of fruits and vegetables.
- Eat stewed or cooked tomatoes.
- Drink two to four cups of green tea a day.

### SUPPLEMENTS

- Take 200mcg of selenium a day
- Take 400 IU of Vitamin E a day
- Take 30 mg of lycopene a day

### LIFESTYLES

- Exercise for 30 to 40 minutes at least three times a week.
- Incorporate relaxation techniques like meditation into your daily life.

For more about the Foundation and its campaign, visit [www.tellonefriend.com](http://www.tellonefriend.com).