



THE WALNUT

NOVEMBER/DECEMBER 2019

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>



Next monthly meeting

Our next monthly meeting will be held at 7 pm on **Wednesday 20 November 2019**.

This will be our annual end-of-year celebration. Further details are in the President's Message.

All are welcome to attend our regular monthly meetings and coffee mornings, including partners and carers. No notice is required. Simply come along and introduce yourself, or contact one of the people listed on page 2 of this newsletter.

Meetings of our support group are held on the third Wednesday of the month (except in December) at 6:30 pm for 7:00 pm. The usual location is Room 22, Building 1, Pearce Community Centre, Collett Place, Pearce, ACT 2607 ([see map](#)).



President's Message

This is the final newsletter for 2019 and so I would like to give you my very best wishes for the coming Festive Season. I hope you have a wonderful Christmas and a happy and prosperous New Year.

In keeping with tradition, our final meeting for the year on Wednesday, 20 November 2019 will be a casual event, with refreshments after the meeting. Kath Duggan, Head of Community Outreach and Support at PCFA, and some of our speakers from throughout the year will join us for the meeting. So, I do hope that you can come along and enjoy the festivity and chat to our guests.

While our final monthly meeting will be held on 20 November, we will still have a coffee morning in December. Details of our November and December coffee mornings are on page 2 of the newsletter.

Harness Racing ACT has again invited us to be its nominated charity this year at its Christmas Twilight event at 6 pm on Sunday, 15 December. Those of us who attended last year's event know how enjoyable it was and how successful it was in raising funds for the Group. So, please put this date in your diary and join us for what will again be a wonderful occasion. And bring your friends! Harness Racing ACT is a great supporter of the Group and we also need to repay their support.

Finally, I would like to thank medical oncologist, Dr Ganes Pranavan, for his most informative presentation at our October meeting.

We will be aiming to have another varied and interesting program of speakers in 2020 at our monthly meetings.

John McWilliam

Appreciation

The Group recognises and expresses its appreciation for the support provided by: the PCFA, SHOUT staff, Harness Racing ACT, staff of the Australian Department of Human Services (Chief Technology Office), the Canberra Southern Cross Club, Holy Family School Gowrie, Paddywack Promotional Products, Residents' Social Club at The Grove, Ngunnawal, the ACT Masters Hockey Association and the many individuals who have assisted in our fund-raising activities.

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

Next Coffee mornings

10:00 am, Tuesday, 12 November at the Canberra Southern Cross Club, **Jamison**.

10:00 am, Tuesday, 10 December at the Canberra Southern Cross Club, **Woden**.

Coffee mornings are held at 10:00 am on the second Tuesday of each month and alternate between the Woden and Jamison venues of the Canberra Southern Cross Club.



Dr Ganes Pranavan

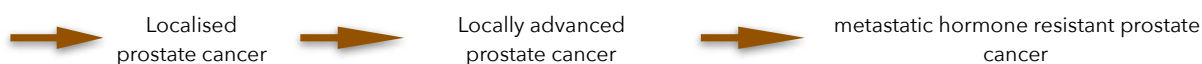
Our October meeting

The guest speaker at our meeting in October was medical oncologist, Dr Ganes Pranavan, Consultant Medical Oncologist at The Canberra Hospital, National Capital Medical Specialist and lecturer at the Australian National University. He spoke about the treatment of patients with advanced metastatic prostate cancer.

Dr Pranavan explained the anatomy of males, and the reasons for prostate cancer and cancer cell growth. Prostate cancer is the second most deadly cancer in Australian males and in recent years younger men are being diagnosed with it.

The incidence of prostate cancer differs between races. For example, African-Americans have a higher incidence of prostate cancer than European-Americans and Japanese-Americans have higher rates than native Japanese. This suggests that lifestyle also affects the incidence of prostate cancer.

Prostate cancer typically progresses as follows:



After initial treatment there can be a relapse of prostate cancer, with the prostate specific antigen (PSA) increasing again. The PSA doubling time is an important treatment consideration, especially if the doubling is less than 6 months.

Dr Pranavan summarised the treatment options used in 2019 as follows:

Hormone sensitive prostate cancer	Castration resistant prostate cancer
1. Androgen depressing treatment	1. Androgen depressing treatment
2. Chemotherapy	2. Chemotherapy
3. Second generation ADT	3. Second generation ADT
	4. Ra ²²³ , lutetium
	5. PARP inhibitors *
	6. Immune therapy
	7. Clinical trials

* PARP is a protein found in cells. It helps damaged cells to repair themselves. As a cancer treatment, PARP-inhibitors stop the PARP from doing its repair work in cancer cells and the cell dies.

To illustrate how treatment for men with metastatic cancer can progress, Dr Pranavan described the treatment history of a 67-year old man with advanced metastatic prostate cancer who suffered back pain as a consequence. He was initially given Zoledex, Lucrelin and/or Diphereline (a gonadotropin releasing hormone agonist). He obtained relief, but after two years his pain returned and he was given a combined androgen block of Cosudex, Anadron, Eluexin and Androcur. The next phase will be a chemotherapy treatment (Docetaxel and/or Cabazitaxal). The future options for the man include clinical trials, Ra²²³, a genetic analysis and PARP-inhibitors.

Dr Pranavan answered many important questions during the course of his presentation.

Lifting the kilt on men’s health
2019 MEN’S HEALTH DOWNUNDER PATIENT FORUM
Thursday 5 December 2019 (6:30 to 9:00 pm)
Royal Canberra Golf Club

A Q&A style panel session with experts in the field of men’s health. Topics include prostate cancer, incontinence, erectile dysfunction and more.
 Tickets \$75 pp (with some of the proceeds going to the PCFA).

[Click here for more information](#)



**HARNESS RACING TWILIGHT EVENT, 6 PM SUNDAY 15 DECEMBER
2019**

EXHIBITION PARK

All proceeds in aid of the Prostate Cancer Support Group—ACT Region Inc

Harness Racing ACT is holding its annual Christmas Cup meeting at **6:00 pm on 15 December, with all proceeds going to the Group**. This will be a really enjoyable event, with Santa and plenty of other activities for the children, raffles and an auction — not to mention the races! There will also be a photographer taking photos with ‘Rudolph the Red-Nosed Reindeer’.

As we did last year, we will be booking tables for dinner for the Group. A two-course dinner with beer, wine and soft drinks costs only \$55 per person for people 17+ years. For children aged 6 to 16 years, the cost is \$20 per child and for children 0-5 years there is no charge. Entry to the event is also free for all.

This major fund raiser helps support our support activities, including sponsorship of the training of nurses in the care of patients with prostate cancer and contributions to research and equipment.

Acceptances and enquiries to David Hennessy by **Sunday 8 December (see below)**

Volunteers are also needed

We also need volunteers to help set things up at 2 pm on **Friday, 13 December and to help clean up after the event on the Sunday**. Neither time will take long. If you are able to help out, please contact David Hennessy. David can be contacted on: secretary@prostate-cancer-support-act.net, or by phone on 0402 880 754 (m) and 6154 4274.



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:

- Should we cut back on our intake of dairy foods to reduce the risk of getting prostate cancer? This article reviews a recent study in the United States, which found, among other things, that consumption of higher amounts of dairy foods may increase the risk of prostate cancer. [Read article.](#)
- PSA testing for men with BRCA gene mutations. [Read article.](#)
- What are PARP inhibitors and why are scientists excited about them? [Read article.](#)
- Insulin changes the nature of prostate cancer cells when testosterone levels are low. [Read article.](#)
- Report on the fourth annual Community Conversations held by PCFA in September 2019. [Read article.](#)

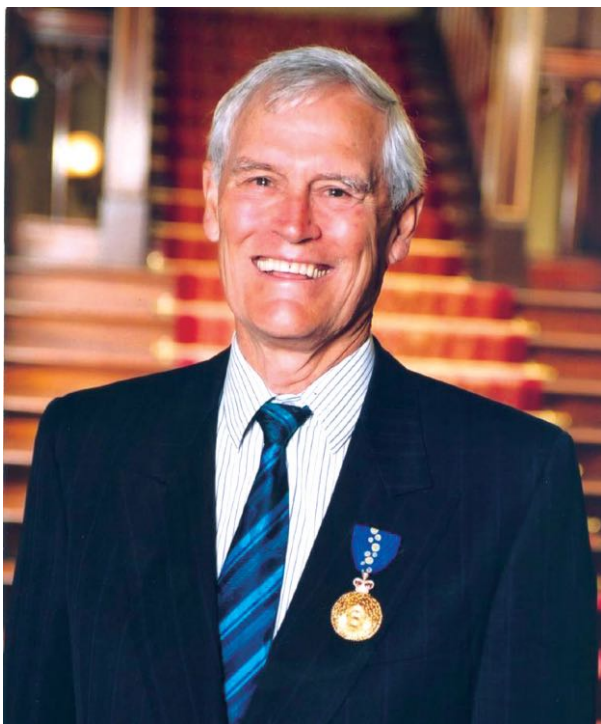
It is free and easy to become a member of the PCFA Online Community. You can sign up at:

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

November executive committee meeting

At its meeting on 8 November 2019, the committee, among other things:

- noted that people who had not responded to Group emails for most of 2019 and had not confirmed that they wish to continue receiving our emails had been unsubscribed from future emails and that a new membership database had been developed;
- agreed to arrangements for the end-of-year November function;
- noted that nurses who have been sponsored by the Group to undertake a specialist course in prostate cancer nursing will speak about their experience at our January meeting;
- finalised arrangements for an outreach event at The Grove, Ngunnawal on 19 November;
- agreed to arrangements for supporting Harness Racing ACT's fund raiser for the Group in December 2019;
- noted that, for the financial year to date, the Group has had revenue of around \$1500 and expenses of around \$2170;
- noted steps that the Treasurer is taking to complete handover arrangements with the Group's bank and to complete the submission of the Group's annual return, in accordance with the *Associations Incorporation Act 1991*;
- noted that the Group has received a preliminary enquiry from The Canberra Hospital about the possibility of the Group funding or helping to fund the purchase of three bladder scanners for men undergoing prostate external beam radiation therapy. The Group has requested more information on the request to help us make a decision;
- noted that David Hennessy will be representing the Group at a NSW Support Group Leaders Meeting, which is to be held by the PCFA on Wednesday, 27 November 2019; and
- discussed ways to better support members who are not well.



Nominations for the 2019 Max Gardner Awards

Nominations are now open for the 2019 Max Gardner Awards.

The Max Gardner Award for Distinguished Service is a prestigious award presented by the PCFA to an individual member of the Network who has made an outstanding and significant contribution to reducing the impact of prostate cancer on Australian men, their partners and families. This award is a peer-based form of recognition for PCFA Network members who are currently an official Ambassador, in a Support Group Leader role or an active member of an affiliated support group.

For further information about the Max Gardner Award, read: [Questions and answers](#).

Nominations can be made using the [nomination form](#).

Nominations must be submitted by COB Monday **16 December 2019** to:

supportnetwork@pcfa.org.au or to:

Att: Daniel Moore
Prostate Cancer Foundation of Australia
Level 5, 437 St Kilda Road, Melbourne VIC 3004

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.

Docetaxel improves survival in metastatic hormone-naïve prostate cancer

The *Annals of Oncology* (27 September 2019) included a report on long-term outcomes from the STAMPEDE study (5 October 2005 to 31 March 2013).

This report provides long-term survival data from a randomised trial on androgen deprivation therapy (ADT) plus docetaxel, versus ADT alone among patients with low- and high-burden metastatic hormone-sensitive prostate cancer. Compared with the standard-of-care group, the docetaxel group had extended overall (HR, 0.81), failure-free (HR, 0.66), and progression-free (HR, 0.69) survival after a 78.2-month follow-up. There was no evidence of heterogeneity between the two metastatic burden subgroups. At one year, grade 3-5 toxicities were similar between the two groups.

The report concluded that the clinically significant benefit in survival for upfront docetaxel persists at longer follow-up, with no

evidence that benefit differed by metastatic burden. It advocated that upfront docetaxel be considered for metastatic hormone naïve prostate cancer patients regardless of metastatic burden.

Read the [original article](#) and [report in Practice Update](#).

Long-term hormone therapy does more harm than good in prostate cancer patients with low PSA levels after surgery

Men who see their prostate cancer returning after surgery see no benefits from adding long-term hormone therapy to salvage radiation therapy if their PSA levels are low; instead, they might be at a higher risk of dying from causes other than prostate cancer, like cardiac or neurological problems, a study published in the *International Journal of Radiation Oncology* has found. The add-on hormone therapy, however, substantially extends the lives of patients whose PSA levels are higher (over 1.5 ng/mL), suggesting that treatment should be tailored based on a man's PSA values at the time of recurrence.

Read the [full article](#).

Active surveillance for intermediate risk prostate cancer

Active surveillance is becoming more widely accepted as an initial management option for carefully selected men with favourable intermediate-risk prostate cancer. However, there are no agreed guidelines on when this should be used. This study reviews the evidence on active surveillance of patients with intermediate risk prostate cancer.

The article concludes that, even if inevitable definitive treatment is only being delayed for many of these patients, there remains value in this so long as long-term oncologic outcomes are uncompromised. The appropriate selection of patients suitable for active surveillance is key and current risk stratification schema need to be updated.

Read the [full article](#).

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:

president@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 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.