



PROSTATE CANCER HOT SHEET

Us Too! INTERNATIONAL **FEBRUARY 2002**

New Us Too! Board of Directors brings broad, diverse talents - sets ambitious agenda of increased awareness, improved education and enhanced support for prostate cancer patients, their families and men at risk

The 2002 *Us Too!* Board of Directors is the most diverse group of individuals in the history of the organization. From New Jersey to California, Washington to Georgia, South Texas to Detroit - the *Us Too!* Board has never been more geographically diverse. In addition, the Board also spans five decades with member ages in their forty's, fifty's, sixty's, seventy's and eighty's; the first woman to serve on the Board; an MD, a DDS, an EdD, and two PhDs; there are two African-Americans; included among the members: engineers, educators, business owners and corporate managers; and treatment options that span the entire gamut from radical prostectomy and watchful waiting to intermittent hormone therapy, radiation and brachytherapy.

At the first ever Board orientation, held in January, it became clear that this group of individuals will also provide *Us Too!* with the strongest leadership team we've ever assembled. With an unparalleled set of talents and experience - it was clear that this team provides the leadership capabilities needed to take the organization to the next level.

Here is a brief introduction of each of the members of the new *Us Too!* Board of Directors:

JOHN DE BOER was diagnosed with prostate cancer in 1985, at the age of 66, following a routine physical. John and his wife have been married for 59 years and are the parents of three children and ten grandchildren. John was an employee

business world at the age of 56 then for the next four years volunteered his life in service to help people. In 1980 he became Vice President of this service organization and retired for good in 1986. In 1990, John and four fellow patients (Ed Kaps, John

Moenck, Ed von Holst and Vince Young) of Dr Gerald Chodak at the University of Chicago found themselves sharing experiences and meeting to support one another through their prostate cancer diagnosis. In February 1990 a meeting was called from which subsequently grew the organization to be known as *Us Too!* International, and John has been active in the organization for the past twelve years. In December, John was honored by the *Us Too!*



(Back Row: Jo Ann Hardy, Don Lynam, Jamal Rasheed, Joe Piper, Charles Sleden, John DeBoer
Middle Row: Robert Huested, Dan Moore, Ron Fabrick, Jim Kiefert, Danny Parker
Front Row: Lew Musgrove, Rem Stokes, Harry Pinchot, Russ Gould)

of Commonwealth Edison in Chicago, Illinois for nearly twenty years before opening several businesses, including appliance repair, home painting and decorating, private scavenger, two Mobile Home Parks, and two Dry Cleaning and shirt laundry plants. He retired from the

Board of Directors by being named the first Director Emeritus. John is Secretary of the *Us Too!* Board of Directors.

RONALD FABRICK, DDS has been a member of the *Us Too!* Board of Directors for more than eight years. A graduate of the Northwestern University Dental School, Ron is a practicing Dentist/Periodontist in Glenview, IL. Ron was elected to serve as the Assistant Treasurer of the *Us Too!* Board with additional responsibility as Board Liaison for Awareness Initiatives.

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PROSTATE CANCER NEWS YOU CAN USE

Us Too! publishes a FREE daily e-mail based news service which provides updates on the latest prostate cancer related news. To subscribe or link to the archives simply visit the Us Too! Website: www.ustoo.org

News items contained in Us Too! publications are obtained from various news sources and edited for inclusion. Where available, a point-of-contact is provided.

All references to persons, companies, products or services are provided for information only, and are not endorsements. Readers should conduct their own research into any person, company, product or service, and consult with their loved ones and personal physician before deciding upon any course of action.

CAVEOLIN-1 PROMOTER DRIVES GENE THERAPY TO REDUCE PROSTATE MALIGNANCY SIZE

NewsRx.com - January 17, 2002

“Caveolin-1, a structural component of caveolae, is overexpressed in metastatic and androgen-resistant prostate cancer and highly expressed in tumor-associated endothelial cells,” Christina Pramudji and coworkers said of its role in prostatic malignancies. Pramudji and colleagues at Baylor College of Medicine in Houston, Texas, worked with associates at the Veterans Affairs Medical Center, also in Houston, to study the effects of gene signaling on prostate cancer cells growing in vivo and in vitro. Key points reported in this study include:

- The caveolin-1 promoter causes apoptosis and produces excess tumor necrosis when used in gene therapy targeting murine prostate cancer cells
- The caveolin-1 promoter as well as another promoter were effective for reducing microvessel density in murine prostate cancer tumors

The caveolin-1 promoter may be ideally suited for use in gene therapies targeting prostate cancer growth and neovascularization

EXONHIT THERAPEUTICS, IDEC PHARM. TARGET ANTIGEN DISCOVERIES

NewsRx.com January 17, 2002

ExonHit Therapeutics and IDEC Pharmaceuticals Corp. (IDPH) have signed a collaboration and research agreement directed to the discovery of new antigen targets for antibody therapy, including prostate carcinoma.

WEEKLY DOCETAXEL TREATMENT IN SYMPTOMATIC ANDROGEN-INDEPENDENT PCA PATIENTS SHOWS ACTIVITY

FaxWatch Inc. - January 14, 2002

New Phase II data support the use of weekly docetaxel in symptomatic androgen-independent prostate cancer patients. None of the subjects had received prior chemotherapy for the prostate cancer or had radiotherapy during the previous month. PSA response, defined as a 50% decrease in PSA, as well as other disease and quality-of-life measures also were recorded. Results showed a palliative response with almost half the patients who had elevated baseline PSA levels exhibiting a PSA response, with half of

these demonstrating a greater than 75% reduction in PSA, and 2/3's of those a greater than 90% reduction. “In this patient population, weekly docetaxel was active regardless of the yardstick applied to measure activity,” the researchers wrote. They noted that docetaxel alone has significant activity in androgen-independent prostate cancer, but that it’s “true worth in the treatment of advanced prostate cancer will be determined in Phase III studies.” (Beer TM, et al. Ann Oncol 2001;12:1273-9.)

STRONG BONES FOR THOSE WHOSE MEDICINE MAY CAUSE BONE LOSS

Internetwire.com - January 15, 2002


What do the more than 17 million U.S. asthma sufferers, nearly 200,000 patients annually diagnosed with prostate cancer and patients taking blood thinners and antacids have in common? Their medications may be robbing them of bone, indicating an increased need for calcium and vitamin D to maintain their overall health and prevent osteoporosis. Recent studies published in the New England Journal of Medicine confirm that certain medicines block calcium intake and interfere with bone metabolism, leading to bone loss. Specifically, asthma sufferers using corticosteroid asthma inhalers, chemotherapy patients and those with excessive thyroid replacement may find themselves at risk for osteoporosis.

MILWAUKEE-AREA HOSPITAL TESTS USE OF RADIO WAVES ON SEVERE CA PAIN

Milwaukee Journal Sentinel January 10, 2002

St. Luke’s Medical Center is one of five places around the country testing the new treatment for the horrific pain of cancer that has spread, or metastasized, from the original site — breast, prostate, colon — to the bone. That is one of the hardest kinds of pain to treat because bones are intricately meshed with nerves, said Robert Beres, a St. Luke’s radiologist. Tumors in bone, especially in the vertebrae or pelvis, can cause the spine to collapse and make walking painful or impossible. The new treatment is aimed at relieving pain rather than curing the cancer, though it also can extend survival because it does kill tumor cells, can stop a tumor’s progression and prevent complications that often lead to death. It

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Us Too! HEADQUARTERS STAFF
 JOHN A. PAGE, FHIMSS, PRESIDENT / CEO
 JACQUELINE KONIECZKA, OFFICE MANAGER
 MARY BETH MICCUCI, CHAPTERS COORDINATOR
 DOROTHY WIENCEK, PATIENT INFORMATION COORDINATOR
 5003 FAIRVIEW AVENUE
 DOWNERS GROVE, IL 60515
 PHONE: (630) 795-1002 / FAX: (630) 795-1602

Us Too! BOARD OF DIRECTORS:
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uses radio frequencies, or RF ablation, in which radio waves are passed into the tumor via a probe inserted through the skin. The radio waves create friction and heat within the tissue, causing it to die. But the experiment at St. Luke's focuses on metastatic cancers. It is being led by the Mayo Clinic and also involves Johns Hopkins Medical Center in Baltimore; M.D. Anderson Cancer Center in Houston; Memorial Sloan-Kettering Cancer Center in New York City; and Northwestern University Medical Center in Chicago. To be eligible for the study, it doesn't matter where the cancer originally started as long as it has been documented that the disease has spread to bone. Patients must score at least a four on the one to 10 scale of cancer pain, and have already tried medication or radiation to treat the pain.

ASTRAZENECA SUBMITS SUPPLEMENTAL NDA FOR BICALUTAMIDE 150 MG
NewsRx.com - January 09, 2002

AstraZeneca has filed a Supplemental New Drug Application (sNDA) with the U.S. Food and Drug Administration (FDA) for its oral, once-daily hormonal medication Casodex (bicalutamide) for the treatment of early stage nonmetastatic prostate cancer.

CG7870 SHOWS SYNERGISTIC ANITUMOR ACTIVITY WITH CHEMOTHERAPY
NewsRx.com - January 09, 2002

Cell Genesys, Inc., reported further results of a Phase I/II clinical trial of CG7870, an oncolytic virus engineered to target and destroy prostate cancer cells which is being evaluated in patients with advanced prostate cancer. The updated findings demonstrated stabilization of PSA (prostate-specific antigen) levels in six of 23 patients (26%) for a median duration of four months after just a single intravenous injection in patients with advanced hormone refractory prostate cancer. The Phase I/II trial was conducted at three medical centers under the direction of Eric Small, MD, clinical professor of medicine and urology at the Univ. of California, San Francisco Comprehensive Cancer Center. These data were reported December 14, 2001, at the International Conference on Gene Therapy of Cancer, held in San Diego, CA.

MYRIAD GENETICS SUBMITS CLINICAL TRIAL FOR FLURIZAN TO FDA
NewsRx.com - January 09, 2002

Myriad Genetics, Inc., has submitted a large, multicenter, double-blind, placebo-controlled human clinical trial of its prostate cancer drug, Flurizan (MPC-7869), to the U.S. Food and Drug Administration. This new clinical trial is designed to demonstrate the efficacy of Flurizan in prostate cancer patients and will be conducted at approximately 65 sites in the United States. The company plans to enroll approximately 400 early stage prostate cancer patients in the study, which is designed to evaluate systemic disease progression of prostate cancer. In the study, patients will be assigned to one of three regimens (either one of two different doses of Flurizan or placebo). The primary clinical endpoints for the trial include time to metastases and effect on prostate specific antigen (PSA) levels. To date, two Phase I trials and one Phase IIa trial have been completed with Flurizan in healthy volunteers and late-stage cancer patients, respectively. These earlier trials with the drug demonstrated encouraging results in safety, bioavailability and pharmacokinetics.

ADM AWARDED NUTRACEUTICAL PATENT
PR Newswire - January 08, 2002

Archer Daniels Midland Company announced that it has been awarded a U.S. patent for a range of unique nutraceutical compositions with broad application in supplements, functional foods and other nutraceutical products. ADM's Novasoy(R) dietary supplement contains soy isoflavones and other phytochemicals that have been shown to help maintain cardiovascular, prostate and bone health, as well as overall health for women during and after menopause. There are currently over 100 supplement and functional food products that contain Novasoy isoflavones as an active ingredient.

DGI BIOTECHNOLOGIES AND NOVO NORDISK COLLABORATE FOR THE DISCOVERY OF ANTICANCER AGENTS
PR Newswire - January 08, 2002

DGI BioTechnologies, Inc. announced that it has signed a two-year licensing and research agreement with Novo Nordisk A/S, for the research and discovery of

IGF-related antagonists for the treatment of cancer. IGF, or insulin-like growth factor, is a natural growth promoting entity, the blockage of whose action has attracted attention as a potential anti-cancer therapy for the treatment of many solid tumors. An increasing body of epidemiologic data links elevated serum IGF levels with the risk of a number of different cancers including prostate, colorectal, breast, and lung. While the actions of IGF are complex, it is becoming clear that this system may mediate the effect of a number of well-established cancer risk factors.

NONCLINICAL VARIABLES INFLUENCE PROSTATE CANCER MANAGEMENT
FaxWatch Inc. - January 07, 2002

Researchers found that baseline disease-related function as well as various nonclinical variables are important determinants of treatment of clinically localized prostate cancer. "These results ... underscore the lack of consensus for care of this disease, probably attributable to the lack of definitive evidence of the efficacy of one approach versus another," the researchers commented. "Until such evidence can be obtained, we urge that men diagnosed with prostate cancer be informed of the potential risks and the potential benefits of all 4 main treatment options so that they might make an informed decision." (Harlan L, et al. J Natl Cancer Inst 2001;93:1864-71.)

DISEASE RECURRENCE WITH LOCALIZED PCA PREDICTED BY PROLIFERATION OF MICROMETASTATIC CELLS
FaxWatch Inc. - January 07, 2002

Determination of the phenotype of individual micrometastatic prostate cancer cells may provide more useful prognostic information than just the determination of their presence or absence in the peripheral blood and bone marrow of patients with clinically localized disease, suggest new findings. "Some studies have demonstrated a correlation between [reverse-transcription polymerase chain reaction (RT-PCR)] detection of PSA-mRNA and disease recurrence," the authors wrote. "However, many RT-PCR-positive patients remain disease-free."

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PROSTATE CANCER NUTRITION NEWS

SULFORAPHANE'S - ANTIOXIDANT FOUND IN BROCCOLI AND BROCCOLI SPROUTS - PROTECTIVE PROPERTIES BENEFICIAL AGAINST PROSTATE CANCER

PR Newswire - January 09, 2002

Three recently published scientific studies reinforce the protective power of sulforaphane, the naturally-occurring antioxidant in broccoli and broccoli sprouts, by demonstrating new aspects of disease prevention. Studies on sulforaphane (SGS) in human cell lines and laboratory animals show its potential effect on hypertension, prostate cancer and macular degeneration. The studies, reported in late 2001 by scientists from Johns Hopkins, Stanford University and the University of Saskatchewan, give new significance to the potential health benefits of sulforaphane, the antioxidant phytochemical originally isolated from broccoli, and now available to consumers in highly concentrated amounts in young broccoli sprouts. Human prostate cancer cells responded well to treatment with sulforaphane in the form of broccoli sprout extracts by showing dramatic increases in their protective Phase 2 enzymes. In his article, Dr. James D. Brooks of the Urology Department at Stanford suggests, "Intervention trials may be warranted [in humans], and broccoli sprouts, a rich natural source of sulforaphane, may be appropriate for use in such a trial." The Stanford studies actually used broccoli sprouts to elicit the protective effects in the scientific experiments involving prostate cancer intervention. It is important to point out that these studies involved animals and human cells in the laboratory, but the stage is now set for human trials to assess the further protective qualities of sulforaphane against a variety of life-challenging medical conditions. "Potent induction of Phase 2 enzymes in human prostate cells by sulforaphane. (Cancer Epidemiology, Biomarkers & Prevention, Vol. 10, pp. 949-954. Sept. 2001.)

PHYTOSTEROLS FROM PLANT SOURCES SLOW TUMOR GROWTH IN MICE

NewsRx.com - January 17, 2002

Phytosterols that occur naturally in plant sources, such as peanuts, beans, olive oil and peanut oil, appear to reduce prostate

tumor growth by over 40% and cut the occurrence of cancer spread to other parts of the body, like lymph nodes and lungs, by almost 50%. This study is significant because, for the first time, the effect of phytosterols on human prostate cancer cell growth and metastasis in animals is being reported. Simply stated, phytosterols are natural chemicals found in plants. Three common forms of phytosterols are beta-sitosterol, campesterol, and stigmasterol, which are found in high concentrations in some plant oils, seeds and legumes, such as peanuts. The most common of these, beta-sitosterol (SIT), has been shown to inhibit cancer growth, as well as to protect against heart disease. SIT may offer protection from colon, prostate, and breast cancer, all of which tend to occur at higher rates in Americans than in other populations. This research comes from the nutrition laboratory at the University of Buffalo in Buffalo, New York, and was published in the December 2001 issue of the European Journal of Cancer Prevention. Atif Awad, PhD, RD, coinvestigator of the study and professor of nutrition at the State University of New York at Buffalo, said, "These studies demonstrate for the first time that phytosterols that exist naturally in our diet, in foods like peanuts and beans, can protect against prostate cancer." The findings seem to support the epidemiological evidence pointing to an association between the cholesterol-rich diets of Western men and higher levels of prostate cancer compared with Asian men. In addition, the phytosterol-rich diets of Asian men may contribute to the lower incidence of prostate cancer and may even help prevent the disease. Western culture diets are typically high in cholesterol and low in phytosterols, while Asian diets are typically low in cholesterol and higher in phytosterols. Phytosterols are already used widely in Europe for their benefits to health. Awad noted that phytosterols are used to treat enlarged prostate, and are known to lower the risk of cardiovascular disease by interfering with cholesterol absorption from the gut. Peanuts and peanut butter, staples in most American diets, contain these beneficial phytosterols. Past research at the State University of New York at Buffalo examined the phytosterol content of several peanut

products and showed that B-sitosterol (SIT) was most prominent. To get 50 mg SIT, you could snack on 1.2 ounces of roasted peanuts, spread 1.3 ounces of regular peanut butter (about two heaping tablespoons) on your toast, or use one ounce of peanut oil while cooking.

SUPER FOODS

Sacramento Bee - January 09, 2002

Nutrition used to be so simple. Now at every turn, we hear such words as lycopene, phytochemicals, flavonoids and free radicals. In a nutshell, if your goal is to improve your diet, eat more whole grains, fruits, vegetables and fish. "Overall, place more emphasis on plant-based foods," says JoAnn Hattner, a registered dietitian in Palo Alto and spokeswoman for the American Dietetic Association. "Free radicals are the things you want to prevent. Basically they are the things that are thought to destroy cell membranes. Fruits and vegetables contain antioxidants — what I like to think of as the A-team. They are the army that fights the free radicals." How many and which are best? The jury is out, but Hattner says you should try to eat a minimum of five servings from the fruit and vegetable category every day. "Some researchers suggest that if you are at risk for cancer, you should eat as many as nine servings a day. The problem is, we haven't gotten the general American population up to five yet. We don't have human trials yet, but we are becoming more and more enlightened with every research project. We do know that fruits and vegetables have protective characteristics found in phytochemicals. There are some trials in cancer research that may show eating more fruits and vegetables may be beneficial in treatment and preventing recurrence." One of the most promising phytochemicals is lycopene, which may protect against cancer, Hattner says. Lycopene is in most red fruits and vegetables, such as tomatoes, watermelon, pink grapefruit and red peppers. Flavonoids are other beneficial plant compounds found in fruits, tea, citrus and vegetables. They have a role in neutralizing free radicals and are therefore considered protective. "Besides fruits and vegetables, the next-most-important

group is grains," Hattner says. "That includes foods like brown rice, oatmeal, whole-wheat bread, high-fiber cereals. When you have a choice between white or whole-wheat bread, choose the whole wheat." Eat more dark green and leafy vegetables, such as broccoli, spinach, collard, kale, chard and mustard greens, says Cassius Lockett, who has a doctorate in nutrition and is the epidemiology program manager for Sacramento County. "They are rich in folic acid," he says, which studies suggest may be beneficial in warding off heart disease, strokes and some cancers. Broccoli and other cabbage-family vegetables give us a phytochemical that acts as an active chemopreventive. So far, studies have linked this phytochemical to a lower risk of cervical and prostate cancer. All red fruits and vegetables — such as watermelon, strawberries, red peppers, pink grapefruit and tomatoes — are good choices. The darker the red, the more lycopene the food contains. Some studies show that lycopene may reduce risk of prostate and some other cancers, says Carolyn O'Neil, a registered dietitian in Atlanta who writes for Cooking Light magazine and reports on food and nutrition for CNN. A Harvard study of 48,000 men found that those who regularly ate lycopene-rich tomato products reduced their risk of prostate cancer by as much as 34 percent compared with men who ate processed tomatoes less frequently. "Eat more fish and less organ meats," Lockett says. "Fish contains omega 3 fatty acids. The best sources of omega 3 are salmon, mackerel, albacore tuna, sardines and lake trout. "Apples are a powerful antioxidant," he says. Antioxidants neutralize the free radicals and therefore may suppress cancer growth. "Purple grape juice contains a high amount of folic compounds that are antioxidants," Lockett says. Folic compounds reduce the amount of harmful substances in your body that can cause cancer and other diseases. Good sources of soy protein are soy nuts, soy milk, tofu, edamame (soy beans), soy burgers and miso. Olive oil may reduce colorectal cancer risk, suggest researchers at University of Oxford. They compared diets with cancer incidences in 28 countries. Olive oil consumption was linked to lower cancer rate.

PCA NEWS YOU CAN USE

(continued from P. 3)

RADIATION TO ENTIRE PELVIS MORE EFFECTIVE THAN PROSTATE-ONLY
Cancer Treatment Consultants
January 07, 2002

Results of a study presented at the Annual Meeting of the American Society for Therapeutic Radiology and Oncology suggest that radiation to the entire pelvis is more effective in delaying progression of prostate cancer than prostate-only radiation, especially when combined with hormone therapy delivered before (neoadjuvant) or during radiation treatment. The Radiation Therapy Oncology Group (RTOG) conducted a clinical trial involving 1,323 men with localized prostate cancer whose risk of lymph node involvement was greater than 15%. Overall, patients who were treated with the combination of neoadjuvant hormonal therapy plus WPRT achieved superior results over the other treatment regimens. (American Society for Therapeutic Radiology and Oncology, Vol 51, Issue 3, pp 1, 2001)

NEARLY HALF OF HISPANIC MEN HAVE NOT UNDERGONE CANCER TESTS
EFE - January 02, 2002

Nearly half of Hispanic men over 40 have never been tested for colorectal or prostate cancer, according to a new study from the National Cancer Institute. The study, published in the American Journal of Preventive Medicine, indicates that although the incidence of cancer among Hispanics has decreased in general, in some areas, such as California and New Mexico, the disease is claiming more victims than ever.)

ENDOCARE & PTCI TO DEVELOP CRYOSURGICAL CENTERS
PR Newswire - January 07, 2002

Endocare Inc., a developer of innovative temperature-based treatments for prostate cancer, today announced the formation of a strategic partnership with privately-held, Spokane, Washington-based Prostate Treatment Centers, Inc. (PTCI) to jointly develop regional cryosurgical Centers of Excellence throughout the U.S. and Canada.

Do YOU AGREE??

On January 18, 2002, The San Francisco Chronicle printed an article entitled "Prostate cancer screening — Is it worth the pain?" by Drs Gavin Yamey and Michael Wilkes. In it the authors offer their opinions that "the PSA is useless in screening for cancer, and that if we were to use it routinely on all healthy men it would do them far more harm than good."

Some notable quotes:

- "the PSA and DRE are incredibly inaccurate. With the DRE, you might as well flip a coin — the coin would perform as reliably as your doctor's finger."
- with "the PSA, there is an unacceptably high rate of false positives." where the test alone will "cause suffering and misery."
- "Even if the test picks up a cancer, nobody knows how best to treat it. In fact, not giving any treatment may be just as good."
- They summarize by stating "picking up prostate cancer with the PSA does not change the outcome of the disease."
- "The trouble with screening for prostate cancer is that you can turn healthy men into 'cancer victims.' Many of these men would never, ever have known about their cancer. Diagnosing these men is extremely harmful to their health - all you've done is to create fear, without any evidence that treatment helps."
- Most insulting they state that "Advocates of the PSA often stand to make money out of doing the test, or out of offering subsequent treatment for prostate cancer." and state "it is clear that widespread PSA testing would be harmful to the health of American men. And the financial costs would be huge. A program to screen all men over 50 for prostate cancer would cost the country \$12 billion to \$28 billion in the first year alone, meaning that money may not be available to pay for effective screening programs for other diseases."

This message is spread courtesy of your tax dollars as the authors lead a research project funded by the Centers for Disease Control and Prevention (CDC) that aims to teach physicians about prostate cancer screening. Wilkes is also Vice Dean at Univ of CA Davis School of Medicine. Yamey is from the UK.

Let your Congressman and Senators know that you don't approve of this CDC project. Let Dr Joseph Silva, Dean of the UC Davis School of Medicine know that Dr. Wilkes has done a disservice to men. Let Dr. Wilkes know if you disagree at: (530) 752-3170 - mwilkes@ucla.edu or michael.wilkes@ucdmc.ucdavis.edu

Get involved in encouraging awareness and responsibility regarding PCa. Contact Us Too! for more info 1-800-80-Us Too!

**DR. WILLIAM FAIR,
NOTED CA RESEARCHER
DEAD AT 66**

Sunday News Lancaster, PA
January 14, 2002

Dr. William R. Fair, a leading cancer surgeon whose experience as a cancer patient led him to become an advocate for the scientific study of complementary medicine, died on Jan. 3 in Sarasota, Fla. He was 66.

An expert on prostate cancer and other urologic tumors, Fair was chairman of urology at Memorial Sloan-Kettering Cancer Center in New York City from 1984 until 1997. He continued to work there until 2000, and in 2001 he and his son, William R. Fair III, 38, helped found a complementary medicine center in New York City called Haelth. (Dr. Fair was a long-time member of the *Us Too!* International Medical Advisory Board)

In addition to operating on thousands of patients at Memorial Sloan-Kettering, Fair was a prodigious researcher, developing new surgical techniques, treatments and diagnostic tests for prostate cancer.

In 1995, at what Fair described as the height of his career, he learned that he had colon cancer. He had surgery and chemotherapy at Memorial Sloan-Kettering and quickly resumed his work in the laboratory and operating room. In 1997 the cancer recurred and he had more surgery, but it came back yet again a few months later. "And there was little chance of a cure," he wrote of his own condition.

Fair began to practice yoga, exercise, prayer and meditation as well as making changes in his diet and taking herbal treatments — approaches that he had once dismissed as "touchy-feely nonsense." He noted that he began to feel better, and for a time his tumors shrank.

William R. Fair III said he thought that some of his father's medical colleagues initially were critical of his pursuit of unconventional treatments. But, Mr. Fair said, his father did not blindly embrace a raft of unproven remedies. Rather, he took a scientist's approach, urging that various approaches be tested and held to the same standards as mainstream medicine.

US TOO! BOARD OF DIRECTORS

(continued from page 1)

RUSSELL GOULD was diagnosed with prostate cancer in 1998 at age 58. An active plastics engineer, Russ runs RG Associates - a consulting firm to the plastics industry. He is a recognized world leader in one area of the plastics industry, and is a well known author and speaker who holds over 130 US & foreign patents. Russ also edits a newsletter for plastics engineers which is distributed worldwide and serves on the Board of Directors of The Society of Plastics Engineers. In December, Russ was elected Vice Chairman of the *Us Too!* International Board of Directors and will also serve as Board Liaison for Education and Publications Initiatives. As leader of the very active Don Johnson Chapter of *Us Too!* in Hoffman Estates / Palatine IL Russ stays very involved with helping individual men (and their spouses/partners) through their diagnosis. In addition to this active and progressive 400 member *Us Too!* & *Us Too!* PARTNERS chapter, Russ plays a role in a number of other support groups throughout the Chicagoland area. Russ does not fit the stereotype of the prostate cancer "survivor" - he rollerblades more than 100 miles per month. He and his wife Judy have three children and four grandchildren. Russ has served on the *Us Too!* Board of Directors since 2000, serving as Chairman of the Education and Publications Committee.

JO ANN HARDY is a native of Detroit, Michigan. Jo has broken new ground as the first woman to serve on the *Us Too!* Board of Directors. In September 2000, at the age of 46, Jo's husband Jerry faced a diagnosis of prostate cancer. "As a family unit, this has been life altering. After the initial stages of disbelief, shock and a blinding barrage of pamphlets, videos, books and 'treatment choices', where does the family unit as a whole go for healing, not just of the body, but of the emotions and minds of the entire family system?" Realizing the impact, not only on the primary victim, Jo is especially concerned about the spouses and children of men, who, now faced with questions of their own mortality, struggle in a society that demands that they "be

strong" at a time when they may feel most vulnerable. She sees many young families now faced with the tasks of surviving many decades as prostate cancer victims, some being diagnosed at so early an age that statistics and research have yet to determine the long term qualitative or quantitative implications for their health in the later years of life. Quality of life issues become paramount with younger patients, spouses and children involved. Jo and Jerry are faithful members of the local *Us Too!* group at St. Mary Mercy Hospital in Livonia, Michigan. As Missioner for Communication for the Episcopal Diocese of Michigan, Jo works specifically to introduce communication resources and training to congregations and provide opportunities for parish and agency support personnel to network and share resources. Jo and Jerry's daughter, Aaron is a senior at Western Michigan University.

ROBERT F. HUSTEAD, M.D. is a graduate of the Yale School of Medicine and a Diplomat of the American Board of Anesthesiology. He was on the teaching faculty of Johns Hopkins and the University of Kansas. A prostate cancer survivor (diagnosed and treated in 1992) he retired from active practice of anesthesiology in 1998 to pursue a new career of reading research and scientific medical studies and explaining their implications to lay persons. Bob was asked to serve as an *Us Too!* representative to the Congressionally Directed Medical Research Program on Prostate Cancer (PCRP), administered by the Department of Defense (DoD) U.S. Army Medical Research Command, involved granting of approximately \$40 million for prostate cancer research. He's been active in his local *Us Too!* chapter since helping to start it in early 1993 and serves as the group's medical/scientific ombudsman trying to explain concepts and decision making to its members.

JIM KIEFERT, EdD recently retired at the age of 63 years old as a school district superintendent. Diagnosed with prostate cancer, he had surgery in Nov. 1989. Jim was a Fulbright Scholar who studied at American University in Cairo, Egypt and served as Executive Secretary of the Washington Educational Research Association for 19 years. A father to eight

children, grandfather to eleven and great-grandfather to four, Jim credits his diagnosis with changing his life. He and his wife have made changes in diet, exercise, stress reduction, spirituality, and focused on the appreciation of the most important things in life. Jim and his wife received ACS M2M group training in Portland, OR in 1998 and formed and facilitate the groups in The Dalles, OR., and his new community of Olympia, WA.

DONALD R. LYNAM, PhD is Corporate Vice President, Air Conservation for Ethyl Corporation, located in Richmond, Virginia. Dr. Lynam has headed the Air Conservation Department since joining Ethyl in Baton Rouge, Louisiana in April 1981. During this period, he has been actively involved worldwide in the environmental and health aspects of Ethyl Corporation's products. Don is a registered Professional Engineer (PE) and certified in the comprehensive practice of industrial hygiene (CIH). He is a prostate cancer survivor, diagnosed in December 1997, and has been active in the Richmond, VA chapter. In 1999 and 2000 Don participated as a consumer reviewer in the DoD's PCRP. With 2 sons and a family history of cancer Don has a personal goal to increase awareness and enhance public education on prostate cancer. Having managed contract research and carried out research in the environmental health field for approximately 35 years, Don has interacted with scientists, regulatory groups, politicians and environmental advocacy groups throughout his professional career. He will serve as Board Liaison for *Us Too!* Advocacy Initiatives

DANIEL MOORE JR. is of counsel to the firm in Decatur, IL of which he has been a partner since 1958. His primary practice areas have been estate planning and probate administration, real estate law, and representation of businesses. In 1989, Dan became a member of the National Academy of Elder Law Attorneys. He was an elected delegate to the 1990 Illinois White House Conference on Aging, lectured on Elder Law at the 1991 and 1995 People's Law School, participated in the 1997 People's Law School on Grandparents Raiding Grandchildren, and is a frequent speaker on Elder Law topics. He was a delegate to the 1995 White

House Conference on Aging. Also contributing to Dan's understanding of Elder Law are counseling sessions at the Decatur Senior Citizens Center, his former membership on the City's Commission on Aging, presidency of the Visiting Nurses Association, and vice-chair of the Macon County Board of Health. Dan was president of the Decatur Bar Association, chairman of the Elder Law Section Council of the Illinois State Bar Association and recipient of the Association's 1996 Tradition of Excellence Award. In 1996 Dan was appointed by Governor Edgar to the Council on Aging on which he serves as Secretary. He has also served on the Attorney General's committee for developing vulnerable adults protective legislation. From 1997-2000 Dan served on the National Cancer Institute's (NCI) Director's Consumer Liaison Group (DCLG) and is a member of the NCI's Central Institutional Review Board. Dan and his wife Shirley have two adult, married daughters and two granddaughters. He has a long history of civic involvement in Decatur, including presidency of the Decatur Jaycees, The Council of Community Services, the Decatur Board of education and The Symphony Orchestra Guild of Decatur and membership on the Decatur Area Arts Council's Board of Directors. Dan will serve as Chairman of the *Us Too!* Board Membership Committee, Board Liaison for Outreach and Support Initiatives and Assistant Secretary.

LEW MUSGROVE is Chairman of the Board of *Us Too!* and a prostate cancer survivor and long-time prostate cancer activist. He has served as a member of the *Us Too!* Board of Directors, Regional Director (with responsibility for Nevada and Far South California) and/or *Us Too!* Chapter founder/leader for much of the past decade. He has also served as a Board Liaison to the *Us Too!* Advocacy Committee, and is a Founding Member and Director of the California Prostate Cancer Coalition. Following his retirement, after more than thirty-six years with State Farm Insurance Company, Lew founded the Las Vegas *Us Too!* chapter in 1993. The chapter has grown substantially since that time and now boasts attendance averaging nearly 100 members at each meeting. Musgrove has

served as an invited consumer liaison and lay advocate for the Department of Defense's PCRP for three peer review sessions. He has also served as a peer reviewer for the California Cancer Research Program and for three National Cancer Institute SPORE (Specialized Programs of Research Excellence) sessions. Active and committed to serving the prostate cancer community, Lew also serves on the American Cancer Society Prostate Cancer committee as well as its Leadership Council. Lew and his lovely wife Sue Ann remain very active within their community of Las Vegas, Nevada, and although his 6 children and 14 grandchildren keep him on the run, Lew still takes time to play handball several times a week.

DANNY PARKER, PhD brings a unique perspective to the Board not only through his personal understanding of the disease (diagnosed September 2000) - and the empathy that accompanies such an experience - but also through the professional experience of nearly twenty years as a college and university professor, and ten as a higher education administrator, including service as a college president. Married and father of three children, Danny currently serves as Interim President of Truett-McConnell College in Northeast Georgia. He is very accustomed to addressing groups, including the media, in small as well as large-scale settings, and has had a good deal of experience in communicating effectively, and in networking and forging alliances. Danny is a long-distance runner who appreciates music, history and philosophy, and who has had some experience working on political campaigns. His years as an academic have also provided a appreciation for the value of research in problem solving, and he brings the passion and "desire to educate" that comes from the conviction that education is a vitally important tool for mankind, and especially so in disease prevention and treatment.

HARRY PINCHOT is extremely well known within the prostate cancer community through his tireless work to help eradicate this disease. Diagnosed in 1995 with aggressive metastatic disease he was given "as little as six months" to

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Us Too! BOARD OF DIRECTORS

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live. Refusing to accept this diagnosis, Harry launched an intensive personal education campaign. Today, he is not only a survivor, but plays a very visible and active role in sharing with others what he has learned. Harry is the senior member of the Prostate Cancer Research Institute (PCRI) Helpline staff and is involved in numerous prostate cancer support groups in the Los Angeles / Southern California area. He is a member of the ACS "Gold Coast Region Prostate Leadership Team", a member of the Executive Committee and the Board of Directors of The California Prostate Cancer Coalition, the Chairman of The Prostate Cancer Group of Los Angeles, founding Board Member of PCAN (Prostate Cancer Action Network) and is a frequent invited speaker at national and regional PCa conferences. Harry has been involved with *Us Too!* as a Regional Director and chapter leader.

JOE PIPER received an MBA from Harvard University and was active for more than three decades in executive management within the chemical industry. Married with four grown children, Joe continues to keep busy with investments and consulting. An active survivor, he has been responsible for the development and growth of the "Dad's Day 5K" in Houston, sponsored by the *TexUsToo!* Chapter, and serves as the *Us Too!*

Regional Director for South Texas. His experience and expertise in new business development and strategic planning will be important as *Us Too!* continues to expand outreach efforts. His sales and marketing savvy will be important to ensuring *Us Too!* does not lose focus on meeting the needs of those we serve.

JAMAL R.A. RASHEED, is a 47 year old survivor of prostate cancer who was diagnosed at 45. He developed and currently serves as the Director of the Prostate Screening and Awareness Program at Methodist Hospitals of Dallas. In his first year as director, through a number of initiatives and collaborations, Jamal's program screened over 4,000 men which identified over 150 abnormal PSAs and DREs combined. The program's goal for the next year is to exceed 5,000 men screened and they are currently on target to achieve that goal. Jamal hopes to duplicate this screening and awareness effort in major cities throughout the country. During Prostate Cancer Awareness Month, he was able to secure mayoral proclamations from 8 cities in the Dallas / Ft. Worth Area and the Dallas County Commissioners Court, with all agreeing to active education and awareness campaigns. A native of Chicago, with a Bachelor's degree from Southern Illinois University and a Masters Degree from Prairie View A&M., Jamal also serves as a consultant with the Dallas School district to the Health, Education and Wellness Department.

CHARLES J. SELDEN is CEO of Full Perspective Video Services, Inc., a New Jersey service organization providing information industry clients with customized services for direct response marketing. His clients have included PBS (as well as several PBS stations), APIS, Microsoft, Sesame Workshop, Caterpillar Tractor, Eli Lilly, and Times-Mirror Publishing. Charlie also has served as Adjunct Faculty, Direct Marketing Communications for NYU. For more than a decade Charlie also served as an Expert Witness for the Department of Justice and the IRS in cases involving direct mail, product development, and marketing issues. He is a prostate cancer survivor who became aware of *Us Too!* as he was investigating options for his treatment.

REMBERT STOKES has served as Treasurer of *Us Too!* since 1999. After a successful career spanning more than four decades with Bell Telephone Labs and Motorola, Rem was diagnosed with prostate cancer and began research into the disease to facilitate his treatment decisions. Active in civic and educational outreach, Rem has served on numerous Boards as well as on The University Research Committee of The Commission on the Future of Clemson University, his alma mater. As an active member of several support groups in the Chicagoland area, Rem will also serve as Board Liaison for Development Initiatives and Chair of the Finance and Budget Committee in addition to duties as Treasurer.

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