



PROSTATE CANCER HOT SHEET

Us Too! INTERNATIONAL **JULY 2001**

YOU CAN MAKE THE DIFFERENCE!

Us Too! LAUNCHES EXPANDED GRASSROOTS ADVOCACY PROGRAM: WHY IT IS IMPORTANT FOR YOU TO BE A PROSTATE CANCER ADVOCATE

**By Lew Musgrove and Jim Williams
Advocacy Co-Chairs
Us Too! Board of Directors**

As the old military recruitment signs said 'We want you.' You play a most important role in the fight to cure prostate cancer. The recent national election revealed once again the power of one vote. Each of us speaking to an issue(s) to our legislative representatives and their staff has tremendous influence in obtaining the support we need to overcome this disease. Many of us fought in WW II, Korea and/or Vietnam to defend democracy for us and other nations. Now, we ask that you exercise the rights you

fought for by becoming a prostate cancer advocate.

Non-veterans also fought for their rights on the home front by being good citizens and participating in the democratic process in their communities. They also need to now step forward and join the prostate cancer advocacy movement.

Look at what our sisters have done in the breast cancer community. We need to emulate their impact on making this country aware of breast cancer and the need to support breast cancer research.

Us Too! INTERNATIONAL, Inc., (Us Too!) the world's premier and largest prostate cancer (PCa) support network is well positioned to expand its previous programs and move into a more viable grassroots political action program (PAP). Expanding PAP is necessary to influence and gain support from decision-makers in state and federal legislative delegations concerning increased funding

(continued on page7)

Us Too! PUBLICATIONS COMMITTEE LOOKING FOR INPUT, IDEAS, AND A LITTLE MUSCLE

**By Russ Gould
Publications Chair
Us Too! Board of Directors**

Goal #1 in the *Us Too!* strategic plan is: *Provide patients, their families, and others interested/involved in prostate cancer, with valuable, meaningful, and diverse learning opportunities.* The publications committee's objective toward accomplishing this goal is to provide relevant written, audio, video, and electronic information to the chapter leaders and prostate cancer survivors in a form they can easily use.

The heart of the *Us Too!* organization is at the support group chapter level. This is where most of the patient help and survivor interaction occurs. A multimedia resource approach will be most effective. Accordingly, our plan is to provide the chapter leaders with a wide variety of relevant, easily understandable and sometimes technical information pieces. The purpose is to either educate the leader, or to provide training and/or take home materials for the survivor. Our monthly meeting content should go beyond just announcements, new member introduction, and presentations by a doctor.

We plan to develop these resources only after extensive input from the chapter leaders and/or survivors from all interested *Us Too!* Chapters.

(continued on back page)

Us Too! FATHER'S DAY PCA EVENTS SCORE RECORD SUCCESS

BOSTON PROSTATE CANCER WALK 2001 A HUGE SUCCESS

On Father's Day, Sunday, June 17, 2001, the first Boston walk for Prostate Cancer was held on the Boston Common.

The ceremony had Dick Albert, TV5 Meteorologist, as Master of Ceremonies and Charles Austin, retired TV 4 news reporter, as Guest Speaker. Five hospital CEOs and Department heads made short presentations.

The ceremonies commenced at 11:30 AM and the 5K (3.1 mile) walk commenced just past noon. Participants walked three times around the perimeter of the Boston Common, barely stopping for refreshments. The last participant completed the walk at approximately 1:30 PM.

The heavy rain started at approximately 2:30 PM

The Boston Prostate Cancer Walk 2001 Committee estimated 1,000 participants, but the more experienced Park Rangers estimated 1,200 people were walking. As the event proceeded, and even though the weather threatened throughout, determined faces of the participants were all that was apparent as far as the eye could see.

Organizer Stan Klein indicates that "The walk was a smashing success, both for the awareness factor and financially, as more than \$100,000 was raised for Prostate Cancer Research."

The downpour following the conclusion of the event could not prevent the committee from celebrating their achievement in their tents before disbursing.

(continued on back page)

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: 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.

PROSTATE TREATMENT MIGHT INCREASE ALZHEIMER'S RISK

Lexington Herald-Leader

May 15, 2001 (Us Too! May 15)

The standard treatment for prostate cancer drugs to lower testosterone might double the levels of circulating amyloid, the sticky substance that has been implicated as a cause

of Alzheimer's disease, according to Dr. Sam Gandy, a professor of psychiatry and cell biology at New York University School of Medicine and lead author of a letter published in the May 2 Journal of the American Medical Association.

G3139 (GENASENSE™) IN COMBINATION WITH DOCETAXEL (TAXOTERE®) SHOWS PROMISE IN ADVANCED PROSTATE CANCER
May 15, 2001 (Us Too! May 15)

The use of the investigational bcl-2 antisense compound G3139 (Genasense™) combined with the taxane docetaxel (Taxotere®) appears to be effective and well-tolerated in men with hormone-refractory prostate cancer (HRPC), according to preliminary data reported at the 37th Annual Meeting of the American Society of Clinical Oncology (ASCO). The phase I study was conducted at the Cancer Therapy & Research Center, the University of Texas Health Science Center at San Antonio, and Brooke Army Medical Center - also located in San Antonio. The results showed that the use of G3139 in combination with docetaxel every three weeks reduced bcl-2 levels. Treatment also produced sustained decreases in the prostate specific antigen (PSA) levels in four of eight patients who had not been previously treated with a taxane, including a 50-fold reduction in PSA and major objective responses in the liver and viscera (internal organs of the body).

BORON SEEMS TO CUT PCA RISK

HealthScout - May 16 (Us Too! 5/18)

Researchers at UCLA recently discovered that men who consume the lowest amounts of boron in their diets have the highest rates of prostate cancer.

NO 'SAFE' LEVELS FOR CHEMICAL HORMONES
HealthScout - May 16 (Us Too! 5/18)

Chemicals that mimic male and female hormones may not be safe even at levels the government now labels safe, a government panel suggests. The chemicals are called endocrine disruptors, and studies show that some of these hormone-like substances may be harming the reproductive systems or the unborn in animals at levels well below the "no effect" ones defined by previous testing.

MEN FEAR IMPOTENCE MORE THAN CANCER?
Belfast Newsletter - May 18 (Us Too! 5/21)

Men fear impotence more than cancer, AIDS or even death, according to a published survey. Only heart disease scares the nation's male population more than sexual inability, a poll of 500 men in the UK found. Asked about their greatest health fear, 23 per cent said it was heart disease, 18 per cent cited impotence, 10 per cent said AIDS and nine per cent claimed death.

IMMUNOTHERAPY MAY PROVE POTENT WEAPON VS. ADVANCED PCA

AScribe Newswire-May 21 (Us Too! 5/22)

Researchers at UCLA's Jonsson Cancer Center have shown for the first time that immunotherapy delivered via gene therapy may prove to be a potent weapon in the fight against locally advanced prostate cancer, according to an article published in Human Gene Therapy. Lead author Dr. Arie Belldegrun, chief of urologic oncology at the Jonsson Cancer Center, said his early phase study suggests that intra-tumoral immunotherapy, in combination with surgery to remove the prostate, represents a new option for treating men with cancer that has spread beyond the boundaries of the prostate

DRUG BENEFITS GENEROUS FOR VETERANS

Cox News Service May 21 (Us Too! 5/22)

Amid the skyrocketing costs of medicines and Medicare HMOs cutting drug benefits, the U.S. Department of Veterans Affairs has become a financial savior to millions of seniors desperate for a way to afford prescription drugs. All veterans who were honorably discharged are eligible for health benefits through the VA. Veterans who were prisoners-of-war and those with at least 50 percent service-connected disabilities can qualify for free prescription drugs. Veterans who make less than \$12,000 can have the co-payments waived.

NOVANTRONE COULD BENEFIT PCA PATIENTS NAIVE TO HORMONE THERAPY

DataMonitor Healthcare Newswire

May 21 - (Us Too! 5/22)

"I am encouraged by the improvement of PSA scores that Novantrone(R) (mitoxantrone for injection concentrate) has elicited in these patients," said Dr E. David Crawford, Professor of Surgery and Radiation Oncology, University of Colorado, Denver, Colorado. "The results of this study support the need for further evaluation of this new approach to the treatment of hormone naive prostate cancer patients."

TESTOSTERONE LEVEL DROPS AFTER LOW-FAT MEAL

WebMDNews May 17 (Us Too! 5/23)

Watching how much and what kind of fat you eat may have an unexpected benefit, according to a report in the May issue of Metabolism. Meals low in fat may actually decrease levels of testosterone, a male sex hormone that may increase risk of prostate cancer.

PLANT OFFERS CANCER CURE?

Associated Press May 23 (Us Too! 5/24)

KUCHING, MALAYSIA - A wild plant in Ba'Kelalan in the interior of the Miri Division has been discovered to have the potential to cure prostate cancer. The Sarawak

THE Us Too! PROSTATE CANCER HOT SHEET IS MADE POSSIBLE BY AN UNRESTRICTED EDUCATION GRANT FROM



THE INFORMATION AND OPINIONS EXPRESSED IN THIS PUBLICATION ARE NOT ENDORSEMENTS OR RECOMMENDATIONS FOR ANY MEDICAL TREATMENT, PRODUCT, SERVICE OR COURSE OF ACTION BY Us Too! INTERNATIONAL, INC., ITS OFFICERS AND DIRECTORS, OR THE EDITORS OF THIS PUBLICATION. FOR MEDICAL, LEGAL OR OTHER ADVICE, PLEASE CONSULT PROFESSIONAL(S) OF YOUR CHOICE.

Us Too! HEADQUARTERS STAFF
 JOHN A. PAGE, FHIMSS, EXECUTIVE DIRECTOR / CEO
 JACQUELINE KONIECZKA, OFFICE MANAGER
 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:
 HANK PORTERFIELD, CHAIRMAN
 TERRY ROE, VICE CHAIRMAN
 COLONEL JAMES E. WILLIAMS, JR. (RET) SECRETARY
 REMBERT R. STOKES, TREASURER
 JOHN A. PAGE, FHIMSS, EXECUTIVE DIRECTOR / CEO

DIRECTORS:
 COLONEL JAMES R. ANDERSON, USAF (RET)
 JOHN DEBOER, FOUNDER
 JOHN CAMPBELL
 RONALD M. FABRICK, DDS
 RUSS GOULD
 CLAUDE S. HARKINS
 DANIEL M. MOORE, JR.
 LEW MUSGROVE
 REX ZEIGER



Us Too! INTERNATIONAL, INC. IS INCORPORATED IN THE STATE OF ILLINOIS AND RECOGNIZED AS A 501(C)(3) NOT-FOR-PROFIT CHARITABLE CORPORATION. DONATIONS / GIFTS TO Us Too! ARE TAX DEDUCTIBLE.

COPYRIGHT 2001, Us Too! INTERNATIONAL, INC.

Biodiversity Center (SBC) and an Australian pharmaceutical company are conducting further research on the plant's properties. The plant, previously unknown outside Ba'Kelalan, was discovered by a team of scientists from SBC recently.

PCA: SCREENING AND EARLY DETECTION
May 30 (Us Too! 6/1)

Dr. Michael S. Cookson of Vanderbilt University School of Medicine, reports that the cost of screening appears to be acceptable. Currently, the best evidence is derived from population-based studies that appear to show a benefit to prostate cancer screening.

HOPELESSNESS LINKED TO HIGH MORTALITY
HealthCentral.com May 30 (Us Too! 6/1)

A lack of hope for the future is associated with a higher death rate among older men and women, a team of researchers report. "Our findings confirm and extend the results of previous studies suggesting that, in a US sample comprising older women and men of Mexican and European origin, hopelessness is associated with increased risk of mortality," according to Dr. Stephen L. Stern, a psychiatrist at the Univ of TX Health Science Center in San Antonio.

PITT RESEARCHERS USE STEM CELLS TO TREAT INCONTINENCE IN ANIMALS
PR Newswire June 1 (Us Too! 6/1)

Univ of Pittsburgh researchers have successfully used stem cell tissue engineering to restore deficient urethral sphincter muscles in animal models. Researchers successfully regenerated viable muscle using muscle derived stem cells (MDSC).

GROUP SUES HMOs TO FORCE COVERAGE OF PROTON BEAM FOR PCA
LA Times May 31 (Us Too! 6/1)

PacificCare Health Systems Inc. and Health Net Inc. are among five health maintenance organizations named in a lawsuit claiming the insurers are unlawfully denying coverage for proton beam radiation therapy to treat prostate cancer. Cancer Victims for Quality Healthcare, a nonprofit group, filed the suit in Los Angeles County Superior Court to force the insurers to cover the therapy.

Eating OILY FISH To FIGHT PCA

Associated Press May 31 (Us Too! 6/1)
Eating even moderate amounts of oily fish such as mackerel, salmon and sardines might cut the risk of prostate cancer in half, new research suggests. Omega-3 fatty acids, plentiful in dark, oily fish, are known to fight heart disease. They also have shown promise in protecting against cancers of the colon, rectum and ovary. Previous studies have shown fatty fish oils can impede the growth of prostate cancer cells in laboratory dishes and in animals. In another study, prostate

cancer was found less frequently in men who had high levels of fatty acids in their blood.

EMBARRASSMENT IN YOUNG MEN FATAL?
Belfast News Letter May 31 (Us Too! 6/1)

One in three young men put off seeing a doctor because they are embarrassed to talk about personal medical problems, according to a recently published survey. Campaigners warned that men were risking their health by refusing to see their GPs about potentially serious ailments. The survey by Men's Health Magazine for the Institute of Cancer Research found that 31 per cent of men under 25 cited embarrassment as a reason for not going to see a doctor when they had health problems.

CANCER HOSPITALS ARE REFUSING PATIENTS SEEKING SECOND OPINIONS

Wall Street Journal May 31 (Us Too! 6/1)
The second opinion from a specialist for patients with advanced cancer may be quietly going the way of the house call. It's a wrenching and controversial change. The practice of a patient diagnosed with terminal cancer securing a second — or, as is often the case, a third, fourth or even fifth — opinion from a prestigious cancer center is a time-honored American tradition. But some of the top centers are instituting systems to limit the ability of such patients to have their cases reviewed. It's partly a matter of dollars and cents. The patients in question may have few available treatment options and for many medical centers, reviewing massive amounts of charts, X-rays, pathology slides and CAT scans for a patient with a complex and long medical history has become economically unfeasible.

PROSTATE CANCER TREATMENT FOUND?

Sacramento Bee - June 03 (Us Too! 6/4)
Studies by UC Davis Cancer Center researchers have found that genistein, a chemical found in soy, slowed prostate cancer in mice and caused prostate cancer cells to die in tissue cultures. Ralph deVere White, UC Davis Cancer Center director and a prostate cancer specialist, presented the results of the studies at the annual meeting of the AUA.

CANCER VACCINES LIKE FINDING A NEEDLE IN A HAYSTACK

The State Journal-Register Springfield, IL June 01 (Us Too! 6/4)
The idea of revving up the immune system to attack cancers long has tantalized cancer researchers and clinicians. While scientists report some encouraging research results, the dream appears as yet unfulfilled. In a laboratory at Duke Medical School, for example, researchers are trying to use one of the main pillars of the immune system - dendritic cells - to heighten immune response against prostate cancer. Univ of Iowa cancer

researchers are taking a different tack, injecting gene-carrying viruses directly into prostate tumors in an effort to switch on production of an important immune system protein.

CANCER DRUG CAUSES OSTEOPOROSIS
UPI June 04 (Us Too! 6/5)

One of the most common drugs used to treat PCA appears to cause accelerated osteoporosis. A study of prostate cancer patients taking gonadotropin-releasing hormone agonists (GnRH-a), found that many men lost as much as a decade's worth of bone mass in the first year of treatment, resulting in a rapid-onset osteoporosis and increased risk of accidental fracture, according to lead author Dr. Susan Greenspan and other researchers at the University of Pittsburgh Medical Center and Beth Israel Deaconess Medical Center in Boston.

RADIATION THERAPY IMPROVES PROSTATE CANCER SURVIVAL RATES

Health Media Ltd - June 04 (Us Too! 6/5)
Dr John Libertino and colleagues from the Lahey Clinic in Massachusetts followed the progress of men, 66 of whom were given early radiation therapy following a radical prostatectomy. The other patients received either hormonal treatment or late radiation therapy if the cancer was found to have returned. The researchers found a significant difference in the rates of recurrence between the two groups. Those who received early radiation therapy had a recurrence rate of 12 per cent, compared to 38 per cent among patients who received alternative treatment. This represents an effect risk reduction of two-thirds.

SURVIVAL GAP NARROWS BETWEEN BLACK, WHITE MEN FOLLOWING PROSTATECTOMY

FaxWatch Inc. June 04 (Us Too! 6/6)
New data revealed that the previously reported gap between black males and white males with regard to disease-free survival following radical prostatectomy may be narrowing.

RADIOACTIVE SEEDS CAN MIGRATE
UPI - June 6 (Us Too! 6/7)

Radioactive seeds used in prostate cancer procedures apparently can migrate from the groin to all parts of the body, including the lungs. Dozens of the tiny metal pellets are implanted in and around the prostate gland in a process known as brachytherapy, with the radiation emitted by the pellets expected to destroy cancerous cells. "Sometimes, however these seeds can erode through the blood vessel wall and are dispersed into other areas of the body," said Dr. Murali Ankem, a resident in urology at the Robert Wood Johnson Medical Center of the University of New Jersey Medical and Dental School, New Brunswick.

(continued on Page 6)

SCIENTIFIC JOURNAL REVIEW - May/June 2001

The following prostate cancer related articles have appeared in well-known scientific journals. Abstracts only have been posted at the *Us Too!* website (www.ustoo.org). *Us Too!* cannot provide copies of the complete article.

TO OBTAIN A COPY OF THE ARTICLE: take the citation to your local public or hospital library. The librarian can assist you in obtaining a copy of the article from their collection or from interlibrary loan.

American Journal of Clinical Oncology

- Stein S, Zoltick B, Peacock T, Holroyd C, Haller D, Armstead B, Malkowicz SB, Vaughn DJ. Phase II trial of toremifene in androgen-independent prostate cancer: a penn cancer clinical trials group trial. Am J Clin Oncol. 2001 Jun;24(3):283-5. PMID: 11404501

American Journal of Surgical Pathology

- Allan CH, Epstein JI. Nephrogenic adenoma of the prostatic urethra: a mimicker of prostate adenocarcinoma. Am J Surg Pathol. 2001 Jun;25(6):802-8. PMID: 11395559

American Journal of Epidemiology

- Rosenblatt KA, Wicklund KG, Stanford JL. Sexual factors and the risk of prostate cancer. Am J Epidemiol. 2001 Jun 15;153(12):1152-8. PMID: 11415949

British Journal of Cancer

- Bull JH, Ellison G, Patel A, Muir G, Walker M, Underwood M, Khan F, Paskins L. Identification of potential diagnostic markers of prostate cancer and prostatic intraepithelial neoplasia using cDNA microarray. Br J Cancer. 2001 Jun;84(11):1512-9. PMID: 11384102

British Journal of Urology

- Post PN, Hansen BE, Kil PJ, Janssen-Heijnen ML, Coebergh JW. The independent prognostic value of comorbidity among men aged < 75 years with localized prostate cancer: a population-based study. BJU Int. 2001 Jun;87(9):821-6. PMID: 11412219
- Mucci LA, Tamimi R, Lagiou P, Trichopoulou A, Benetou V, Spanos E, Trichopoulos D. Are dietary influences on the risk of prostate cancer mediated through the insulin-like growth factor system? BJU Int. 2001 Jun;87(9):814-20. PMID: 11412218
- Klotz L. Combined androgen blockade in prostate cancer: meta-analyses and associated issues. BJU Int. 2001 Jun;87(9):806-13. PMID: 11412217

Cancer

- Fulmer BR, Bissonette EA, Petroni GR, Theodorescu D. Prospective assessment of voiding and sexual function after treatment for localized prostate carcinoma. Cancer. 2001 Jun 1;91(11):2046-55. PMID: 11391584
- Daniell HW, Clark JC, Pereira SE, Niazi ZA, Ferguson DW, Dunn SR, Figueroa ML, Stratte PT. Hypogonadism following prostate-bed radiation therapy for prostate carcinoma. Cancer. 2001 May 15;91(10):1889-95. PMID: 11346871

Cancer Epidemiology, Biomarkers & Prevention

- Xue WM, Coetzee GA, Ross RK, Irvine R, Kolonel L, Henderson BE, Ingles SA. Genetic determinants of serum prostate-specific antigen levels in healthy men from a multiethnic cohort. Cancer Epidemiol Biomarkers Prev. 2001 Jun;10(6):575-9. PMID: 11401905

Cancer Nursing

- Carlson LE, Ottenbreit N, St Pierre M, Bultz BD. Partner understanding of the breast and prostate cancer experience. Cancer Nurs. 2001 Jun;24(3):231-9. PMID: 11409068
- Agho AO, Lewis MA. Correlates of actual and perceived knowledge of prostate cancer among African Americans. Cancer Nurs. 2001 Jun;24(3):165-71. PMID: 11409059

Cancer Research

- Glinsky VV, Glinsky GV, Rittenhouse-Olson K, Huflejt ME, Glinskii OV, Deutscher SL, Quinn TP. The role of thomsen-friedenreich antigen in adhesion of human breast and prostate cancer cells to the endothelium. Cancer Res. 2001 Jun 15;61(12):4851-7. PMID: 11406562
- Singal (2) R, van Wert J, Bashambu M. Cytosine Methylation Represses Glutathione S-Transferase P1 (GSTP1) Gene Expression in Human Prostate Cancer Cells. Cancer Res. 2001 Jun 15;61(12):4820-4826. PMID: 11406558
- Akalin A, Elmore LW, Forsythe HL, Amaker BA, McCollum ED, Nelson PS, Ware JL, Holt SE. A Novel Mechanism for Chaperone-mediated Telomerase Regulation during Prostate Cancer Progression. Cancer Res. 2001 Jun 15;61(12):4791-4796. PMID: 11406554
- Luo J, Duggan DJ, Chen Y, Sauvageot J, Ewing CM, Bittner ML, Trent JM, Isaacs WB. Human Prostate Cancer and Benign Prostatic Hyperplasia: Molecular Dissection by Gene Expression Profiling. Cancer Res. 2001 Jun 15;61(12):4683-4688. PMID: 11406537
- Amara N, Palapattu GS, Schrage M, Gu Z, Thomas GV, Dorey F, Said J, Reiter RE. Prostate Stem Cell Antigen Is

Overexpressed in Human Transitional Cell Carcinoma. Cancer Res. 2001 Jun 15;61(12):4660-4665. PMID: 11406532

- Li L, Yang G, Ebara S, Satoh T, Nasu Y, Timme TL, Ren C, Wang J, Tahir SA, Thompson TC. Caveolin-1 mediates testosterone-stimulated survival/clonal growth and promotes metastatic activities in prostate cancer cells. Cancer Res. 2001 Jun 1;61(11):4386-92. PMID: 11389065
- Gregory CW, He B, Johnson RT, Ford OH, Mohler JL, French FS, Wilson EM. A mechanism for androgen receptor-mediated prostate cancer recurrence after androgen deprivation therapy. Cancer Res. 2001 Jun 1;61(11):4315-9. PMID: 11389051
- Tahir SA, Yang G, Ebara S, Timme TL, Satoh T, Li L, Goltsov A, Ittmann M, Morrisett JD, Thompson TC. Secreted caveolin-1 stimulates cell survival/clonal growth and contributes to metastasis in androgen-insensitive prostate cancer. Cancer Res. 2001 May 15;61(10):3882-5. PMID: 11358800

Cancer Treatment Review

- Garnero P. Markers of bone turnover in prostate cancer. Cancer Treat Rev. 2001 Jun;27(3):187-92. PMID: 11417970
- Hamdy FC. Prognostic and predictive factors in prostate cancer. Cancer Treat Rev. 2001 Jun;27(3):143-51. PMID: 11417964

Endocrinology

- Ahmad AM, Hopkins MT, Thomas J, Ibrahim H, Fraser WD, Vora JP. Body composition and quality of life in adults with growth hormone deficiency; effects of low-dose growth hormone replacement. Clin Endocrinol (Oxf). 2001 Jun;54(6):709-17. PMID: 11422104

Health Expectations

- Entwistle V. The potential contribution of decision aids to screening programmes. Health Expect. 2001 Jun;4(2):109-15. PMID: 11359541

Human Gene Therapy

- Belledgrun A, Tso CL, Zisman A, Naitoh J, Said J, Pantuck AJ, Hinkel A, deKernion J, Figlin R. Interleukin 2 gene therapy for prostate cancer: phase I clinical trial and basic biology. Hum Gene Ther. 2001 May 20;12(8):883-92. PMID: 11387054

International Journal of Cancer

- Campbell T, Blasko J, Crawford ED, Forman J, Hanks G, Kuban D, Montie J, Moul J, Pollack A, Raghavan D, Ray P, Roach M 3rd, Steinberg G, Stone N, Thompson I, Vogelzang N, Vijayakumar S. Clinical staging of prostate cancer: Reproducibility and clarification of issues. Int J Cancer. 2001 Jun 20;96(3):198-209. PMID: 11410889
- Oliver SE, May MT, Gunnell D. Interna-

tional trends in prostate-cancer mortality in the "PSA era". *Int J Cancer*. 2001 Jun 15;92(6):893-8. PMID: 11351313

- Lacombe L, Maillette A, Meyer F, Veilleux C, Moore L, Fradet Y. Expression of p21 predicts PSA failure in locally advanced prostate cancer treated by prostatectomy. *Int J Cancer*. 2001 May 20;95(3):135-9. PMID: 11307144

International Journal of Pharmacology

- Gabor F, Klausegger U, Wirth M. The Interaction between wheat germ agglutinin and other plant lectins with prostate cancer cells Du-145. *Int J Pharm*. 2001 Jun 19;221(1-2):35-47. PMID: 11397565

International Journal of Radiation Oncology Biology Physics

- Snyder KM, Stock RG, Hong SM, Lo YC, Stone NN. Defining the risk of developing grade 2 proctitis following 125I prostate brachytherapy using a rectal dose-volume histogram analysis. *Int J Radiat Oncol Biol Phys*. 2001 Jun 1;50(2):335-41. PMID: 11380219
- Chuba PJ, Moughan J, Forman JD, Owen J, Hanks G. The 1989 patterns of care study for prostate cancer: five-year outcomes. *Int J Radiat Oncol Biol Phys*. 2001 Jun 1;50(2):325-34. PMID: 11380218

International Journal of Urology

- Egawa S, Suyama K, Arai Y, Tsukayama C, Matsumoto K, Kuwao S, Baba S. Treatment outcome by risk group after radical prostatectomy in Japanese men. *Int J Urol*. 2001 Jun;8(6):295-300. PMID: 11389745
- Saika T, Kusaka N, Tsumihama T, Yamato T, Ohashi T, Suyama B, Arata R, Nasu Y, Kumon H. Treatment of androgen-independent prostate cancer with dexamethasone: A prospective study in stage D2 patients. *Int J Urol*. 2001 Jun;8(6):290-4. PMID: 11389744

Journal of Clinical Oncology

- Kantoff PW, Halabi S, Farmer DA, Hayes DF, Vogelzang NA, Small EJ. Prognostic Significance of Reverse Transcriptase Polymerase Chain Reaction for Prostate-Specific Antigen in Men With Hormone-Refractory Prostate Cancer. *J Clin Oncol*. 2001 Jun 15;19(12):3025-3028. PMID: 11408497
- Shariat SF, Shalev M, Menesses-Diaz A, Kim IY, Kattan MW, Wheeler TM, Slawin KM. Preoperative plasma levels of transforming growth factor beta(1) (tgf-beta(1)) strongly predict progression in patients undergoing radical prostatectomy. *J Clin Oncol*. 2001 Jun 1;19(11):2856-64. PMID: 11387358

Journal of Clinical Epidemiology

- Concato J, Peduzzi P, Kamina A, Horwitz RI. A nested case-control study of the ef-

fectiveness of screening for prostate cancer: research design. *J Clin Epidemiol*. 2001 Jun;54(6):558-64. PMID: 11377115

The Journal of Clinical Endocrinology and Metabolism

- Stoch SA, Parker RA, Chen L, Buble G, Ko YJ, Vincelette A, Greenspan SL. Bone loss in men with prostate cancer treated with gonadotropin-releasing hormone agonists. *J Clin Endocrinol Metab*. 2001 Jun;86(6):2787-91. PMID: 11397888

Journal of General Internal Medicine

- Frosch DL, Kaplan RM, Felitti V. The Evaluation of Two Methods to Facilitate Shared Decision Making for Men Considering the Prostate-Specific Antigen Test. *J Gen Intern Med*. 2001 Jun;16(6):391-398. PMID: 11422636

Journal of Urology

- Szostak MJ, Kaur P, Amin P, Jacobs SC, Kyprianou N. Apoptosis and bcl-2 expression in prostate cancer: significance in clinical outcome after brachytherapy. *J Urol*. 2001 Jun;165(6 Pt 1):2126-30. PMID: 11371940
- Neulander EZ, Rivera I, Wajzman Z. Re: Neoadjuvant hormonal ablative therapy before radical prostatectomy: a review. Is it indicated? *J Urol*. 2001 Jun;165(6 Pt 1):2008. PMID: 11371917
- Abbou CC, Hoznek A, Salomon L, Olsson LE, Lobontiu A, Saint F, Cicco A, Antiphon P, Chopin D. Laparoscopic radical prostatectomy with a remote controlled robot. *J Urol*. 2001 Jun;165(6 Pt 1):1964-6. PMID: 11371890
- Murphy WM, Rivera-Ramirez I, Luciani LG, Wajzman Z. Second opinion of anatomical pathology: a complex issue not easily reduced to matters of right and wrong. *J Urol*. 2001 Jun;165(6 Pt 1):1957-9. PMID: 11371888
- Kim ED, Nath R, Kadmon D, Lipshultz LI, Miles BJ, Slawin KM, Tang HY, Wheeler T, Scardino PT. Bilateral nerve graft during radical retropubic prostatectomy: 1-year followup. *J Urol*. 2001 Jun;165(6 Pt 1):1950-6. PMID: 1137188
- Shah O, Melamed J, Lepor H. Analysis of apical soft tissue margins during radical retropubic prostatectomy. *J Urol*. 2001 Jun;165(6 Pt 1):1943-8; discussion 1948-9. PMID: 11371886
- Chin JL, Pautler SE, Mouraviev V, Touma N, Moore K, Downey DB. Results of salvage cryoablation of the prostate after radiation: identifying predictors of treatment failure and complications. *J Urol*. 2001 Jun;165(6 Pt 1):1937-41; discussion 1941-2. PMID: 11371885
- Okihara K, Fritsche HA, Ayala A, Johnston DA, Allard WJ, Babaian RJ. Can complexed prostate specific antigen and

prostatic volume enhance prostate cancer detection in men with total prostate specific antigen between 2.5 and 4.0 ng/ml. *J Urol*. 2001 Jun;165(6 Pt 1):1930-6. PMID: 11371884

- Lytton B. Prostate cancer: a brief history and the discovery of hormonal ablation treatment. *J Urol*. 2001 Jun;165(6 Pt 1):1859-62. PMID: 11371867

Lancet

- Frauscher F, Klauser A, Halpern EJ, Hominger W, Bartsch G. Detection of prostate cancer with a microbubble ultrasound contrast agent. *Lancet*. 2001 Jun 9;357(9271):1849-50. PMID: 11410195
- Terry P, Lichtenstein P, Feychting M, Ahlbom A, Wolk A. Fatty fish consumption and risk of prostate cancer. *Lancet*. 2001 Jun 2;357(9270):1764-6. PMID: 11403817

Mayo Clinic Proceedings

- Roberts SG, Blute ML, Bergstralh EJ, Slezak JM, Zincke H. PSA doubling time as a predictor of clinical progression after biochemical failure following radical prostatectomy for prostate cancer. *Mayo Clin Proc*. 2001 Jun;76(6):576-81. PMID: 11393495
- Wieder JA, Belldegrin AS. The utility of PSA doubling time to monitor prostate cancer recurrence. *Mayo Clin Proc*. 2001 Jun;76(6):571-2. PMID: 11393493

Molecular Cell Endocrinology

- Brinkmann AO. Molecular basis of androgen insensitivity. *Mol Cell Endocrinol*. 2001 Jun 20;179(1-2):105-9. PMID: 11420135
- Pasquali D, Staibano S, Prezioso D, Franco R, Esposito D, Notaro A, De Rosa G, Bellastella A, Sinisi AA. Estrogen receptor beta expression in human prostate tissue. *Mol Cell Endocrinol*. 2001 Jun 10;178(1-2):47-50. PMID: 11403893

New Jersey Medicine

- Perotti M. Understanding PSA and prostate cancer risk assessment. *N J Med*. 2001 Jun;98(6):35-8. PMID: 11419188

Pathology International

- Segawa N, Mori I, Utsunomiya H, Nakamura M, Nakamura Y, Shan L, Kakudo K, Katsuoka Y. Prognostic significance of neuroendocrine differentiation, proliferation activity and androgen receptor expression in prostate cancer. *Pathol Int*. 2001 Jun;51(6):452-9. PMID: 11422807

Prostate

- Dorai T, Cao YC, Dorai B, Buttyan R, Katz AE. Therapeutic potential of curcumin in human prostate cancer. III. Curcumin inhibits proliferation, induces apoptosis, and

(continued on page 6)

JOURNAL CITATIONS

(continued from P. 5)

inhibits angiogenesis of LNCaP prostate cancer cells in vivo. Prostate. 2001 Jun 1;47(4):293-303. PMID: 11398177

- Tieva A, Stattin P, Wikstrom P, Bergh A, Damber JE. Gonadotropin-releasing hormone receptor expression in the human prostate. Prostate. 2001 Jun 1;47(4):276-84. PMID: 11398175
- Strom SS, Spitz MR, Yamamura Y, Babaian RJ, Scardino PT, Wei Q. Reduced expression of hMSH2 and hMLH1 and risk of prostate cancer: A case-control study. Prostate. 2001 Jun 1;47(4):269-75. PMID: 11398174
- Newcomer LM, King IB, Wicklund KG, Stanford JL. The association of fatty acids with prostate cancer risk. Prostate. 2001 Jun 1;47(4):262-8. PMID: 11398173
- Vis AN, Hoedemaeker RF, Roobol M, van Der Kwast TH, Schroder FH. Tumor characteristics in screening for prostate cancer with and without rectal examination as an initial screening test at low PSA (0.0-3.9 ng/ml). Prostate. 2001 Jun 1;47(4):252-61. PMID: 11398172
- Romanov VI, Durand DB, Petrenko VA. Phage display selection of peptides that affect prostate carcinoma cells attachment and invasion. Prostate. 2001 Jun 1;47(4):239-51. PMID: 11398171
- Smith PC, Keller ET. Anti-interleukin-6 monoclonal antibody induces regression of human prostate cancer xenografts in nude mice. Prostate. 2001 Jun 15;48(1):47-53. PMID: 11391686
- Collette L, Studer UE, Schroder FH, Denis LJ, Sylvester RJ. Why phase III trials of maximal androgen blockade versus castration in M(1) prostate cancer rarely show statistically significant differences. Prostate. 2001 Jun 15;48(1):29-39. PMID: 11391684
- Xing N, Qian J, Bostwick D, Bergstrahl E, Young CY. Neuroendocrine cells in human prostate over-express the anti-apoptosis protein survivin. Prostate. 2001 Jun 15;48(1):7-15. PMID: 11391682
- Denmeade SR, Sokoll LJ, Chan DW, Khan SR, Isaacs JT. Concentration of enzymatically active prostate-specific antigen (PSA) in the extracellular fluid of primary human prostate cancers and human prostate cancer xenograft models. Prostate. 2001 Jun 15;48(1):1-6. PMID: 11391681
- McNeel DG, Nguyen LD, Ellis WJ, Higano CS, Lange PH, Disis ML. Naturally occurring prostate cancer antigen-specific T cell responses of a Th1 phenotype can be detected in patients with prostate cancer. Prostate. 2001 May 15;47(3):222-9. PMID: 11351352

Radiology

- Coakley FV, Hricak H, Wefer AE, Speight JL, Kurhanewicz J, Iii MR. Brachytherapy for prostate cancer: endorectal mr imaging of local treatment-related changes. Radiology. 2001 Jun;219(3):817-21. PMID: 11376276

Seminars in Cancer Biology

- Huss WJ, Maddison LA, Greenberg NM. Autochthonous mouse models for prostate cancer: past, present and future. Semin Cancer Biol. 2001 Jun;11(3):245-260. PMID: 11407949

Urology

- Chang SS, Reuter VE, Heston WD, Gaudin PB. Comparison of anti-prostate-specific membrane antigen antibodies and other immunomarkers in metastatic prostate carcinoma. Urology. 2001 Jun;57(6):1179-1183. PMID: 11377343
- Moskalik A, Carson PL, Rubin JM, Bree RL, Fowlkes JB, Rubin MA, Wojno K, Manley S, Montie JE. Analysis of three-dimensional ultrasound Doppler for the detection of prostate cancer. Urology. 2001 Jun;57(6):1128-1132. PMID: 11377325
- Do TM, Parker RG, Smith RB, Kagan AR. High-grade carcinoma of the prostate: a comparison of current local therapies. Urology. 2001 Jun;57(6):1121-1126. PMID: 11377322
- Liu JJ, Macy M, Lai Y, Terris MK. Critical evaluation of the current indications for transition zone biopsies. Urology. 2001 Jun;57(6):1117-1120. PMID: 11377321
- Epstein JI, Walsh PC, Carter HB. Importance of posterolateral needle biopsies in the detection of prostate cancer. Urology. 2001 Jun;57(6):1112-1116. PMID: 11377320
- Miller MC, O'Dowd GJ, Partin AW, Veltri RW. Contemporary use of complexed PSA and calculated percent free PSA for early detection of prostate cancer: impact of changing disease demographics. Urology. 2001 Jun;57(6):1105-1111. PMID: 11377319
- Potter SR, Horniger W, Tinzl M, Bartsch G, Partin AW. Age, prostate-specific antigen, and digital rectal examination as determinants of the probability of having prostate cancer. Urology. 2001 Jun;57(6):1100-1104. PMID: 11377318
- Roehrborn CG, Sech S, Montoya J, Rhodes T, Girman CJ. Interexaminer reliability and validity of a three-dimensional model to assess prostate volume by digital rectal examination. Urology. 2001 Jun;57(6):1087-1092. PMID: 11377314
- Roberts WW, Bergstrahl EJ, Blute ML, Slezak JM, Carducci M, Han M, Epstein JI, Eisenberger MA, Walsh PC, Partin AW. Contemporary identification of patients at

high risk of early prostate cancer recurrence after radical retropubic prostatectomy. Urology. 2001 Jun;57(6):1033-1037. PMID: 1137729

PCA NEWS YOU CAN USE

(continued from P. 3)

DRUG KEEPS PCA AT BAY
UPI June 06 (Us Too! 6/7)

An oral drug that stymies a prostate tumor's ability to tap male hormones reduced by 42 percent the risk of disease progression, the largest prostate-cancer study to date has found. Bicalutamide tablets, marketed as Casodex, interfere with the ability of prostate cancer cells to use male hormones to grow. The hormone-like medication blocks the action of androgens, testosterone among them, at the cellular level.

HIGH-TECH DETECTION OF PCA

Ivanhoe News June 08 (Us Too! 6/11)

Researchers from Thomas Jefferson University in Philadelphia used color Doppler ultrasonography to detect prostate cancer and compared its efficacy with that of a conventional ultrasonography. 24 out of 84 patients had prostate cancer. Researchers detected the cancer in 23 of the 24 patients using the color Doppler targeted biopsy. The cancer was only detected in 17 of the 24 patients with the conventional ultrasonography-guided biopsy. Therefore, researchers say the color Doppler has a better detection rate than that of the conventional ultrasonography. Researchers also say the results of their study show the color Doppler is cost effective. This is because it allows for a targeted biopsy approach that will reduce the number of biopsy cores.

NEW LEUKEMIA DRUG MAY FIGHT PCA
The Fort Worth Star-Telegram - June 11 (Us Too! June 12)

Gleevec, the promising new cancer drug already approved for treating some leukemia patients, has researchers cautiously optimistic that it might help fight prostate cancer. Studies have found that Gleevec, also known as STI571, inhibits tumor growth and preserves bone structure in the tibia of mice implanted with human prostate cancer cells.

FAST TRACK APPROACH TO PCA SURGERY
Cosmiverse.com June 11 (Us Too! 6/12)

Researchers from the University of Michigan Comprehensive Cancer Center are examining a new 'fast track' approach to prostate cancer surgery that combines existing techniques to

(continued on Page 7)

YOU CAN MAKE THE DIFFERENCE!!

(continued from P. 1)

and support for critically needed PCa research, awareness, screening, treatment and palliative care as outlined in *Us Too!*'s strategic plan. PAP is also necessary to address a number of other PCa-related issues on the state and federal levels. For example, the promotion and establishment of state cancer advisory councils, the allocation of funds to enhance local PCa education/awareness programs and legislation to guarantee insurance coverage for PCa screening and testing.

Several organizations (e.g. American Cancer Society (ACS) and National Prostate Cancer Coalition (NPCC)) have offices in Washington, DC. These offices are actively monitoring and "working the hill" concerning federal legislation which supports increased funding for the National Institutes of Health (NIH), National Cancer Institute (NCI), Center for Disease Control and Prevention (CDC) and Department of Defense (DOD) research funding programs. These efforts are necessary and will continue to be supported by *Us Too!*. However, *Us Too!* can also better influence national and state legislative matters through its extensive network at the grassroots level. Our limited resources dictate that we maximize our strength where it exists - at the local level. *Us Too!* members enjoy a unique opportunity and challenge in educating and working with local legislative offices to influence funding and legislation. These local units have the opportunity to expand relationships and open new communication channels on a personal, one-to-one level that many times is not available in Washington, DC. Congressional members are more readily able to see you and spend more time with you in their home districts without distractions. The old saying that all politics are local is grounded in reality. Legislators listen to voters in their home districts. This is true for state and federal legislators.

The *Us Too!* Board of Directors at its Spring Meeting approved the recommendations of its advocacy committee (Committee). The Committee envisioned *Us Too!* placing documents and software on the Web for use by its members. These "user-friendly" programs can generate letters and e-mails

to congress and state legislators, produce analysis and reports, create data files, measure alert program results, match street addresses with federal and state congressional districts, provide bio data on the representatives, provide their voting record and a host of other information. Some have questioned the value of this type of "electronic politicking", where offices of our political representatives at the state and/or federal level are inundated with e-mails concerning an issue prompted by an organization's alert program. However, in some trial efforts it was clear that they *did* listen. After receiving a number of calls for these electronic letters concerning a PCa issue, these offices have often requested - "please stop the mail - we're going to support your position". The Board believes that the interest that is reflected by the constituency on an issue does alert the representative and his/her staff to the issue at hand. Whether they read all the mail, count the pieces or weigh the mail, hearing from the grassroots does have a greater effect than many of us realize.

The Board also approved the immediate implementation of the revised *Us Too!* Advocacy Program. The overall goal of this program is to identify, enlist and support a national team of prostate cancer advocates comprised of *Us Too!* chapter members, their families and others with an interest in increasing awareness of and advocacy for prostate cancer. The program will:

- Identify individuals willing to take on the role of Advocacy Coordinator
- Provide local and national training
- Give regular information updates
- Enhance an already powerful resource network of individuals that are able to effect change in public policy

The goal is for each *Us Too!* Chapter to have one chapter advocacy coordinator. This person will serve as the key point of contact within the support group and the larger community on federal and state legislation and other policy matters. He/she will:

- Attend local/national training e.g., "Train the Trainer" program
- Be given regular information updates on local and national issues affecting prostate cancer
- Establish voice and email "trees" within the chapter to expedite communications and alert the membership of pending legislative matters.
- Be asked to provide regular advocacy

- updates at chapter meetings
- Identify other chapter members interested in participating in advocacy
- Manage letter writing and phone campaigns on a local basis
- Host elected officials at chapter meetings
- Raise awareness via speeches/press releases/special events

Last but not least the *Us Too!* Board approved the recruitment of a full-time paid National Director of Advocacy to coordinate and assist the grassroots members who want to get involved in advocacy.

Now is the time to step forward. **YOU** can make the difference. Join *Us Too!*'s Advocacy Program today. Contact your chapter leader / facilitator and /or John Page, CEO *Us Too!* INTERNATIONAL, Inc at (630) 795-1002 (outside Chicago area call 1-800-80-UsToo), or e-mail jpage@ustoo.com

PCA NEWS YOU CAN USE

(continued from P. 6)

get men out of the hospital and home within 24 hours of having their prostates removed, without making them less satisfied with their care or putting them at extra risk of complications. The finding comes from a study comparing a fast track prostate surgery pathway with a standard approach that keeps patients admitted to the hospital for up to three days. The study is the first of its kind. The 24-hour approach by UM stood up well to the prospective competition, coming through with high patient satisfaction rates and low complication rates nearly identical to those seen with standard care, according to senior author Martin Sanda, M.D.

PROSTATE WILL BE THE MOST COMMON TYPE OF CANCER IN 2020

The Daily Telegraph London June 25 (Us Too! 6/26)

PROSTATE cancer is expected to become the most common form of the disease in the next 20 years, overtaking lung, breast and bowel cancers. By 2020 prostate cancer in men will top the league table in the Western world, followed by breast cancer in women, according to an analysis by the Cancer Research Campaign.

For a daily e-mail on the latest PCa news subscribe to the free "Us Too! Prostate Cancer News You Can Use"

Visit:

**www.ustoo.org
for more information**

BOSTON PCA WALK

(continued from P. 1)

Editor's Note: Late last year Stan approached me about planning a Walk to raise both awareness of PCa and money for PCa research. At that time it was clear that his determination would see this project get off the ground and onto the Boston Common. As he reported his progress you could sense the excitement - here was one man MAKING A DIFFERENCE BECAUSE HE TRIED!!!

Joe Piper, Us Too! Regional Director for the Houston, TX area - and a veteran "Dad's Day 5K" organizer - consulted with Stan and shared in his excitement at seeing his project come to life. I know I speak for everyone at Us Too! and for the millions of men who will benefit from what was done in Boston when I say:

CONGRATULATIONS TO STAN, HIS ENTIRE COMMITTEE AND THE 1,200 PARTICIPANTS FOR MAKING THIS A REALITY!!!!

VISIT www.UsToo.org

FOR

- * CURRENT CLINICAL TRIALS,
- * SPECIAL ANNOUNCEMENTS
- * HOTSHEET ARCHIVES
- * PCA NEWS YOU CAN USE
- * PCA CANCER PROFILER
- * SUPPORT GROUPS

UNBIASED PCA INFORMATION
AND EDUCATION TO SERVE YOU

PUBLICATIONS COMMITTEE

(continued from P. 1)

We are looking for answers to questions such as:

- How can we improve each of our publications and other materials to enhance your chapter meetings?
- What kinds of "take home" materials would be most beneficial to your group members? (With some flexibility needed depending on whether it is a newly diagnosed person, the average repeat survivor, or a man with bone metastasized prostate cancer.)

Please take a few minutes to tell us what you do and make some suggestions. Let's help each other - "The Synergy of Brotherhood". Tell us what you like and don't like. Make suggestions for changes in each area.

Examples of materials that can be provided are:

- pamphlets
- books
- book reviews
- tutorials
- technical articles
- videos
- CDs/DVDs
- "canned" presentations - in PowerPoint, 35mm slide or overhead formats
- a list of resources available from Us Too! headquarters
- leader training materials
- speaker subject lists

We have developed an initial list of

projects to be used to stimulate ideas for the kinds of things that can be provided to enhance your chapter meeting and make attendance more meaningful. Development of coordinated "take home" materials can be very helpful to the patient and his family.

Members of the Committee will be contacting chapter leaders to solicit suggestions to improve our publications and other materials. Please feel free to share your ideas!

Many chapters have already developed a "newcomer" information packet. We would like those chapters to send an example of what, if anything, you present at chapter meetings and/or provide to new members. We will then assimilate the best sections from each and develop a handbook that headquarters can provide to you. Chapter leaders should send a copy of their materials (or at least a descriptive list of what you include) to Jackie at Us Too! headquarters. This will be very helpful to other chapter members.

Finally, if you are interested in working on the Publications Committee we have an opening for YOU! Simply contact Us Too! Headquarters today and we'll put you to work!

Russ Gould is a very active PCa survivor. He serves as Leader of the Don Johnson Us Too! Chapter in Hoffman Estates, IL. He is also a member of the Us Too! Board of Directors and serves as Chair of the recently formed Publications Committee.

Us Too! INTERNATIONAL is a charitable volunteer driven organization funded by donations from individuals, memorial gifts, and grants from agencies, medical professionals, pharmaceutical and other companies. Contribute today!

Name: _____ Company: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: () _____ Fax: () _____ eMail: _____

Please accept my enclosed tax-deductible donation to Us Too! a not-for-profit 501(c)(3) organization.

Amount ___\$25 ___\$50 ___\$75 ___\$100 Other: \$ _____ Check #

Visa/Master Card # _____ Expiration Date: /

Signature _____

Us Too! INTERNATIONAL, Inc., 5003 Fairview Ave., Downers Grove, IL 60515

CONTRIBUTE TODAY