



PROSTATE CANCER HOT SHEET

Us Too! INTERNATIONAL **OCTOBER 2001**

**MID-WEST REGIONAL
CHAPTER HOSTS
SUCCESSFUL WEB-BASED
VIDEO TELECONFERENCE**
Bill Palos
Mid-West Regional Director
Us Too! INTERNATIONAL

On August 18, 2001, we conducted a program which may be an outstanding method for speakers to share their knowledge and views on prostate cancer issues to groups throughout the country, regardless of their size.

During the Regional Director's meeting held in Long Beach, California last October 2000, the *Us Too! INTERNATIONAL's* Regional Directors and Staff attended a special presentation sponsored by the Fullerton *Us Too!* Chapter featuring Dr. Stephen Strum from the Prostate Cancer Research Institute (PCRI). The presentation was accomplished with Dr. Strum in a remote area broadcasting his presentation (video and audio) live to the audience using the internet and standard telephone lines. The broadcast also supported two-way communication between the speaker and the audience. The intent of the demonstration was to illustrate how easily this could be accomplished between any given points in the United States.

As the Regional Director from the Mid West region, I felt this would be a great opportunity for some of the smaller
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September 11, 2001

EDUCATIONAL SEMINAR AND GOLF CLASSIC RAISE NEARLY \$40,000 FOR PROSTATE CANCER EDUCATION AND SUPPORT

As part of the 2001 *Us Too!* Chicagoland Golf Classic our major sponsor, Aventis Pharmaceuticals, provided a grant for an educational seminar which was held at the Oak Brook Hills Resort and Golf Club

University of Chicago].

Dr. Sokoloff reviewed emerging therapies for the treatment of advanced prostate cancer. Dr. Vogelzang provided



Dr. Mitchell Sokoloff, Dr. Nicholas Vogelzang, and Dr. Christopher Ryan discuss *Current Trends in Advanced Prostate Cancer Management* at the Scientific Seminar held prior to the 2001 *Us Too!* Chicagoland Golf Classic

on July 20. These educational sessions, *Current Trends in Advanced Prostate Cancer Management* provided an outstanding educational event with an unparalleled faculty lineup.

Nicholas J. Vogelzang, M.D., [Director, University of Chicago Cancer Research Center and Fred C. Buffett Professor of Medicine and Chair in Genitourinary Oncology, and Professor of Medicine and Surgery (Urology) and the Ben May Institute for Cancer Research] served as Moderator and Speaker for the seminar. Joining him as faculty were: Christopher W. Ryan, M.D. [Executive Officer, CALGB and Instructor, Hematology/Oncology Section., Dept. of Medicine, University of Chicago] and Mitchell H. Sokoloff, M.D. [Assistant Professor., Urology Section., Dept. of Surgery,

the more than 50 physicians and prostate cancer activists in attendance an outstanding overview of the current state of research. Dr. Ryan spoke on Chemotherapy for Hormone Refractory Prostate Cancer including Mitoxantrone, Taxotere, and the Exisulind study.

The speakers then delighted the participants with a no-holds barred and highly interactive Q&A session.

Following the day's scientific sessions, more than 135 participants headed off to the beautiful and challenging Dick Nugent-designed golf course for a shotgun start / scramble format tournament. The weather cooperated fully and a great time was had by all.

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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.

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U. Iowa Tests Prostate-Cancer Advance
U-WIRE 09/28
Us Too! NEWS 10/01

University of Iowa Health Care physicians are the first in the nation to test a breakthrough in the treatment of prostate cancer. The new treatment, which underwent approximately

five years of pre-clinical studies, involves using an adenovirus-prostate-specific antigen vaccine to treat patients. Using a vaccine in cancer treatment is promising because it promotes the buildup of the patient's immune system and T-cells, said Richard Williams, the head of the UI urology department. Patients qualify for the clinical trial depending on their unresponsiveness to previous treatments. Researchers are only measuring large tumors that have spread beyond the prostate so they can track their reduction after taking the vaccine. Patients must undergo CAT and bone scans and have their blood purified to ensure that no complications will arise as a reaction to the vaccine.

Exercise And Medication Best Way to Control Incontinence
Knight Ridder/Tribune - 09/29
Us Too! NEWS 10/01

Urinary incontinence is a source of embarrassment to those who have it. According to the National Association for Continence, a non-profit organization based in South Carolina, 25 million Americans suffer from this. The easiest and cheapest way to prevent urinary incontinence is to do Kegel exercises, which help strengthen pelvic muscles. A patient can identify these muscles by stopping and continuing the flow while urinating. It's recommended patients do three sets of 50 contractions every day. But patients often get tired or forget to do the exercises, which is why he tells patients about the chair in his office that works the pelvic muscles. People should record their urinary problems, such as how many times they get up at night or the amount of accidents they have, before going to the doctor. They should also drink lots of water, eat foods high in fiber and cut back on caffeine and alcohol, Muller said. For more information, contact the National Association for Continence at <http://www.nafc.org> or at 800-252-3337 (BLADDER), which provides information in English and Spanish.

Dairy Products Up Prostate Cancer Risk
United Press International - 09/24
Us Too! NEWS 09/25

Too much dietary calcium, like that found in dairy products, can increase the risk of developing prostate cancer, Harvard researchers report. "This is a 'head's up' rather than the sounding of an alarm," said lead author Dr. June Chan, formerly a researcher at Harvard University Medical School in Cambridge and now assistant professor of epidemiology and urology at the University of California, San Francisco. They found the highest 20 percent of dairy product consumers had a 34 percent greater risk of prostate cancer. "To put this in perspective, saturated fat from red meat intake has been associated with a

200 to 250 percent increase risk of certain cancers. So what we are talking about here is a relatively modest increase in risk, but one that men should be aware of," Chan said. The researchers said dietary calcium increases prostate cancer risk by suppressing the production of 1,25-dihydroxyvitamin D3, the most active form of vitamin D. Other research has identified this form of vitamin D as an inhibitor of prostate cancer cell growth. They found men who drank more than six glasses of milk a week had lower levels of this form of vitamin D than men who drank fewer than two glasses a week.

New Study Supports Cryosurgery As Safe, Effective Treatment When Radiation Therapy Fails
PR Newswire - 09/19
Us Too! NEWS 09/20

A new study published in The Journal of Urology concluded that cryosurgery is a "safe and effective treatment" for prostate cancer patients who have unsuccessfully undergone radiation therapy and a better option than radical prostatectomy, the complete surgical removal of the prostate gland, for those patients. The study, published in the October edition of the Journal, a publication of the American Urological Association, noted that the use of the minimally invasive Endocare CryoCare targeted ablation system resulted in "a marked decrease in complications" associated with the treatment. The study also reported biochemical recurrence-free survival calculated from Kaplan-Meier curves was 86% at 1 year and 74% at 2 years. Aaron E. Katz, M.D., assistant professor of urology at Columbia University's College of Physicians and Surgeons and the leader of the study team, said he was impressed with the latest cryosurgical techniques, which have substantially reduced any side-effects such as incontinence or rectal fistulas following the ablation treatment. The journal study noted that the new cryosurgery methods resulted in an incontinence rate of only 7.9% — a dramatic decrease from earlier published reports — that was attributed largely to the surgeon's ability to monitor the temperature within the prostate gland through probes placed within the sphincter. The monitoring prevents further damage to the area, the study noted. The lack of any evidence of rectal fistulas was attributed to the CryoCare technique of improved ultrasound technology and temperature monitor probes.

USC Researchers Find Cancer-Growing Role for Blood-Vessel Protein
AScribe Newswire Univ of So. Calif - 09/18
Us Too! NEWS 09/20

A key protein in the growth and survival of new blood vessels — a process called angiogenesis — can also directly promote the

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growth and survival of malignant tumor cells, according to research done by scientists at the Keck School of Medicine of the University of Southern California. "We've shown that a protein that everybody knows is an angiogenesis regulator also regulates tumor cells directly," says Parkash Gill, M.D., professor of medicine and pathology at the Keck School and principal investigator on the paper, which was published in the September 15 issue of the journal *Blood*. "And this observation was not limited to one tumor type but rather to an extensive list of tumors. In other words, this principle has broad applications." The researchers found production of VEGF (vascular endothelial growth factor) and expression of a VEGF receptor on cell lines derived from prostate carcinomas and other cancer types. [Rizwan Masood, Jie Cai, Tong Zheng, D. Lynne Smith, David R. Hinton, and Parkash S. Gill. "Vascular endothelial growth factor (VEGF) is an autocrine growth factor for VEGF receptor-positive human tumors.." [Blood, Volume 98, Number 6, 15 September, 2001]

Lifestyle Changes That May Help Fight Prostate Cancer

*Scripps Howard News Service - 09/19
Us Too! NEWS 09/20*

Q: I'm considered high-risk for developing prostate cancer and I'm nearing 40. What are some of the lifestyle changes I should make?

A: First and foremost, you should have regular examinations, and eat a low-fat, high-fiber diet. A new study suggests a low-fat, high-fiber diet and regular exercise can slow prostate cancer cell growth by up to 30 percent. That's according to researchers at UCLA's Jonsson Cancer Center and UCLA's Department of Physiological Science. "This is the first study to directly measure the effects of diet and exercise on inhibiting prostate cancer cell growth," said Dr. William Aronson, a researcher at the Jonsson Cancer Center and senior author of the study. The research is published in the Sept issue of the *Journal of Urology*. The exercise component in the study involved walking at a quick pace for 30 to 60 minutes four to five days a week, and once or twice a week at a slower pace for 40 to 60 minutes. A "quick pace" was defined as a training heart rate of 70 to 85 percent of a person's maximum heart rate on a treadmill exercise tolerance test.

Barr Receives Approval for Generic Eulexin Tablets

*PR Newswire - 09/18
Us Too! NEWS 09/20*

Barr Laboratories, Inc. announced that it has received approval from the FDA for Flutamide Capsules, USP 125 mg the generic equivalent of Schering Corporation's

Eulexin(R) capsules. The approval of the Company's product follows the expiration of a patent granted to Schering Corporation for its Eulexin product. Eulexin is indicated for use in combination with LHRH agonists for the management of locally confined Stage B2-C and D2 metastatic prostate cancer.

Tiny Berry Tops Tomatoes in Lycopene

*M2 Communications - 09/13
Us Too! NEWS 09/14*

Tiny, red berries from an obscure shrub pack more lycopene than tomatoes. The berries from autumn olive could become an alternative source of this important nutrient, if two Agricultural Research Service (ARS) scientists have their way. The analysis showed that, ounce for ounce, the typical autumn olive berry is up to 17 times higher in lycopene than the typical raw tomato. Lycopene has generated widespread interest as a possible deterrent to heart disease and cancers of the prostate, cervix and gastrointestinal tract. Autumn olive, *Elaeagnus umbellata*, is a multistem shrub covered with silvery green leaves and a profusion of red berries in late September and October, according to Fordham, who is with ARS' Fruit Laboratory in Beltsville. It has become a popular erosion-control shrub along highways because it thrives in poor soil. The berries contained the same carotenoids as tomato—lycopene, beta carotene and lutein. It gives tomatoes their red color.. Until now, tomatoes have accounted for 80 percent to 90 percent of Americans' consumption of this nutrient. Lycopene is also found in watermelon, pink grapefruit and guava. Some studies have shown that men who eat a lot of processed tomato products may lower their risk of prostate cancer. Scientists believe it works by damaging free radicals in our bodies, thereby protecting certain cell membranes. The big difference with the autumn olive berries was in the lycopene levels. What the scientists found were large amounts of lycopene. They ranged from 15 to 54 milligrams per 100 grams, compared to an average 3 mg/100 g for fresh tomatoes, 10 mg/100 g for canned tomatoes, and 30 mg/100 g for tomato paste. Tomatoes that are cooked in oil release the most lycopene, because the nutrient needs to attach to fat molecules to be absorbed in the body. The findings appear in the October issue of *HortScience*, the journal of the American Society for Horticultural Science. An article on autumn olive also appears in the September issue of *Agricultural Research* magazine online at: <http://www.ars.usda.gov/is/AR/archive/sep01/berry0901.htm> ARS is the U.S. Department of Agriculture's chief scientific research agency. The ARS Phytonutrient Laboratory is on the web at: <http://www.barc.usda.gov/bhnrc/pl>

High Soy Intake Could Have Low Cancer Link

*The Dominion - 09/12
Us Too! NEWS 09/13*

Researchers say Asian men's high intake of soy may be linked to why they are markedly less prone to prostate cancer than Westerners. Scientists knew the low Asian incidence was not genetic because when Asian men emigrated to the West their incidence of prostate cancer rose within a generation. "We are at a loss to know why Asia has less malignancies, but the cause has to be environmental, which means diet," Professor Frydenberg said. Studies of soy-based proteins called isoflavones suggested they had a role in the Asian experience. However, he cautioned would-be soy bingers. "We also have to be aware that some malignancies are more common in Asia, such as stomach cancer, and be careful that we do not trade off one tumour for another. The same isoflavones that reduce the risk of prostate cancer may increase the risk of stomach cancer." Other studies were looking at links to the prevention of prostate cancer with selenium, found in root vegetables, vitamin E, mainly in fish oils, and a type of vitamin A found in tomatoes. Professor Frydenberg also cautioned users of the herb saw palmetto, which had been found to lessen prostate cancer. "The problem is, its side effects are similar to those of the oestrogens we used to use — breast enlargement, tender breasts, impotence and cardiovascular problems like heart attacks, strokes and blood clots in the legs."

Men Treated for Prostate Cancer May Risk Alzheimer's

*Health Media Ltd -10/03
Us Too! NEWS 10/04*

A research team from New York University has found that when circulating testosterone levels go down, a dramatic rise in levels of amyloid - the protein implicated in Alzheimer's disease - occurs. They suggest that this phenomenon might explain why Alzheimer's develops later in life and that hormonal treatments for prostate cancer, which suppress testosterone levels, could potentially predispose individuals to this form of dementia. In their study Dr Sam Gandy and colleagues noted that all six men with prostate cancer who were treated by hormonal suppression experienced an increase in plasma amyloid levels. Plasma amyloid roughly doubled over the six months of the investigation, say the researchers. Previous animal research by the team had shown that brain concentrations of amyloid increased significantly in female guinea pigs whose ovaries had been removed. Once hormone replacement therapy had been administered, the brain amyloid levels decreased.

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2001 CHICAGOLAND GOLF CLASSIC

(continued from P. 1)

Following an exciting 18 holes (there was even a hole-in-one!) the participants kicked back and enjoyed a cocktail reception and gourmet dinner. The night was topped off with an exciting live auction which featured some once-in-a-lifetime opportunities such as a day of golf and dining at the world reknown Medinah Country Club. The silent auction had some wonderful items as well, including a set of irons from Titleist, a Pete Rose autographed bat, a Dick Butkus signed football and a Sports Illustrated cover autographed by none other than Tiger Woods.

Without the dedication and commitment of a committee of volunteers headed by Tony Porterfield, the son of *Us Too!* Chairman Hank Porterfield and great

support from the vendor community, the Golf Tournament could never have been as successful as it was.



More than 135 golfers help to raise nearly \$40,000 for Prostate Cancer Education and Support.

If you are interested in hosting a golf tournament, a Run/Walk, a symposium or another event to help raise funds for

prostate cancer education and support in your community please contact *Us Too!* headquarters today! Remember every event starts with one person willing to step up and be counted. Let that person be YOU!

MACON COUNTY (IL) PROSTATE & TESTICULAR CANCER EDUCATION AND AWARENESS EVENT A SUCCESS!

The Macon County Health Department reports that 568 men participated in the Macon County Prostate and Testicular Cancer screening held in June 2001, exceeding the 400 anticipated. The screenings were held during National Men's Health Week and included other free health screenings.

Educational posters of the prostate were displayed in each of the exam rooms, in the lab areas and hallways. An informational sheet was developed explaining the anatomy and function of the prostate gland. Bob Jelks gave mini presentations over the speaker system about his story of early detection and about what the men could expect during the exam. Stress balls were tossed into the crowd of men waiting to see the medical practitioner. A stress ball was given to a man who mentioned his wife had told him "he was going to an ice cream social" and ended up at the screening. Many compliments from the men were heard about this opportunity and how well it was organized.

The media campaign was fabulous and focused heavily on the high-risk population of African American males. The statistics indicate that there were 3 times as many African-American males at the 2001

screening then the previous year. Radio and television commercials were aired and print advertising appeared in all local newspapers. Flyers advertising the prostate and testicular cancer screening were mailed to church organizations. The Central Illinois Us Too! Prostate Cancer Support Group hand-delivered flyers to all barber shops. Burl Stoner, President of the Decatur Club Frontiers Organization distributed information to African American groups. Mr. Stoner and the Parish Nurses were informed that transportation was available for those in need.

The Health Education staff utilized the Power Point presentation developed by Jamie Clark, Health Educator at the Macon County Health Department for the Central Illinois Us Too! Prostate Cancer Support Group in late July.

RESULTS OF SCREENING

There were 568 men screened with the following racial characteristics: Caucasian 75%, African American 24%, and 1% other. Compared to last years screening the number of Caucasian men doubled and the number of African American men more than tripled. Approximately 10% of African American men had an abnormal prostate exam, or elevated PSA. An additional 2% of African American males had both an abnormal exam and elevated PSA.

Inconsistent with the current research indicating that African American males are at higher risk of prostate cancer, the Caucasian group showed a higher percentage, 21%, of abnormal exams or elevated PSA tests almost doubling the percentage seen in the African

American population.

About 18% of the men who responded to the questionnaire attended the screening last year. One hundred percent of the men believed the screening was important and that they were treated respectfully. It was unanimous that the Macon County Health Department should offer this screening again. The final question asked men if they would recommend this screening to a friend. Ninety-nine percent (99%) indicated, "YES".

The success of this project is credited to the collaboration with the Community Health Improvement Center and the Central Illinois Us Too! Prostate Cancer Support Group and the expertise of Health Educators, Kristen Nolen and Jamie Clark.

Jerry Andrews, Administrator for the Macon County Health Department, said that, "Sometimes men don't take their health very seriously. They may not want to take the time for an exam because they don't want to know if anything is wrong. The good news is that prostate and testicular cancers can be treated successfully if found early. The message is clear. Men, it's time to get checked! Preventative medicine is the best medicine."

Dan Moore, Facilitator for the Central Illinois Us Too! Prostate Cancer Support Group was pleased with the screening response.

Macon County Health Department's Prostate and Testicular Cancer Awareness Campaign sets the example for success in Illinois.

**SURVIVING AT ANY SPEED:
THIS WAS NOT YOUR
FATHER'S OLDSMOBILE**

Burton Benjamin

In retirement, at the age of 70, I took up a new career; a freelance automotive writer. To date I have had material published by Mercedes Benz, BMW and the Indy 500 Yearbook.

While covering the Target Gran Prix for CHICAGO SCENE, I saw a great blocking action by Max Pappas, driving for Team Rahal, which allowed his team mate, Kenny Brack to drive below the line and pass Helio Castroneves and win the race. It was a great day for Team Rahal, as the week before both drivers crashed into each other. In that event, that incident cost them the victory.

At this event several hundred media people were asked if they would like to drive in the Target Track Attack in a 105 hp specially tuned racecar with speeds in excess of 120 mph. I happily accepted the invitation.

We were expected to attend a one-hour driver's school. Before we could even do that, however, we first were expected to complete a waiver releasing our hosts of responsibility and liability in the event anything unplanned and undesirable happened. We had to advise the sponsors of our blood type, list people to notify in the event of an accident, list all medications taken and, most importantly of all, verify to having had experience driving a manual shifting four-speed gearbox.

Then we were ready to learn what the different flags mean. We were taught the importance of keeping your engine rpms up and driving on the race line so that

the drivers behind you would know what your intentions were. We were also advised not to drive high up on the track as this is where all the dead rubber, or marbles as they are called, are and you increase the possibility that you will crash into the wall. That was something none of us was interested in experiencing.

After the classroom presentation was completed the ranks of the remaining "volunteers" had begun to shrink. Those of us remaining were put into a van driven by a professional driver and taken out onto the track. Speeding along he showed us the driving line and explained where to shift. In order to control our speed, cones were placed in the corners in the

too late to do anything except get the car into first gear and begin my adventure. I shifted into second gear and was able to get the car up to fourth gear, downshift to third and go through the chicanes in second gear, without hitting a single one. I was able to maintain absolute control of the car. I was doing it!

I was constantly checking my mirrors and I noticed a car coming up on me fast. I let him pass me in the straight section of the track to avoid any mishap in the chicane. Only one car passed me. These cars were no toys or glorified go-carts, but REAL racing vehicles. The checkered flag came down. The race was over. But in all the excitement I forgot how to enter the pit lanes.

I increased my speed to find a car and followed him into pit row where the pit crew helped me out of the car. I sat on a nearby bench while the younger drivers climbed out of their cars and scrambled up to the podium for picture taking.

The following morning I got several calls because ABC-TV7 in Chicago had been out at

the track taping and broadcast portions of the event. It was a wonderful, exciting experience which made me feel 20 years younger. On that day I was a young man in his 50's again!



At more than 70 years young "Burt" Benjamin takes the Target Track Attack for a once-in-a-lifetime experience at 120 mph.

form of a chicane. This controlled our apexes and gave us more track surface going through the curves.

After all of the preliminary preparation was complete, only seven "drivers" remained to participate in this event. We were suited in fireproof racing suits and helmets. I was strapped into the car securely with a five-point safety belt system. I raised my hand so that the starter could see that my engine was running. At that point I thought to myself, "What am I doing this for?"

The starting flag went down and it was

Burton Benjamin was diagnosed with "incurable" prostate cancer more than a decade ago. He has remained active in the prostate cancer community as a past member of the Us Too! INTERNATIONAL Board of Directors and a leader of the Us Too! Chapter at Highland Park (IL) Hospital.

PCA NEWS YOU CAN USE

(continued from P. 3)

Robotic Option for Prostate Surgery

*Health Media Ltd - 10/01
Us Too! NEWS 10/03*

Studies of more than 800 patients have shown the new technique to be as effective as standard prostatectomy and, according to surgeons who have used it, the robotic device allows the surgeon to perform the same nerve-sparing procedure as that conducted with standard laparoscopic prostatectomy, but with greater precision. The Vattikuti Urology Institute at Henry Ford Hospital is the first centre in the US to routinely perform this surgery using the robotic procedure - daVinci. During the operation, the surgeon uses a three-dimensional computer vision system to manipulate robotic arms, which hold the surgical instruments needed to perform the surgery. The robotic "wrists" are designed to rotate a full 360 degrees, allowing the surgeon to manipulate the instruments with greater precision and flexibility. The surgeon is able to view progress via the laparoscope image. The prostate, nearby lymph nodes, seminal vesicles and adjacent tissue can be removed via small incisions as with normal laparoscopic surgery. In addition to reducing the pain and blood loss experienced by the patient, the researchers said that the procedure also reduced the recovery time in hospital. "The advantages of the robotic laparoscopic prostatectomy is that the post-operative recuperation for the patient is remarkably smooth; the patient goes home within 24 hours and, barring no complications, there are no restrictions," said Dr Mani Menon, director of the Vattikuti Urology Institute.

Researchers develop tumor cell killer

*AP and Agence France-Presse - 10/02
Us Too! NEWS 10/03*

Researchers have developed a molecule that can destroy tumor cells by attacking blood vessels that nourish them, according to a study published in the October Proceedings of the National Academy of Sciences (PNAS). The a newly developed molecule, called "icon", not only attacks cancer but forces it to produce more of the cancer-fighting molecules to join in the attack. It has been developed by researchers at Yale University in New Haven, Connecticut, and tested on mice that were given injections of human prostate cancer. Over a six-month treatment, the molecule, with the full name immunoconjugate, efficiently battled cancer by destroying blood vessels that fed the tumors. "At the end of the experiments the mice appeared to be free of viable tumor cells," wrote Zhiwei Hu and Alan Garen, who conducted the research.

Infected mice that were not treated died within two months. The researchers remain cautious for now as to the use of the molecule for cancer treatment in humans. The first human trials are planned for next year.

AstraZeneca Receives 1st Approval for Casodex Treatment in UK

*AFX News Limited - 09/17
Us Too! NEWS 09/18*

AstraZeneca PLC said it has received its first approval for 150 mg dosage of its drug, Casodex, for the treatment of early stages of prostate cancer in the UK. Casodex represents the first once daily drug therapy available for treatment for the early stages of this disease. Further regulatory submissions and approvals are anticipated, including in the US, where a submission is planned by the end of the year. These approvals are based on results that found that a 150 mg dosage of Casodex can significantly reduce — by 42 pct — the risk of the disease progressing in patients with early prostate cancer, when taken in addition to standard therapy, when compared to standard care alone. In addition, licences have recently been granted for Casodex 150mg in Italy and Hungary, which also authorize its use in the early stages of prostate cancer.

Amgen & Praecis End Development Agreement

*Financial Web - 09/19
Us Too! NEWS 09/20*

Drug-discovery company PRAECIS Pharmaceuticals Inc. and partner Amgen Inc. announced the end of their agreement to jointly develop and commercialize Plenaxis for all indications. Amgen is withdrawing from further development of the product, which PRAECIS will now continue on its own. PRAECIS added that it is still "committed" to further development of Plenaxis, formerly known as abarelix-depot. Currently available therapies are thought inappropriate for all stages of prostate cancer, as they work by first stimulating testosterone production to abnormally high levels, which later leads to the suppression of testosterone. The advantage of Plenaxis is the fact that it is a direct inhibitor of testosterone production. Plenaxis achieves suppression of the testosterone level without causing initial testosterone stimulation like current therapies, making it useful for patients at all stages of prostate cancer.

Healthy Eating: Quercetin

*The State Journal-Register
Springfield, IL - 09/19
Us Too! NEWS 09/20*

Apples are enjoying some new prestige as a healthy option. Most Americans eat an apple a week, or 19 pounds of fresh apples a year.

You may want to increase consumption, based on these studies: Over the past four years, apple consumption has been linked with reduced cancer risk in several studies. A 2001 Mayo Clinic study indicated that quercetin, a flavonoid abundant in apples, helps prevent the growth of prostate cancer cells.

Hip Replacement Link to Cancer

*World Entertainment News Network - 09/20
Us Too! NEWS 09/21*

People who have hip replacements have an increased risk of contracting prostate cancer. Doctor Lisa B. Signorello of the International Epidemiology Institute in Rockville, Maryland, and colleagues conducted a study for the Journal of the National Cancer Institute [Journal of the National Cancer Institute ,93;18:1405-1410E]. Despite a person with a hip replacement having the same overall risk of cancer as the general population, they are more at risk of contracting skin, prostate and blood cancers. The authors cautioned that more research is needed and the link is not necessarily a cause-and-effect relationship. Doctor Signorello says, "Overall, the results of our study are largely reassuring that hip implant patients have similar rates of most types of cancer as the general population."

Androgen Receptor CAG Repeat Polymorphism Associated with Age at Diagnosis of Prostate Cancer

*FaxWatch Inc. - 09/24
Us Too! NEWS 09/25*

In a study that examined the androgen receptor CAG repeat polymorphism as a prostate carcinoma risk factor, researchers found an independent association of CAG repeat number with age at diagnosis. "The coding sequence of the androgen receptor gene contains a CAG repeat polymorphism that has been shown to influence [androgen receptor] activity in vitro," the authors noted. "Studies of this polymorphism as a prostate carcinoma risk factor have been conflicting." The study included 545 Australian subjects with histologically confirmed prostate cancer (mean age, 67 years) and 456 age- and locality-matched controls (serum PSA <4 ng/mL). The androgen receptor CAG repeat length was determined and logistic regression was used to calculate the relative risk of prostate carcinoma dependent on androgen receptor gene CAG number. The investigators noted that the association with age at diagnosis in combination with in vitro evidence supports the androgen receptor CAG repeat polymorphism being functional within the early malignant phase of prostate carcinoma in vivo. They cautioned, however, that "evidence from this and prior studies does not support the present use of [androgen receptor] CAG repeat allelic status for predicting the

disease course in subjects whose prostate carcinoma already was diagnosed." (Beilin J, et al. Cancer 2001;92:941-9.)

Prostate cancer patients getting hormone therapy should treat bone loss

*Agence France-Presse - 09/26
Us Too! NEWS 09/27*

Men receiving hormone suppression therapy to fight prostate cancer should also be treated for bone loss, according to research described in the New England Journal of Medicine. Osteoporosis or loss of bone mass is a common problem in older women but men treated for prostate cancer are a fast-growing risk group, according to researchers from Massachusetts General Hospital in Boston. Prostate cancer treatments often involve suppression of male hormones, which stimulate the growth of the cancer but also help keep bones strong, the study's authors said. They recommended use of pamidronate, a drug that stops the breakdown of bone and is used to treat several bone diseases. "The expanding use of hormone-blocking therapies, with some patients staying on them for years, means that the problem of bone loss is becoming crucial," wrote lead author Matthew Smith. "This is the first study to show a safe and effective way to prevent bone loss among men on androgen-deprivation therapy." In the study, bone density loss was halted in prostate cancer patients treated with pamidronate, while a control group had bone loss ranging from two to eight percent. A total of 47 patients were studied over 48 weeks. Researchers are now seeking to determine recommended dosage and duration of pamidronate use.

Us Too! joins Cytogen and other Prostate Cancer Groups to Increase Awareness

*PR Newswire - 09/24
Us Too! NEWS 09/25*

Us Too! INTERNATIONAL joined with Cytogen Corporation, a biopharmaceutical company with an established and growing product line in prostate cancer, and other prostate cancer organizations in launching a new "Screen, Stage and Support" campaign to promote prostate cancer education and awareness. The new national initiative is designed to help patients, families and caregivers to recognize the important role that proper screening, diagnosis, treatment and support can have for anyone affected by prostate cancer. The Screen, Stage and Support national awareness campaign was launched during Prostate Cancer Awareness Month on September 28, 2001, in a special event with baseball great Yogi Berra at the Nasdaq Stock Market.

To subscribe to the "Prostate Cancer News You Can Use" simply follow the directions on the **Us Too!** homepage.

INSIGHTS ON USE OF GREEN TEA

Shutsung Liao, Ph.D. Director, Tang Center for Herbal Medicine Research / Professor in The Ben May Institute for Cancer Research and in the Department of Biochemistry and Molecular Biology at the University of Chicago has done substantial research on the use of Green Tea in helping treat many conditions - including prostate cancer. In trials, mice that had developed tumors after being injected with human prostate cancer cells, were injected with a compound found in green tea, Epigallocatechin Gallate (EGCg). The treatment was extremely effective and halted the growth of the tumors and killed the cancerous cells. The same compound might also work with other kinds of cancers such as breast cancer and might even help in treating diabetes and helping facilitate weight loss. Still, doctors agree that more studies need to be done with EGCg and green tea to confirm these reputed health benefits. More importantly, EGCg still hasn't been tested on humans.

He offered suggestions on buying green tea: buy the least costly / fresh / least processed green tea you can find - estimated a price of \$25 per pound and suggested that approximately 20 grams per day be ingested. Where to buy unprocessed Green Tea in Chicago: Ten Ren Tea & Ginseng Co. of Chicago Ltd. 2247 S. Wentworth (312) 842-1171.

In addition to brewing tea he indicated that patients consider grinding and sprinkling / mixing with food - but NOT to cook it as that will breakdown the essential ingredient - EGC. Although bitter tasting he indicated that it could certainly become an "acquired" taste. He indicated that you need to prevent oxidation of the tea (removing the air from the container before brewing) and to brew for 20-30 minutes in order to release the EGC. Shorter brewing times will provide a less bitter but less effective mixture since the longer brewing time is necessary to release the EGC. The key to making green tea is using tea that has high amounts of the compound EGCg in it and not allowing the tea to oxidize. 1Tbs of tea to every cup of water. Fill thermos with hot but not boiling water, cover, and let steep for 20-30 minutes. If tea turns brown, it is oxidized (fermented), and EGCg compound is destroyed, so make a fresh batch. Drink at least three cups of the tea per day.

For more info: WTTW / Network Chicago http://www.networkchicago.com/chicagotomorrow/prostate_cancer/prostate.index.htm

RECENT CLINICAL TRIAL RESULTS REPORTED

PAMIDRONATE TO PREVENT BONE LOSS DURING ANDROGEN-DEPRIVATION THERAPY FOR PCA.

Smith MR, McGovern FJ, Zietman AL, Fallon MA, Hayden DL, Schoenfeld DA, Kantoff PW, Finkelstein JS. - Massachusetts General Hospital, Boston 02114, USA. **BACKGROUND:** Treatment with a gonadotropin-releasing hormone agonist decreases bone mineral density and increases the risk of fracture in men with prostate cancer. We conducted a controlled study of the prevention of osteoporosis in men undergoing treatment with a gonadotropin-releasing hormone agonist. **RESULTS:** In men treated with leuprolide alone, the mean bone mineral density decreased. In contrast, the mean bone mineral density did not change significantly at any skeletal site in men treated with both leuprolide and pamidronate. There were significant differences between the two groups in the mean changes in bone mineral density at 48 weeks. **CONCLUSIONS:** Pamidronate prevents bone loss in the hip and lumbar spine in men receiving treatment for prostate cancer with a gonadotropin-releasing hormone agonist. [N Engl J Med 2001 Sep 27;345(13):948-55]

SAFETY AND EFFICACY OF EXISULIND FOR TREATMENT OF RECURRENT PROSTATE CANCER AFTER RADICAL PROSTATECTOMY.

Goluboff ET, Prager D, Rukstalis D, Giantonio B, Madorsky M, Barken I, Weinstein IB, Partin AW, Olsson CA; UCLA Oncology Research Network. - Columbia University, Columbia-Presbyterian Medical Center. **PURPOSE:** We evaluated the safety and efficacy of exisulind for delaying disease progression in men with increasing prostate specific antigen (PSA) after radical prostatectomy. **RESULTS:** Compared with placebo, exisulind significantly suppressed the increase in PSA in all patients. The results were also statistically significant in men at high risk for metastasis and those who could not be classified according to risk. In addition, median PSA doubling time was lengthened in high risk patients on exisulind compared with those on placebo. Exisulind was well tolerated. **CONCLUSIONS:** Exisulind inhibited the increase in PSA overall and prolonged PSA doubling time in high risk patients compared with placebo. These results suggest that Exisulind has the potential to extend the time from biochemical recurrence to the need for androgen deprivation therapy. Exisulind was well tolerated in this patient population. Our results support further study of Exisulind in the treatment of patients with PCa. [J Urol 2001 Sep;166(3):882-6]

TELEVIDEO PROGRAM

(continued from P. 1)

support groups in my region to obtain nationally known speakers at minimal costs. Use of this technology eliminated the need for the speaker to travel, sometimes spending days to give a single session presentation.

Arrangements were made to have Dr. Stephan Strum, Medical Director of PCRI present a program on August 18, 2001 on two subjects of important prostate cancer issues of concern to men who had already elected an alternative to prostate cancer. The primary focus of the broadcast was PSA Recurrence after Initial Treatment. In addition, Dr. Strum touched on identifying what men on hormone therapy need to know if they have a loss of bone calcium.

The program was set up with the local hospital Trinity Medical Center located in Rock Island/Moline Illinois hosting the event. The hospital provided all the necessary equipment which included an on line computer connected to an overhead projector and a fifteen by ten foot screen. The broadcast room provided seating with a clear view of the screen for more than 150 people.

Dr. Strum praised the group for being pioneers in selecting this type of presentation. He also expressed a personal appreciation for the fact he didn't have to expend the time and inconveniences of travel.

Representatives from Peoria, Illinois and Iowa *Us Too!* INTERNATIONAL's chapters

were present and were interested in setting up a similar program in their area. Other groups and/or individuals can receive the above presentation by visiting the PCRI web site at www.prostate-cancer.org. There is a nominal fee of \$10 (have credit card ready) for one day's viewing of the program. You can also ask questions which will be answered by e-mail within 7 days. There are also other programs on prostate cancer issues available on the site.

I highly recommended this type of presentation for large and small groups. It allows you to more easily provide nationally known speakers presenting information on new and changing technology in the field of prostate cancer to your meeting participants. Clearly such speakers will be more readily available to speak to groups, especially those in smaller, rural communities, when they don't have to incur the time due to travel.

Bill Palos is a prostate cancer survivor, Chapter Leader and Regional Director for Us Too! INTERNATIONAL. He is active in the prostate cancer support community and has served in numerous volunteer capacities, including serving as a reviewer for the Dept. of Defense Prostate Cancer Research Program (PCRP).

PARTICIPANTS SOUGHT FOR STUDY OF PSYCHOSOCIAL CONSEQUENCES OF INCONTINENCE AFTER RADICAL PROSTATECTOMY

Little is known of the psychosocial consequences of urinary incontinence after radical prostatectomy. You are invited to participate in a study designed to improve our understanding of the postoperative effects of treatment and thereby provide more complete care for future men treated for prostate cancer. This study, which looks at the symptoms men experience after surgical treatment for prostate cancer, will be conducted via a telephone interview by a nurse at the Univ of Maryland School of Nursing who is an expert in prostate cancer care.

If you were treated with radical prostatectomy for prostate cancer 12-18 months ago and are willing to participate in this study, please call the research office in Baltimore at 443-540-6676 to schedule the telephone interview at a time convenient to you. You will be called at your home or office at the designated time, so there will be no cost to you. During the 30-minute interview, questions will be asked about any symptoms you may presently have or may have had during the period since your prostate cancer treatment and how it affects the quality of your life and lifestyle. Your identity in the study will remain anonymous, as no names or identifying characteristics will be used. Participation in this study may provide important information that will improve future treatments for men with PCa.

CONTRIBUTE TODAY

***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!**

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