

East Lancashire Prostate Cancer Support Group Newsletter



Volume2

Issue1

Date January 2013

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Drug Safely Cuts Prostate Cancer Risk

Marilynn Marchinoe 14/08/2013 Yahoo News

Long-term results from a major federal study ease worries about the safety of a hormone-blocking drug that can lower a man's chances of developing prostate cancer.

The drug cut prostate cancer risk by 30 percent without raising the risk of dying of an aggressive form of the disease as earlier results hinted it might.

The new work could prompt a fresh look at using the drug for cancer prevention. Experts say it could prevent tens of thousands of cases each year, saving many men from treatments with seriously unpleasant side effects.

The drug is sold as Proscar by Merck & Co. and in generic form as finasteride to treat urinary problems from enlarged prostates. It's also sold in a lower dose as Propecia to treat hair loss.

A decade ago, the drug was found to cut the risk of prostate cancer. But there was a small-



Finasteride

rise in aggressive tumors among its users. Some researchers said that by shrinking the prostate, the drug was just making these tumors easier to find in a biopsy sample — not causing them.

But the concern led the Food and Drug Administration to turn down the drug for cancer prevention and warnings were added to its label.

Now, with 18 years of follow-up from that earlier study, researchers report that men on the drug were no more likely to die than those not taking it.

That's reassuring because if the drug were truly spurring lethal tumors, there would have been more deaths among its users as time went on, said Dr. Michael LeFevre, a family physician at the University of Missouri.

LeFevre wrote an editorial that appears with the study in Thursday's New England Journal of Medicine. He is one of the leaders of the U.S. Preventive Services Task Force, an independent panel of doctors who advise the federal government. The group has not taken a stance on finasteride for prevention but has advised against screening with PSA blood tests.

Screening does more harm than good, the panel has said, because although 240,000 new prostate cancers are diagnosed each year in the United States, only about 30,000 prove fatal. That means many men are treated for cancers that grow too slowly to be life-threatening, and often suffer sexual and urinary problems as a result.

The study, led by Dr. Ian Thompson at the Cancer Therapy and Research Center in San Antonio, was done to see whether finasteride could lower the risk of prostate cancer in men who were getting screened with annual PSA blood tests, as many still choose to do.

Researchers assigned 18,882 men 55 or older with no sign of prostate cancer on blood tests or a physical exam to take finasteride or dummy pills for seven years. When the study ended, those who had not been diagnosed with prostate cancer were offered biopsies to check for hidden signs of the disease.

For the new analysis, researchers tracked the study participants for a longer time — 18 years in all since enrollment began. Only about 10 percent of men on finasteride developed prostate cancer versus 15 percent of those on dummy pills. Aggressive tumors were found in 3.5 percent of men on the drug versus 3 percent of the others. Yet 78 percent of both groups were alive after 15 years.

That means the drug cannot be recommended to prolong life, just to ease suffering by preventing disease, LeFevre said.

"You may be preventing cancers that don't need to be prevented" because so few are life-threatening, but screening is finding these tumors anyway and leading to unnecessary treatments, he said. Reducing that number is a valid reason to use a prevention drug, he said.

Finasteride's other impact is financial. Proscar and a similar drug, GlaxoSmithKline PLC's Avodart, cost about \$4 a pill. Generic finasteride is available for less. Insurers cover it when prescribed to treat urinary problems but may not pay if it's used solely for cancer prevention.

The drug also can cause hot flashes, fatigue, weakness, low sex drive and trouble having sex.

"A man certainly needs to know what he's getting into if he decides to take this," LeFevre said.

Online:

Prostate cancer info:
<http://www.cancer.gov/cancertopics/types/prostate>

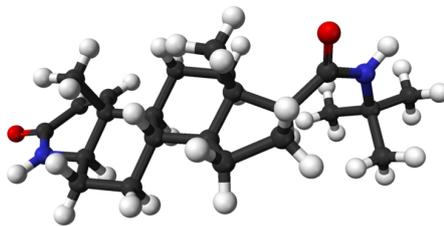
<http://tinyurl.com/ASCOanswers>

Study:
<http://www.cancer.gov/newscenter/qa/2008/PCPTQandA>

Risk calculator:
<http://tinyurl.com/riskcalculator>

Follow Marilyn Marchione on Twitter at
<http://twitter.com/MMarchioneAP>

Follow this link for the technical data on Finasteride.



<http://en.wikipedia.org/wiki/Finasteride>

prostate cancer need to be updated to reflect the impact of new treatments such as abiraterone.

For example, the 238 patients who had not received chemotherapy before entering a clinical trial survived on average for 30.6 months, or about two-and-a-half years. The Halabi and Smoletz prediction models, both widely used by the NHS, predicted these patients would survive between 18 and 21 months, about nine to 12 months below the reality.

Cally Palmer, Chief Executive of The Royal Marsden, said: "Over the last decade, there have been some exciting steps forward in the treatment of advanced prostate cancer, and we have pioneered use of many of the newest drugs here at The Royal Marsden.

"New treatment options developed through clinical trials are delivering real benefits for the quality of life of men with prostate cancer, with fewer of the side effects associated with conventional chemotherapy."

Professor Alan Ashworth, Chief Executive of The Institute of Cancer Research, said: "We are living through a remarkable period of progress against prostate cancer, with new drugs such as abiraterone transforming the prospects for men with advanced disease.

The Royal Marsden Hospital

Advanced Prostate Cancer Patients are Living more than twice as long as a decade ago.

Advanced prostate cancer is still incurable, but new treatments are giving men more time to do the things that matter to them with their loved ones. That couldn't be more important and shows the strides we are making in the fight against the disease."

The research found that the models used to predict survival among men with metastatic, castration-resistance

"It's excellent news that men receiving these therapies at The Royal Marsden are living for so much longer than they would have been expected to do a decade ago. The study highlights too the benefits of being able to treat so many patients on clinical trials, expanding access to new drugs and accelerating their path to wider use on the NHS."



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From Left to Right Hazel Goulding (Treasurer) Leon D Wright (IT Admin) Stuart Marshall (Secretary) Steve Laird (Vice Chairman) Dave Riley (Chairman)

We are a group of local people who know about prostate cancer. We are a friendly organisation dedicated to offering support to men who have had or who are experiencing the effects of this potentially life threatening disease.

The East Lanc's Prostate Cancer Support Group offers a place for free exchange of information and help for local men and their supporters (family and friends) who may be affected by this increasingly common form of male cancer.

At each meeting we strive to be a happy, supportive and upbeat group of people; encouraging open discussion on what can be a very difficult and perhaps for some an embarrassing subject. We have lively, informative, interactive, sharing and above all supportive meetings.

Patients with advanced prostate cancer treated with the latest therapies are living on average for more than twice as long as a decade ago, a striking new analysis reveals.

Befriending & Buddying

Manchester on the 16th September 2013

Buddying & Befriending Course run by Macmillan Cancer Care

If Anyone is interested in Attending Please let us Know ASAP as there are a limited number of delegate places available.

**NO ONE SHOULD
FACE CANCER ALONE**

Minutes

Minutes of meeting No. 33, - Thurs 1st August 2013

Venue: Burnley Gen. Hospital, Mackenzie Theatre / Library

23 people attended incl. Specialist nurses Debbie & Deborah and guest speaker Barry Williams. Apologies from Don W, John H, Colin S, Kevin S & Glyn S. Colin & Glyn sent their thanks for cards received. Donations were received of £10 from Shaun & £5 Jimmy C last month & £5 donation from Jimmy C this month, thanks were given to them.

Dave (Chairman) read out the Minutes of the last meeting and spoke about matters arising! He informed the meeting that we have splashed out on a portable table to take to fund raising events; he spoke about an idea for opening words to people when fund raising - "do you know anybody who has Prostate Cancer" this paves the way for a discussion & they are then informed about the Prostate Cancer Support Group. He informed the meeting that it had been spoken about having awareness days at Nelson & Colne and suggests writing to the Councils – if this comes off perhaps we could have a bucket collection for the Scanner Appeal – we would then try and get anyone affected by Prostate Cancer to attend the Support group meetings.

Dave told the people present about attending the Bolton Meeting with Colin S and how interesting it was. He said that they have several different features in their meetings – one being that they have an Almoner to trace people when they are ill and send cards & visit. Steve L volunteered for this role. Dave said that they have lots of interaction between members and new members can speak & get advice from people in the same position.

Forms were given out at the meeting asking people to write down two things they liked about the meetings & listing things they did not like about the meetings and how they would like the meetings to proceed.

Dave gave information about fund raising events for the Scanner Appeal and passed around forms for anyone wishing to attend a meal at Aldos on a Tuesday night costing £13.50 for 3 course meal – to be arranged, and for an event at Burnley Football Club at £17.50 per head for entertainment by 60's recording bands a hot & cold buffet on Friday 6th September. The Prostate Cancer display could be on show as this is to be a Scanner appeal event. He said that anyone interested in helping with the Scanner fund raising then give their names to Dave or Stuart.

It was mentioned that we may need some money for ourselves in the eventuality that we may need to find and pay for a venue in the future for the meetings – (IF we could not hold them at the Mackenzie Medical Centre). This is something we shall need to find out in the next few weeks.

Scott Heywood Bell attended the meeting and spoke about his new business 'Burnley Companies' and how he intends to help support the Group by promoting awareness in connection with his clients. He spoke for about 3 minutes explaining about his business and how it could help awareness of Prostate Cancer.

BREAK FOR BREW – In the 2nd half there was a talk by Barry Williams - Collective Legal Solutions, - entitled Tax, Care & Toyboys.

After his talk (which was relating to financial matters & "putting our house in order") which was very interesting and informative, it was realised that quite a few members were missing because of holidays and it was decided that we would ask Mr Williams to return next year to give the talk again. It is well worth listening to.

At the October meeting, the speaker will be Dr. James Wiley, Senior Oncologist at the Christie Hospital. His talk will be primarily about Radiotherapy and will last approximately 45 mins.

The meeting closed with one of Dave's famous jokes and the next meeting will be on Thursday, 5th September 2013.

The raffle made £26.

Next meeting: Thursday 5th Sept. 2pm – Burnley Gen. Hospital Mackenzie Centre/Library,