

Volume 6, Issue 1 MARCH 2009

APCaP-Alliance for Prostate Cancer Prevention

Top 8 Tips for Prostate Cancer Prevention

Based on scientific information gathered since our inception in 2002, the following summary highlights APCaP's top 8 tips for prostate cancer prevention.

1. Screening

APCaP supports recommendations that healthy men over age 50 have an annual prostate specific antigen (PSA) blood test. African-Americans and people with a family history of prostate cancer should begin testing at age 40.

Early detection of prostate cancer is associated with improved 5-year survival rates.

The two screening tools currently available to assess prostate cancer risk are the PSA and the digital rectal exam (DRE).

The PSA test measures a protein in the blood associated with prostate cancer risk. The DRE test is conducted by a physician to look for abnormalities by feeling the prostate through the rectum.

Estimates suggest that annual screening rates among Caucasian men are approximately 58 percent. Rates of screening in African-American men are lower. Therefore, about half of men are not getting screened.

In This Issue About Prostate Cancer (PC)

Topic	Page
Top 8 Tips for PC Prevention	1,4
Update on Roe Brothers	2
Doc in the House	2
APCaP Events in 2009	2
Motivations Toward a Healthy Prostate	3
Reducing Cancer Risk	5
Optimism Aids in Health Navigation	5
Turn off the Lights	5
Low Fat, Vegetarian Diet Slows PSA	
Doubling Time	6
Potential PSA Inhibitors	7
Prostate Cancer Symptoms	7

2. Eat Healthy Foods

Food is a powerful medicine in the body, and research suggests that dietary choices can promote, protect against, and help prevent prostate cancer.

Foods to Eat	Foods to Avoid
Vegetables	Red meats
Fruits	Animal Fats
Grains	Sugars
Legumes	Dairy products
Nuts	Trans-fats

3. Exercise & Avoid Obesity

Obesity and physical inactivity may account for 25 to 30 percent of several major cancers, according to the American Cancer Society.

Physical activity probably reduces men's risk of prostate cancer by 10 to 30 percent, according to the National Cancer Institute (NCI).

Moderate to vigorous exercise several times weekly helps with weight loss, protection against heart disease, and cancer prevention. The Centers for Disease Control recommends the following:

- *Moderate-intensity physical activity* for at least 30 minutes on five or more days of the week.
- *Vigorous-intensity physical activity* for at least 20 minutes on three or more days of the week.

Obesity has been associated with diluted PSA levels, an increased likelihood for more-aggressive tumors, and a cancer recurrence after surgery.

Men with jobs that require them to be physically active may be at a decreased risk of developing cancer. Men with jobs involving physical inactivity may have an increased risk of developing cancer.

(Continued on Page 4)

www.apcap.org 1-888-50-APCAP or 1-888-502-7227



APCaP promotes prostate cancer awareness, education, and advocacy. Special emphasis is directed toward prostate cancer prevention strategies for healthy men in their 40s and 50s. APCaP supports these strategies through a quarterly newsletter, a website, physician-led educational lectures, exhibits at national meetings, patient peer counseling, as well as fundraising events. In addition, APCaP's board members serve as representatives on local, regional, state, and national prostate cancer related boards, commissions, committees, and advisory boards.

Board of Directors:

Hank Porterfield (Chair), Terry Roe (Vice-Chair), Col. James R. Anderson, John Campbell, Kelly Largey, Tony Porterfield, Patrick Roe, Col. (Ret.) James E. Williams, Jr., USA

Scientific Advisory Board:

Mitchell C. Benson, M.D., NY Presbyterian Hospital William J. Catalona, M.D., Northwestern University Anthony Cantanese, M.D., Somerset Medical Center E. David Crawford, M.D., University of Colorado, H.S.C. Robert C. Flanigan, M.D., Loyola University M.C. Philip Kantoff, M.D., Dana Farber Cancer Institute Eric Klein, M.D., Cleveland Clinic Paul Lange, M.D., University of Washington Herbert Lepor, M.D., NYU Medical Center Judd W. Moul, M.D., Duke University Hospital Mark Moyad, M.D., University of Michigan Alan Partin, M.D., Johns Hopkins Arthur T. Porter, M.D., The Detroit Medical Center Peter T. Scardino, M.D., Memorial Sloan Kettering Can. Ctr. Paul Schellhammer, M.D., E. Virginia Medical School Eric Small, M.D., University of CA at San Francisco Ian M. Thompson, M.D. University of Texas Medical Center Nicholas J. Vogelzang, M.D., Nevada Cancer Institute George Wilding, M.D., University of WI Cancer Center

Newsletter Publisher:

Terry Roe

Newsletter Manager & Contributing Writer:

Jeannine Walston of Healing Focus, www.healingfocus.org

Update on the Roe Brothers

The December 2008 edition of *Male Call* featured "Is Prostate Cancer Hereditary?" The article conveyed the predicament of brothers Terry and John Roe who both had elevated PSA counts last year and subsequent prostate cancer diagnoses.

As an update to readers, the brothers had prostate cancer treatments a few months ago. Terry was treated with seed implants. John had robotic surgery. As of February 2009, Terry and John have received good reports from their doctors. A PSA test later this year will provide more information about the results of their treatments.

Doc in the House

After sponsoring many physician-led lectures, APCaP hosted its first educational event at a senior residence on December 11, 2008. The meeting was sponsored by APCaP and Ann's Choice, a facility in Warminster, Pennsylvania. Terry Roe, APCaP's Vice-Chair, talked about APCaP before introducing the main speaker, Stephen Flashner, MD, a local urologist. Dr. Flashner discussed factors that cause prostate cancer and how the disease is treated. Approximately 150 audience members were present. A second event at Ann's Choice is slated for 2009, and potentially with adult children of residents.

APCaP Events in 2009

APCaP will host other events about prostate cancer and prevention in 2009. If you'd like to host an educational gathering in your community, please contact us at info@apcap.org.

PSA RECOMMENDATIONS:

As a reminder, healthy men over 50 should have an annual PSA blood test. However, African Americans and people with a family history of prostate cancer should begin testing between ages 35 and 40.

Motivations Toward a Healthy Prostate

What factors motivate men to have regular prostate cancer screening?

Marriage, living with a significant other, family history of the disease, and worry about prostate cancer were associated with men having screening, according to a December 2008 study in *Cancer Epidemiology Biomarkers & Prevention*.

Study results suggest that men with a family history were more likely to have regular screening if they lived with a wife or partner. Higher-risk men who lived alone were less likely to have screening than those with no family history of prostate cancer. However, men who were worried or concerned about prostate cancer had higher rates of frequent screening regardless of their marital or housing status.

The study assessed data from almost 2,500 men ages 40 to 79 in Olmsted County, Minnesota. Medical and laboratory records were reviewed to determine the number of digital rectal exam (DRE) and prostate-specific antigen (PSA) tests.

Prevent Prostate Cancer by 2015

Studies providing clues about factors affecting prostate cancer screening decision making will help health care professionals and advocacy groups to design interventions toward increasing screening rates. Study results



may also help men and women learn how they can be more proactive about their health.

There is increasing evidence that women can serve as health advocates for men. Ultimately, however, the responsibility falls with the individual. Men need to engage in better self-care. Future studies need to evaluate other psychosocial factors about why men do and do not take care of their health.

Join APCaP's Campaign

Officially join the APCaP family through a tax-deductible contribution!

Our goal in 2009 is to raise \$10,000 from Male Call reader donations.

Your contributions allow us to create and produce our quarterly newsletter to educate the public about prostate cancer and prostate cancer prevention. Thank you for your support!

Amount:	\$25	\$50	\$75	\$100	\$250	Other
Visa/Mastercard #			Exp. Date _	Check #		
Signature _						

IF YOUR EMPLOYER HAS A MATCHING GIFT PROGRAM, PLEASE ENCLOSE THE APPROPRIATE FORM.

Mail to: APCaP, 15248 South Tamiami Trail, Suite 1000, Fort Myers, FL 33908

Top 8 Tips for Prostate Cancer Prevention (Continued from Page 1)

4. Sleep

Healthy adults need between 7 and 8 hours of quality sleep nightly in dark spaces. At least 7 hours of sleep each night, combined with physical activity, may lower cancer risk. Research suggests that the benefits of exercise against cancer may vanish without at least 7 hours of sleep.

Nighttime work is a probable cause of cancer, according to the International Agency for Research on Cancer. People who work at night do not have regular sleep patterns and are exposed to light when the body is best regulated through sleep in darkness. These factors appear to alter hormones that influence cancer cells.

5. Reduce Stress

Some studies indicate a link between stress and an increased risk of developing cancer.

Chronic stress can reduce healthy functioning of the nervous system, immune system, hormones, and other components of the body. Constricted arteries, high blood pressure, blood clotting, and shrinkage of the brain's hippocampus have also been associated with chronic stress.

6. Avoid Smoke & Smoking

Cigarette smoking accounts for at least 30 percent of all cancer deaths, according to NCI.

Second and third hand smoke is also harmful. Second hand smoke is what non-smokers are exposed to from a smoker's exhale or a smoldering cigarette. After second hand smoke has cleared the room, recent research has identified another level of harm. Third hand smoke is an invisible, toxic combination of gases and particles that clings to a smoker's hair, clothing, furniture, carpeting, and other items. The residue of third hand smoke contains heavy metals, carcinogens, and radioactive materials.

7. Clean your Environment

More than two-thirds of cancers are linked to natural and human-made agents in the environment, according to the NCI 2004 report "Cancer and the Environment". NCI defines the environment as everything outside the body that interacts with humans.

Substances cited by NCI as either known to cause or likely to cause cancer include tobacco, foods such as red meats, alcoholic products, ultraviolet radiation, ionizing radiation, viruses and bacteria, medical drugs, synthetic hormones, fibers, fine particles and dust, diesel exhaust particles, toxins from fungi, vinyl chloride, benzidine, polycyclic aromatic hydrocarbons, dioxins, metals, pesticides, solvents, and more.

NCI refers to over 100,000 chemicals commonly used by Americans in household cleaners, solvents, pesticides, food additives, lawn care, and other products. Each year, approximately 1,000 new chemicals are introduced. Some chemicals are more harmful than others. One example is the common plastic additive called bisphenol-A that has been linked to prostate cancer.

To learn more about the relationship between chemicals and your health, you may wish to explore the following resources.

- NCI at www.cancer.gov
- Collaborative for Health and the Environment at www.healthandenvironment.org
- Science and Environmental Health Network at www.sehn.org

8. Support from Relationships

Studies suggest that people who have strong relationships are healthier and happier.

Since women are traditionally more proactive than men about their health, women may also play a role in encouraging men to have prostate cancer screening and take other steps toward prostate cancer prevention.

Prevent Prostate Cancer by 2015

Reducing Cancer Risk

How can the average person effectively and definitely reduce their cancer risk? Research continues to provide more data regarding cancer risk factors.

Moderate physical activity, careful health care insurance strategy, avoiding cigarette smoking, and potentially



general optimism in life are associated with reduced cancer risk, according to a Duke University study presented at the November 2008 American Association for Cancer Research meeting. The study used data from several government sources and defined elderly as 65 years of age or greater.

Study results suggest that light physical activities decrease risk of cancer, and moderate activities decrease the risks even more. However, the role of vigorous activities appears contradictory. Both colon and prostate cancers were affected more by physical activities.

"About 80 percent of all cancers are diagnosed in the elderly, and more than 80 percent of known risk factors are potentially preventable," said Igor Akushevich, Ph.D., senior research scientist, at Duke's Center for Population Health and Aging.

Optimism Aids in Health Navigation

For men diagnosed with prostate cancer, what characteristics assist them in decision-making?

Men with prostate cancer often decide between more than one treatment with different benefits and side effects. Research suggests that nearly half of prostate cancer patients experience difficulty and distress during the treatment decision-making process.

A study in the September 2008 *Psycho-Oncology* evaluated prostate cancer patient characteristics and cognitive processes that influence decision-making. A survey of 125 patients with localized prostate cancer investigated optimism and decision-making skills.

"Active patient involvement in the treatment decision is generally considered desirable as prostate cancer treatment is an example of 'preference-sensitive care'; that is, there are typically two or more appropriate treatment options available and prostate cancer treatments involve trade-offs between side-effects and benefits," wrote the study authors.

Study results indicate that men with prostate cancer who are low in optimism may be more challenged to make treatment decisions and then feel satisfied with them. A lack of optimism appears to lower self-confidence.

Additional studies that evaluate the relationship between personality and self-advocacy related to prostate cancer prevention, treatment, and survivorship will help researchers, clinicians, and the general public understand related variables and identify new tools to effectively navigate health issues.

Turn Off the Lights- New research provides more supporting evidence that exposure to light at night increases rates of prostate cancer.

Data was collected from a database of the International Agency for Research on Cancer on male cancer incidence in 164 countries. Higher rates of prostate cancer occurred in countries with higher levels of exposure to nightly artificial light.

Researchers alluded to several theories that could explain the increased incidence of prostate cancer due to nighttime light exposure, including suppression of melatonin production, suppression of the immune system, and an effect on the body's biological clock due to confusion between night and day. Regardless of the cause, there appears to be a link between cancer and nighttime light exposure.

Alliance for Prostate

Low Fat, Vegetarian Diet Slows PSA Doubling Time

A diet low in saturated fat, high in vegetable protein, and low in animal protein, including dairy products, is associated with a "substantial" increase in prostate-specific antigen (PSA) doubling time and an increase in quality of life, according to a study in the December 2008 *Urology*. The PSA doubling time is the time it takes for PSA levels to increase by 100 percent.

Study participants included 36 men with biopsyconfirmed prostate cancer who had received primary treatment for more than 6 months previously and who had increasing PSA levels.

Researchers randomly assigned a group of men and their partners to attend 11 dietary and cooking classes and mindfulness practice to support the change in diet, or to a control group not participating in the interventions.

The study measured dietary compliance, quality of life, and PSA levels at the beginning of the study, after the 11-week intervention, and again 3 months after the intervention was assessed.

The group that participated in the diet and mindfulness program consumed significantly less saturated fat, more vegetable protein, and less animal protein, including dairy products, compared to the control group. They also reported more indicators of increased quality of life compared with the controls.

"The mean PSA doubling time for the intervention group was substantially longer at the 3-month follow-up visit than that of the controls," the study authors reported.

Other study results suggest that diet, exercise, mindfulness, and other lifestyle changes have a variety of health benefits, including against prostate cancer.

Prostate cancer is the second most common form of cancer diagnosed among American men. This year, approximately 220,000 new cases of the disease are expected to be diagnosed, and about 27,000 men will die of the disease.

LISTEN UP...

APCaP challenges you to take better care of your health!

What can you do to feel, look, and live better?

Email us your stories at info@apcap.org! We'd appreciate hearing from you!



"He's one tough cookie. I've never seen anyone bounce back from an autopsy before."

Potential PSA Inhibitors

New studies suggest that commonly used substances might lower PSA scores.

Aspirin & Other NSAIDs

PSA levels appeared to be lowered by nine percent in men taking aspirin or another nonsteroidal anti-inflammatory drug (NSAID) compared to those who are not. Researchers suggested that these findings raise the question about whether or not aspirin use may lower PSA counts below the level of clinical suspicion and therefore impair the detection of early-stage prostate cancer in some men.

The study analyzed over 1,200 men over 40 who were referred for a biopsy of the prostate. About 46 percent of the men reported taking aspirin or another NSAID. The study was presented at the November 2008 American Association for Cancer Research meeting.

Study investigators concluded that more research is needed to determine if NSAID use is affecting prostate cancer risk, or the ability to detect prostate cancer among NSAID users.

Statins

The September 2008 *Male Call* contained the article, "Lower Cholesterol, Lower PSA," about statin drugs lowering PSA levels with the drop in PSA proportional to the drop in cholesterol. Another analysis of this study was published in the November 2008 *Journal of the National Cancer Institute*. Researchers stated that statin therapy decreased PSA concentrations by 4.1 percent on average. However, a 17.4 percent drop occurred in men who started with higher PSA levels of 2.5 or more and had the greatest decrease in cholesterol.

More research is needed to gather information about how statins affect prostate health, prostate cancer detection, the link between cholesterol and the prostate, and PSA counts, including PSA scores measured over time with and without statins and whether or not statins lower prostate cancer risk.

Prostate Cancer Symptoms



What are the symptoms of prostate cancer?

Prostate cancer often does not cause symptoms for many years. By the time symptoms occur, the disease may have spread beyond the prostate. When symptoms occur, they may include the following.

- Urinary problems
- Difficulty having an erection
- Blood in the urine or semen
- Frequent pain in the lower back, hips, or upper thighs

These can be symptoms of cancer, but more often they are symptoms of noncancerous conditions. It is important to check with a doctor.

What other prostate conditions can cause symptoms like these?

As men get older, their prostate may grow bigger and block the flow of urine or interfere with sexual function. This common condition, called benign prostatic hyperplasia (BPH), is not cancer, but can cause many of the same symptoms as prostate cancer. Although BPH may not be a threat to life, it may require treatment with medicine or minor surgery to relieve symptoms. An infection or inflammation of the prostate, called prostatits, may also cause many of the same symptoms as prostate cancer. Again, it is important to check with a doctor.

This information comes from the National Cancer Institute. More information is available at www.cancer.gov.



Prevent Prostate Cancer by 2015

1-888-50-APCAP or 1-888-502-7227 Email: info@apcap.org

Alliance for Prostate Cancer Prevention 15248 South Tamiami Trail, Suite 1000 Fort Myers, FL 33908



This newsletter is Sponsored by a generous Educational Grant from Sanofi-Aventis Pharmaceuticals.



Mail to: APCaP, 15248 South Tamiami Trail, Suite 1000, Fort Myers, FL 33908