



Newsletter of the Prostate Cancer Support Groups of South Australia and Northern Territory

www.prostate.org.au

MAY - JUNE 2010

Conference excitement is building

The PCFA international conference in August has developed a program that reaches from clinical developments to support group instruction.

ITH its theme "Advancing Quality of Life", the second international prostate cancer conference held by the Prostate Cancer Foundation of Australia will bring together leading Australian and international speakers while also showcasing the latest developments in prostate cancer research, management, health promotion, treatment and support.

The conference, to be convened at the dazzling Gold Coast Convention and Exhibition Centre from Friday August 6 to Sunday August 8, will have designated streams for scientific research, clinical developments, support group instruction and healthcare professional training.

Leading international speakers who will deliver key addresses include:

• Dr John Mulhall, mircrosurgeon and specialist in sexual and reproductive medicine from Memorial Sloan-Kettering Cancer Centre, and author of the book *Saving Your Sex Life: A Guide for Men with Prostate Cancer.*

• **Dr Peter Scardino**, surgeon and head of the Prostate Cancer Program at the Memorial Sloan-Kettering Cancer Centre, who has helped pioneer the use of statistical models to predict the natural progression of prostate cancer and how it will respond to treatment.

• Virgil Simmons, founder of Prostate Net in the US, whose innovative approaches to health promotion (using barbers and other networks to convey health messages) have been used as models in countries around the world – including Australia.

The combined meeting of the Australian Canadian Prostate Cancer Research Alliance and the Australian Prostate Cancer Research Centre, Queensland, will also be convened as a satellite to the main conference.

Conference registrations and accommodation bookings for the event can be completed

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Newsletters can also be read online at www.pcagsa.org.au/pages/supporter.html



CENTRE OF ATTENTION: The vast Gold Coast Convention and Exhibition Centre will be the focus of international attention for the PCFA conference from August 6 to 8..

online by following the links from www.prostate.org.au, sending an email enquiry to conference@prostate.org.au or calling the Prostate Cancer Foundation of Australia Conference Hotline on 1800 668 137.

in brief...

• THE next meeting for the Royal Adelaide Hospital's Health in Men series will be on Friday June 25, from 1pm to 1.30pm, in the RAH's Robson Theatre, with David Cleghorn presenting a talk titled: "Men and Healthy Eating". These talks are sponsored by Pfizer. Could interested attendees please make sure you email your RSVP to rah.healthpromotion@health.sa.gov.au or phone RAH Health Promotion on 8222 5193 before June 19 for catering purposes.

• CONTRIBUTIONS from all Support Group members to the monthly Prostate Supporter newsletters are most welcome; please email items and images to prostate-news@fosterhill.com.au

www.pcagsa.org.au

Prostate Cancer Action Group

COMING EVENTS

JUNE MEETING: The Action Group will conduct its next meeting in the upstairs meeting room of the Cancer Council SA building, 202 Greenhill Rd. Eastwood at 5.30pm on **Tuesday JUNE 8.** At present, entry is through the rear stairway of the building.

All interested people are welcome to attend the Action Group meetings, and new members for the action group – from any of the Central Australia Chapter support groups – are greatly welcomed.

JULY MEETING: The Action Group will meet in the same venue, at the same time, on Tuesday July 13.

• For more information about the Action Group and its activities, visit the South Australian Prostate Cancer Action Group's dedicated website, with detailed archives containing its newsletters, at http://www. pcagsa.org.au

Lessons on PSA testing from international trials

Suggested outcomes from major screening trials reflect what support groups do, as Action Group convenor Dean Wall reports.

A N article published in the Medical Journal of Australia (Volume 192 Number 7, April 5, 2010), explored the findings of two major international screening trials that commenced in the early 1990s and collected data from 250,000 men aged between 55 and 74.

Interestingly, the summation of these trials continues the issue that I raised in this newsletter last month – of opposition from some professional medical groups to the idea of either reducing the age of onset of commencing PSA testing, or of routine screening.

One trial, involving 180,000 men, found that if PSA testing was reduced from once annually to once every two years, detection rates of advanced cancers was reduced by half.

The other trial showed that in regions offering easy access to testing and professional services there was much less benefit from an organised screening program in finding more undiagnosed advanced cancers.

However, in regional areas where such services were not so easily available, screening was found to detect many more, particularly advanced cancers, while in urban areas where services were easy, the number of early cancers detected was greater. A summary of findings drawn from these trials declare:

• Coordinated screening programs will not reduce mortality in countries or regions where prostatespecific antigen (PSA) testing is already highly prevalent, but will reduce mortality in places where PSA testing prevalence is low.

• Coordinated screening will cause over-diagnosis and over-treatment.

• Instigating a national screening program should be delayed until a more specific marker for aggressive disease than PSA level becomes available. In the meantime, results of the two trials can be used to inform the development of regional testing policies in Australia.

• These policies should encourage regular PSA testing in regions with low testing prevalence, but must also embrace methods of dealing with over-diagnosis and overtreatment.

• Active surveillance programs, where men with early-stage cancers are monitored regularly by PSA testing and digital rectal examinations, and development of counselling services should be encouraged.

The report finished by saying: "We envisage a valuable role for specially trained counsellors, as many decisions relating to prostate cancer detection and the need for treatment require lengthy discussions, and usually involve the wife or partner of the man at risk.

"General practitioners and specialists rarely have the time to explain the complexity of important issues such as 'who should be tested and how often' and 'who should undergo or avoid treatment' – and counsellors can capably fill this role.

"This is certainly not a novel concept. Breast cancer counsellors have been appointed in most health districts in the past 15 years and play an important role in helping women to understand the complexities of breast cancer treatment."

I believe that much of this function can be, and to a large extent is, undertaken within the prostate cancer support group network, with its emphasis on expert guest speakers on many related subjects, and the life experiences of group members.

Within this sphere of support, the Prostate Cancer Action Group will continue its work of disseminating information to provide men (and their significant others) with the knowledge to make informed decisions regarding their own prostate and general health.

Prostate Cancer Support and Awareness: ADELAIDE GROUP

Highlighting the full extent of crucial men's health issues

Too often the subject of men's health focuses only on issues surrounding male reproductive organs, but there is much more to consider, as Jeff Roberts reports.

COMING EVENTS

JUNE 21 MEETING: The Adelaide **Prostate Cancer** Support Group meets on the third Monday of each month in the Park View Room of the Fullarton Park Centre, 411 Fullarton Rd, Fullarton, starting at 7pm. The support group's June meeting will feature a general discussion among members plus the viewing of a DVD.

JULY 19 MEETING:

Guest speaker for the evening will be Diabetes Educator Michelle Hogan from Diabetes SA, speaking on the subject of diabetes.

• For more

information, visit the Adelaide Support Group's dedicated website at **www. psaadelaide.org** or contact Ian Fisk by phoning 8296 3350, or send email to info@psaadelaide.org

R JOE Abadia from the Men's Health Clinic. Tapleys Hill Rd at Seaton, emphasises that men's health is not only related to the functions of a man's reproductive organs and difficulties that emerge such as prostate disease. testicular disease or erectile dysfunction. Speaking at the Adelaide Support Group's May meeting, he acknowledged the importance of general health issues to all men and included mental health and social issues. relationship and even financial difficulties.

Dr Abadia graduated from Adelaide University in 1985 and has pursued a special interest in men's health for more than 10 years, attending to many patients referred to him by urologists. For these men, he helps resolve their complications and is experienced in all forms of treatment for sexual health.

Dr Abadia stated that five Australian men die prematurely each hour, though he is greatly encouraged that Australia now has a Men's Health Policy – the first government public health policy related to men and endorsed by a Minister for Health anywhere in the world.

There is a perception that men do not care about their health. This is not necessarily so, though patients should be encouraged to make long appointments for general checks, to enable adequate

A FEW THINGS THAT CAN HELP

Dr Abadia outlined several things that can be done to reduce the possibility of prostate cancer:

• Maintain a low-fat diet.

• Introduce lycopene to your diet – present in tomatoes (preferably cooked), tomato paste and watermelon.

- Fish oil capsules should be taken 3-4 times each week.
- Pomegranate juice has achieved favourable results.

• Be sceptical of some promoted supplements. Carefully scrutinise such goods as sal palmetto, soy products, selenium and calcium.

- A bone density test can be very important.
 Cessation of smoking, or ideally not smoking
- in the first place, is very important to good health.
- Obesity in Australia is high. Eat in moderation.
 The Body Mass Index (BMI) should be within
- the recommended 18.5-25 range.

tests for bowel cancer, blood pressure and cholesterol.

He gave details of the General Practice Medical Plan, which requires a 40-minute consultation and relates to people with a chronic disease, including patients needing multi-disciplinary care.

Dr Abadia pointed out that it is possible to reduce the risk of developing and subsequently dying of most cancers. Most of the measures relate to lifestyle changes followed by appropriate treatment. Measures include a healthy and balanced diet, regular exercise, maintaining healthy weight and a modest waistline. Screening has proved successful for bowel cancer. While prostate cancer screening is currently a debatable topic, patients must be advised of their options – including PSA testing – to allow them to make an informed decision.

Mental health is very important and assessment and treatment is available, and can be subsidised via a mental health plan, allowing up to 12 appointments with a psychologist. Good sexual health is also often discounted, and Dr Abadia concluded his presentation with information and demonstrations on a range of sexual aids.

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www.pcsog.org

City of Onkaparinga Prostate Cancer Support Group

COMING EVENTS

JUNE BARBECUE:

The City of Onkaparinga Support Group held its mid-year barbecue at the Willunga Lions Sale Yard on Sunday June 6. This took the place of the support group's regular monthly meeting

JULY MEETING:

The next support group meeting is at 6.30pm on July 7 in the boardroom at Noarlunga Community Hospital, Alexander Kelly Drive, Noarlunga.

• For more information about coming events, visit the City of Onkaparinga Support Group's dedicated website at www.pcsog.org

 Special thanks to the City of Onkaparinga Support Group sponsors: Southern **Primary Health** Morphett Vale, Port Noarlunga-**Christies Beach RSL Sub Branch. Cartriges Now Christies Beach**, **The Original Open Market** and to the City of Onkaparinga Council.

Reaching out to more patients in hospitals

The help and fellowship of support groups should be extended further to help patients in hospitals, as John Shields suggests.

M EMBERS of support groups can still disappear for lengthy treatments in hospitals without their support group mates being aware of it, which has prompted interest in the extension of very good hospitals visitation program.

The Central Australia Chapter Council has three hospital visitor members available for people who come to Adelaide for hospital treatment from country areas or from the Northern Territory, who notify us in advance the details of their time in hospital.

I would also like our chapter to have hospital visitors available for city dwellers, with a small group of members being prepared to commit to a program of hospital visits on a regular basis. We could have some training sessions for members who are not used to visiting someone in hospital who they may not know, assisting them to approach their visitations with capability and confidence.

Many men are admitted to hospital and support groups do not know they were there; even more men in hospital for prostate treatments do not even know about support groups or people who can come and talk with them on a one-to-one basis and explain they have had the same diagnosis and treatment.

Asking about whether hospitals have a policy regarding a "stranger" visiting a patient after they have had treatment, a Repatriation General Hospital nurse said there is no such policy, but suggested patients be asked first if they want a visit.

She said the hospital already gives new patients a prostate cancer pamphlet and leaves it up to the patient as to what they want to do about contacting a support group. A personal visit by someone who can empathise with them is much better, so I propose that a new pamphlet be printed with all of the support groups' current information, which can be placed in all of the city hospitals and with a backup supply for further distribution.

National Support Group Services Manager Paul Redman is going to follow up this idea.

TRANSPORT FORUM

HEALTHY Cities Onkaparinga, in collaboration with Seaford District Residents Association and Friends of Sullys, is hosting a "Transport in the South" community forum on Wednesday July 7. Local interest groups are being brought together to advocate for a southern transport master plan outlining long-term sustainability within the region. This will be held at the Civic Centre, City of Onkaparinga, with light refreshments served from 4.30pm and the forum being held from 5pm to 7pm. This is the same night as our July support group meeting but please tell your friends and neighbours about this important forum.

COMMITTEE NEEDED

CANCER Council SA Project Officer Kathriye Strassnick has informed our support group that Cancer Council SA is looking for people to join the Southern Relay For Life Committee, to organise the relay in Adelaide's southern area. Anyone interested could contact Kate McMillan on 8291 4111.

Kate also passed on information that the Melbourne-based Prostate Cancer Telephone Groups can be joined by calling 03 9635 5110 or email csg@cancervic.org.au

FIELD OF MEN FOOTBALL MATCH IDEA

AFTER watching the recent Field of Pink and the Melbourne Football Club wearing pink on their jumpers to raise awareness about Breast Cancer, I thought it would be a good idea to have a Field of Men football match each year to raise awareness about Prostate Cancer. Our Chapter Council members believe the best day to have it would be when the Adelaide Crows play Port Power at AAMI Stadium. Please forward your thoughts on the concept.

TELECONFERENCES

THE NEXT bi-monthly Central Australia Chapter Teleconference is on Thursday June 10 at 10.30am. Peter Kiley represents our members at this link-up; please let him know by June 8 of any issues you would like discussed.

Mitcham Prostate Cancer Support Group

Carer relief with respite options and vacations

It's an inconvenient truth that most of us will need an escape from routine or respite care in our twilight years, as Mitcham Support Group deputy chairman Roland Harris reports.

THE Mitcham Prostate Cancer Support Group celebrated its fifth birthday at its May meeting, where 15 members and guests shared a delicious cake during supper – and we extended a special welcome to John Shields from the Onkaparinga Group. Seven absentees missed out, but may have been at home providing respite care or away enjoying a break from routine.

In a novel change from matters medical, we appreciated a visit from Belinda Plush of Wyatt Holidays and Catherine Naulty, coordinator of ACH Group Respite Services at Findon.

Catherine told us about respite options for carers aged over 60 living in seven local council areas, including Mitcham and Marion.

ACH Group tailors respite to meet the needs of both the carer and person they care for, providing an experienced, trained volunteer to meet their needs in the home. ACH has provided this service since 1952, charging \$5 to \$25 per session, depending on the person's ability to pay. It's a service that also helps to keep people in their own homes for longer. All enquiries should be directed to the ACH coordinator on 8349 3515.

Belinda's organisation helps people over 60 take a holiday – planning, booking, transport, care of house, pets, or indeed anything that could otherwise stop older people taking a holiday of their choice.

Not every retiree is a grey nomad equipped with Pajero and caravan, so Wyatt Holidays helps those who need assistance to take a break.

All enquiries should be directed to the Wyatt holidays coordinator on 8350 2244.

This segment concluded with avideopresentation, portraying Wyatt Holidays' diversity in assisting indigenous, ethnic and mainstream Australians with holidays of choices. This topic reminded us that after the first flush of love, establishing a home and raising children, a lasting marriage will ultimately redefine the partners into carer and caredfor.

Options for respite and holiday will improve the lifestyle of all, and hopefully delay transfer to an aged-care facility. As "baby boomers", I wonder how my wife Marilyn and I will handle the hurdles of later life. How will systems cope with this privileged generation of Aussies in their twilight years?

Theban Roberts presented gifts of appreciation to Belinda and Catherine.

To conclude the meeting during discussion time, a new group member, Keith, aired concerns about the cost of brachytherapy treatment. The value of having peer support was justified by the positive advice he received. This is precisely why we exist as a support group.

COMING EVENTS

JUNE 24 MEETING

The next Mitcham Support Group event will be held on Thursday, June 24, in the Colonel Light Gardens **RSL** club rooms at **4 Prince George** Parade, Colonel Light Gardens, from 7pm. Instead of guest speakers - and because you asked for it - the format will be an open discussion about personal health issues, which proved popular with group members last year.

• For more information on events and group activities, visit the Mitcham Group's dedicated website at www. psamitcham.org

Interest for new Whyalla Prostate Cancer Support Group

I t is especially pleasing to note that as a consequence of the Action Group's Jeff Roberts conducting a Prostate Cancer Awareness meeting in Whyalla, and a meeting in May of the PCFA Central Australia Chapter at the Whyalla Foreshore Motor Inn that attracted several

local attendees, there is now enough interest shown by some of them to start a new Whyalla Support Group.

The management of the Foreshore Motor Inn in Whyalla has very kindly offered them the use of an excellent meeting room "free of charge – for life", plus a good discount on superb meals served by friendly and very efficient staff. We look forward to attending the first support group meeting to be held in Whyalla, which will be organised as soon as a guest speaker can be arranged.

John Shields

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Barossa Prostate Cancer Support Group

Making new connections

Efforts continue to find new ways of connecting with more men's groups to spread the prostate cancer message, as Barossa support group convenor Don Piro reports.

T HE Barossa Group met during May at Don Piro's house in Nuriootpa, sitting around the chiminea fire on a cool autumn day reviewing how everyone was going in their health, discovering there was lots of good news to share and a few challenges to discuss.

The group reviewed its involvement at the Kapunda Fair and considered what we might improve on next time. Don said he had received the Andrology Men's Health Kit and was planning to do two presentations through August and September with a men's health worker and a football club in Kapunda.

Don is also meeting with the Cancer Care Centre (Unley) Manager, who is

COMING EVENT

• The Barossa Support Group meets on the third Tuesday of each month at Don Piro's home, 28 Kindler Ave, Nuriootpa. Please contact Don for further information on 8562 3359 or 0419 863 124.

keen to come to the Barossa and do a presentation about the centre's facilities and present a demonstration on complementary therapies.

There may be possibilities that we can combine resources and work together with a coffee morning that will bring the community together to raise cancer awareness – and which could hopefully lead to the expansion of our group.

There is also the possibility of using such an event to develop

a Breast Cancer support group for women in the Barossa region.

There will be more information on this event later in June.

Don shared with the group that the Barossa Area Fundraising Committee he is part of is targeting its fundraising activities to purchase a second car by August.

The local council will manage this new car and will use it specifically to transport Barossa Valley cancer patients to medical appointments.

The next support group meeting is at Don Piro's house at from 2pm to 4pm on June 15 (consistent with our routine of meeting on the third Tuesday of each month).

Since the last meeting, the support group has been contacted by the local Lions Club, which is keen to do a joint local prostate cancer awareness raising activity as part of a national program they are involved in.

The Lions have asked us to consider having one of our meetings at their Nuriootpa Men's Shed, as a way of connecting with other men. It'll make a good topic for discussion at the June meeting.

Research findings and news items from around the world Persisting myth on BMI-PC link refuted

A MAJOR study has shown there is no clear relationship between the Body Mass Index (BMI) – a common measure of adiposity – and the risk of prostate cancer.

The large European cohort study EPIC confirmed an overall lack of association between BMI and other anthropometric measures with the incidence of prostate cancer. Analysis involved 2446 cases diagnosed in an average of 8.5 years of follow-up, among the cohort of 130,000 men free of cancer when recruited.

When the stage and grade of the tumour were taken into account, investigators found an excess of advanced cancers among those having a high waist to hip ratio, a measure of central obesity.

The notion that adiposity and markers of energy balance might be related to the aggressiveness of the disease and therefore to its outcome gained attention after another large US study showed that the risk of dying from prostate cancer rather than being diagnosed with the disease was significantly greater in participants who were obese or overweight at recruitment for the study.

Many studies have examined whether the types of food eaten and blood levels of certain nutrients may be associated with risk. "This research has not shown any definite associations with any foods or nutrients," says Professor Tim Key, EPIC collaborator and professor of epidemiology at Oxford University. "There is now strong evidence that men with relatively high blood levels of insulin growth factor-1 (IGF-1) do have a moderately risk for developing prostate cancer. This finding should make it easier to plan studies to improve our understanding of the actiology of prostate cancer."

Researchers are currently investigating how dietary and other lifestyle factors may influence blood levels of IGF-1.

• Source: www.uicc-community.org

Murray Bridge Prostate Cancer Support Group

MONTHLY MEETINGS

The Murray Bridge Prostate Cancer Support Group conducts its monthly meetings at 7.30pm on the third Wednesday of each month, at Our Wellbeing Place, 108 Swanport Rd, Murray Bridge.

The next meeting will be on WEDNESDAY, JUNE 16 and the guest speaker will be Graham Lyons, talking about naturapathic treatments.

• For further details, phone Ron Lehmann on (08) 8532 3277 or email bronron@aapt. net.au

Powers of Attorney explained

The complexities of important legal issues were explained in clear, simple terms for members , as Trevor Muirhead reports.

THE Murray Bridge support group's May meeting welcomed Fiona Shilton from local solicitors Mason Westover Homburg to talk about wills and Powers of Attorney. With writing wills, Fiona explained that:

• Documents must be in writing and signed by two witnesses who may be beneficiaries, and the same pen should be used by all signatories.

•If the will is not drawn up correctly, it will be invalid and could lead to the person dying intestate.

• A person must be over 18 years and have the mental capacity to understand the process to make a valid will.

• A trustee is paid either a percentage of the value of assets of an estate, or by an hourly rate. Cost savings can be achieved when family members have their wills prepared at the same time.

• An instruction for cremation may be included in a will.

• It is not necessary to destroy a supersede will.

• It is desirable for partners to hold all assets jointly to minimise the cost of probate.

With Powers of Attorney, Fiona explained the different powers that can be exercised by attorneys:

• Powers regarding financial matters may be limited to a certain period.

• Medical Powers of Attorney is limited to medical matters only.

Enduring Power of Attorney enables an attorney or attorneys to act in the case of incapacity of a person in financial matters. It may come into effect when directed by the person concerned, or when decided upon by attorneys, or subsequent to the issue of a doctor's certificate. In an emergency, application may be made to the Guardianship Board to appoint an attorney.

• Enduring Power of Guardianship releates to controlling life style, including medical matters and accommodation.

Research findings and news items from around the world

A Wheel of Hope for those with rare cancers

WHEN Elisa Alleblas was diagnosed with a rare cancerous tumour at the age of 18, she felt isolated by the lack of information about her disease.

"My friends didn't really understand," Elisa said. "When they came to visit me in hospital, they said 'Well, it's not real cancer'. I had to tell them that it is, it's just a different form."

Elisa had a wild-type gastrointestinal stromal tumour (GIST), a rare form of a rare cancer. "It was really difficult because the oncologist who came to speak to us basically knew nothing about it," she said. "He said there were several treatments we could use but he didn't understand the different mutations of GIST. When we got my results back, my rare tumour was of the rarest form, so the chances of the treatments working were reduced." In treating the cancer, Elisa had 62 per cent of her stomach removed as well as 34 lymph nodes. She is currently cancerfree but has quarterly scans to monitor her condition.

Elisa is one of many Australians who have been diagnosed with a rare cancer. There are more than 500 types of rare tumours that account for 20 per cent of all cancer diagnoses and 31 per cent of cancer-related deaths. Despite these figures, rare tumours receive only 5 per cent of cancer research funding.

A new website dedicated to rare tumour research hopes to address the knowledge deficit faced by rare cancer sufferers. An initiative of BioGrid Australia, CART-WHEEL.org is an international web portal that brings together patient information, medical research and clinical trials. Launching the website, Professor Sir Gustav Nossal said it offered a "wheel of hope" to people with rare cancers.

"From today people from all over the world can submit information about their rare tumours so that researchers can develop new insights into understudied rare tumours," Professor Nossal said.

The website provides a support forum for patients who can give permission for researchers to contact them should their tumour be of interest in a clinical trial.

For Elisa, the main draw of the website is that it allows her to connect with other patients facing her disease. "It makes me feel better that I can pass on my information to help somebody else and that gives me something to hold on to."

• Source: The Age, April 15, 2010

Payneham Prostate Cancer Support Group

Scrutinising suicide seriously

Too often the delimma of suicide is not talked about or acted on appropriately to prevent thoughts from turning into actions, as Payneham Support Group coordinator Phil Davis reports.

THEN people are diagnosed with prostate cancer. they are confronted with many challenges - often proving quite overwhelming, which can result in people suffering from depression. Grantley (Snowy) Day, a Living Works Facilitator and Lifestyle Advisor, spoke at the Payneham Support Group's May meeting about depression and its most tragic consequence that affects a minority of cases: suicide.

Each year in Australia about 2000 people die by suicide, while attempted suicides can be 100 times greater than the number of suicides.

To help stem these numbers, Living Works provides suicide intervention training, to help people learn how to identify and help people who are at risk, to keep them safe and to give them access to further support.

Grantley mentioned that suicide is quite a confronting issue for some people, but is a necessary topic to broach if we hope to initiate steps that will prevent suicide. While it may prove difficult – if not impossible – to prevent people from thinking about suicide, preventing them from acting on these thoughts is achievable.

Thoughts of suicide are very complex and personal, and it is important to recognise that those susceptible or at risk may have health issues, such as a diagnosis of cancer or mental health issues, that result in depression, or have suffered any number of life changing events, such as:

• Recent loss: of a loved one, lover, job, income/livelihood, even a cherished pet.

• Major disappointment: failed exams, missed job promotions.

• Change in circumstance: retirement, redundancy, children leaving home.

• The suicide of a family member, friend or a public figure.

• Financial and/or legal problems.

Fortunately, most people who consider suicide get through their crisis. However, Grantley mentioned that people at risk of suicide usually give clues about their intended behaviour that may or may not include:

• Previous suicide attempts.

• Being moody, sad and withdrawn.

• Talking of feeling hopeless, helpless or worthless.

• Taking less care of themselves and their appearance.

• Losing interest in things previously enjoyed.

• Finding it hard to concentrate.

• Being more irritated or agitated.

• Talking or joking about suicide.

• Expressing thoughts about

death through such things as drawings, stories, songs.

• Saying goodbye to others and/or giving away possessions.

• Engaging in risky or selfdestructive behaviours.

• Increasing alcohol and/or drug use.

People exhibiting any or some of these symptoms may or may not mean a person has thoughts of suicide – but if they arouse concern, then their situation needs to be checked.

Grantley emphasised that it is very important to assist a person through a crisis, expressing your care and concern. Problems can appear more manageable after speaking with them. Build trust and inquire whether they are considering suicide, being aware that all suicide thoughts are to be taken seriously.

Assess how much thought has been put into it: if they have the means, consider safety issues and don't leave the person alone. Never promise to keep it a secret.

Seek support from family, friends or religious ministers. A pet may be helpful and build the person's strength to cope.

Remember that you don't have to provide all the answers: there is professional help available from doctors, counsellors, psychologists, social workers, police, ambulance, mental and community health services and telephone counselling

COMING EVENTS

JUNE 15 MEETING: The Payneham Support Group will meet in the Payneham RSL Clubrooms, 360 Payneham Rd, Payneham at 7pm on Tuesday May 18. Guest speaker will be Dr Stephen Hardy, **Research Scientist** in **Biochemistry** and Immunology, speaking about the Mechanics of Cancer.

• For more information about the Payneham Support Group – or for a helpful chat about your prostate cancer issues – please phone Phil Davis (8251 0939 classic100@ lifestylesa.net.au), Peter Woodrow (8263 5556) or Arthur Seager (8289 4180), or visit the Payneham Support Group's dedicated website at www. psapayneham.org

services, such as Lifeline's 24 hour service on 131 114.

Grantley also expressed how important it is to look after yourself if you are helping a suicidal person. It is difficult and emotionally draining to support someone who is suicidal, especially over extended time.

Do not shoulder the responsibility alone: seek help and support from others.

McLaren Districts Prostate Cancer Support Group

Exercise after 60 could help keep fatigue at bay

The harmony we achieve between body, mind and spirit is the key to achieving physical and mental wellbeing deep into our old age, as Bryan Hearn reports.

S PEAKING to the McLaren Districts Prostate Cancer Support Group about health and fitness for people aged over 60, retired local GP Dr Clive Auricht explained that – amazingly – it appears that simply drinking a suitable quantity of water on a daily basis and undertaking some regular exercise can resolve and prevent many minor illness and conditions that might be experienced by more elderly members of the community.

To explore this notion in more detail, Clive addressed three topics: BODY, MIND and SPIRIT.

Members of the audience were invited to nominate what they thought made up "the body", which produced a lengthy list including such items as: water, bones, muscles, sinews, joints, the brain. Clive worked his way through the list and explained how the efficient operation of each particular item affected the overall health of a person's life – and how each item depended on the effective and healthy operation of all the other items in the list of body parts.

This information was presented in a clear and easily understood manner despite a lack of complicated medical terms, though we were provided with a very simple explanation of the difference between divaticulitis and divaticulotis.

Lengthy discussions on BODY matters left scant time to discuss the other headings, though we quickly learned that for the MIND to be in good health it is very important to keep our minds active. Simple activities such as completing crosswords or Sudoku puzzles, participating in Scrabble or other similar games were all recommended.

To assess the SPIRIT, it was noted that most people appear to have some form of spiritual belief but then emphasized how important it is to have some balance in these beliefs.

COMING EVENT THURSDAY JUNE 24

The McLaren Districts group will next meet in the administration building at the rear of the McLaren Vale & Districts War Memorial Hospital, Aldersey St, McLaren Vale, at 7pm on Thursday, June 24. The guest speaker will be podiatrist Airlie Nicholls.

• Contact support group president Bryan Hearn on 8323 7924 or 0410 539 274 to confirm your attendance.

Many examples were cited as to the effects on life style that could be anticipated when having extreme beliefs. It was also pointed out to us how debilitating it can be to worry too much about death or how it might come about. It's much healthier to be open and upfront, and to talk about these concerns with family and friends.

WHITE WITCH DOCTOR

AS A CONCLUSION to his interesting presentation, Clive also told of his experiences while practicing medicine for several years in Papua New Guinea, describing his somewhat primitive operating theatre with chicken wire walls where the local natives could stand outside and watch operations as they progressed.

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He described how he used ether as an anesthetic by dripping it onto a mask worn by the patient and how, at appropriate moments, he would wave the scalpel about, putting on a show for the spectators.

As his patients recovered they were told about how he had treated them, which led to him being known as the "white witch doctor."

And now for something completely different ... a touch of humour

ANOTHER EXTRACT FROM THE LOG OF ACTUAL CALL CENTRE CONVERSATIONS

Caller: My brand new fax machine needs cleaning so can you give me the telephone number for Jack? Operator: I'm sorry, sir, but I don't understand who you are talking about.

Caller: On page 1, section 5, of the fax machine user guide it clearly states that I need to unplug the fax machine from the AC wall socket and telephone Jack before cleaning. Now, can you please give me the number for Jack? Operator: No, but I can give you the location. I think you're wanting to remove the telephone plug on your wall.

Prosper Darwin Prostate Cancer Support Group

Coordination required to best promote the cancer message

Local support groups need to be notified about all local publicity opportunities, according to Darwin group's Keith Williams.

THEProsperDarwinsupport group had an interesting recent experience that points out a need for stronger lines of communication between some PCFA staff and support groups.

When a biker group arrived in Darwin at the end of their Long Ride which raised about \$200,000 for prostate cancer, no-one in our support group knew anything about it (and our biker rep would have loved to catch up with them). Their reception was on ABC-TV's Stateline and a PCFA staff member made a cameo appearance welcoming them. I was told that arrangements had come together too late to be able to contact us, and so instead the PCFA spent quite a bit for their staff member to be in Darwin for less than 12 hours.

A week later I was asked by a PCFA staff member from Queensland to catch up with a gent in Darwin for the annual Tyrepower owner's conference. Alan had persuaded the conference organisers to give Prostate

COMING EVENT

The Prosper Darwin support group will next meet on MONDAY, JUNE 14. The group meets on the second Monday of each month, at the Harbour Room, Christ Church Cathedral, corner of Smith St and the Esplanade, Darwin, at 7.30pm.

Cancer a 15-minute segment in a very tight agenda. Having had prostate cancer, Alan was involved in last year's Ride to the Top, and was inspired to run a raffle for the PCFA research program.

I thanked two very generous tyre firms who donated significant prizes, and had time for a quick interview with the MC to plug prostate cancer awareness and support groups to more than 200 people. Alan has also promised to send what he describes as an outstanding Awareness oriented DVD made by a female doctor from Townsville. If it's as good as he says, I'll make it available to any interested groups.

The expected grey-haired holiday exodus has begun, so any tourists in Darwin will be especially welcome to our June meeting, which coincides with General Men's Health Week.

Central Australia Chapter Council Meeting

Succession plans take shape to ensure strong future

CENTRAL Australia Council members flew to Whyalla on May 19 to conduct a public meeting in the Foreshore Motel with a view to setting up a new Support Group in Whyalla. Response from the nine locals present was extremely positive and it appears that the formation of a support group in Whyalla is imminent, with a first meeting likely in mid June.

The council met at the same venue the following day, working through a full agenda until 3pm. Local Ambassador Brian Marshal was thanked by the group for his hard work and commitment in arranging the two meetings for the Chapter Council.

Members were provided with an update of the National PCFA Conference to be held on the Gold Coast between August 6 and 8. Attendees should book early as very good accommodation and flight prices have been secured.

Ongoing attempts are being made to establish a new support group in Mt Gambier, with the help of a local Rotary group. Problems have arisen in obtaining a visiting urologist to speak at a public awareness day but an alternative speaker is being organised.

Planning has commenced for

the Central Australia Chapter Conference to be held at the Novotel Barossa on October 15 and 16. The PCFA will fund the attendance of each group convener and up to three other representatives from each support group.

Under the Central Australia Chapter guidelines, three councilors are required to "retire" at the end of each year – and all nine current councilors have now nominated their proposed "retirement" dates. All members of affiliated support groups are encouraged to nominate for these vacancies – with three council seats to be made available at the AGM and Central Australia Chapter conference in October.

The Central Australia Chapter has proved to be very successful due to the experience of the current councilors. This success must now be built on by new members taking up the role, adding even more new ideas and skills to the group.

The next chapter meeting will be held in Katherine at the Knotts Crossing Resort on Thursday July 15.

Please forward any expressions of interest for council nominations to council secretary Bryan Hearn on bk@chariot.net.au or by phone on 08 8323 7924.

Alice Springs Prostate Cancer Support Group

Being sensitive but sensible

Kenny Lechleitner gives good advice to traditional Central Australian non-urban aboriginal men when talking about health matters, as Alice Springs group convenor Murray Neck reports.

KENNY Lechleitner, guest speaker at the Alice Springs Support Group meeting in May, explained the inherent complications of encouraging Aboriginal men to talk more openly about health matters – especially their own.



Kenny, a highly educated and respected Alice Springsraised Aboriginal man who has a cross-cultural advisory business, lectures to student doctors and health workers about Aboriginal culture to help bridge their understanding of Aboriginal patients as they deliver health services.

He has also been associated with Alice Springs' General Practice Network to speak with Aboriginal men about health matters.

Kenny explained that it is only 30 years since the last of the Western Desert nomads were introduced to modern culture and static living in bush communities.

What to do with human waste and garbage had never been an issue in the past because of their nomadic lifestyle; now hygiene is essential in community living for health reasons, though many of the former nomads have been slow to grasp this.

Changes in diet and lifestyle also brought new health problems such as diabetes and lung, kidney, liver and heart diseases.

Longevity - never good as

Founding support group member and palliative care nurse Fred Miegel (left) with guest speaker Kenny Lechleitner.

a nomad – has improved, but not so much. Dying as a result of prostate cancer for an Aboriginal man would have actually represented a long life, and for this reason recognition of prostate cancer as a lethal disease has a very low priority among Aborigines.

Accurate records of the prevalence of prostate cancer in remote communities are virtually non-existent.

Health problems have increased the number of men suffering from depression.

The loss of sexual function and the occurrence of incontinence, both always considered a dark subject (secret men's business), also contribute to depression and escalating suicide rates.

While Aboriginal health problems are widespread, Kenny believes they can be fixed through correctly presented health education programs.

Aboriginal men have little medical understanding of

body functions and the major organs – more a spiritual understanding than functional.

Kenny is trying to change this by saying to the men, you can remain sensitive about your body but you have got to be sensible, learn about it and get help to fix it.

Who then is best suited, and best qualified, to speak to Aboriginal men about health matters? Firstly, the person would need a reasonable knowledge of Aboriginal culture to understand how the men think, to get their confidence, to make them comfortable and to gain their respect. Only after achieving this would they be able to proceed with delivering vital health messages.

A female doctor with all these qualifications would still not be successful, particularly when it came to the crucial "secret men's business" health matters.

For these reasons, it is also doubtful that a good Men's Health Ambassador Speaker would be successful in delivering a prostate cancer message.

To help with this, Kenny has now become a member of our support group and will assist in designing a basic, plainlanguage, diagrammatically assisted health message suitable for delivery to Aborigines by an acceptable member.

COMING EVENTS

JUNE MEETING: The Alice Springs Prostate Cancer Support Group will meet on Thursday June 10 from 6.30pm to 8.00pm in the conference room of General Practice Network NT, Skinner St, Alice Springs.

EVERY WEDNESDAY Support group member and lifestyle fitness coach Noel Harris invites all support group members and interested persons to participate in his long-term, free exercise session "Stretch and Stride Sessions", held every Wednesday from 5pm at Rhonda Diano **Oval, Head St, Alice** Springs. The current program ends on August 30, 2010.

AUGUST 6-8. National PCFA Annual Convention, Gold Coast Convention Centre.

SEPTEMBER Get ready and start training for the Stride-For-Health Annual Fun Run. Everyone can do it – you can also walk or push a pram!

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NEW DEVELOPMENTS IN PROSTATE CANCER TREATMENT RESEARCH

Simplifying PC screening with a new 3-minute test

Efforts to find improved simple screening methods for prostate cancer have taken an interesting turn with the release of new clinical research results.

NEW three-minute test could help in diagnosing prostate cancer, according to researchers using light energy to measure the level of citrate in fluid samples from the prostate gland. This technique could provide the basis of a rapid means of detecting prostate cancer in the future.

Professor David Parker from the Chemistry Department in England's Durham University has worked with experts from the University of Maryland in the US to develop a technique that measures the wavelength of light as it is shone through diluted samples of body fluids.

The research team, funded by the North East Proof of Concept Fund and the EPSRC, believes that the technique which can measure with speed and accuracy how citrate levels fall in the prostate gland as cancer develops, could also find use for the diagnosis of other medical conditions, associated with poor kidney function.

"Citrate provides a significant biomarker for disease that may provide a reliable method for screening and detecting prostate cancer, and for the monitoring of people with the disease," says Professor Parker. "This technique could form the basis of a simple screening procedure for prostate cancer that could be used in outpatient departments at local hospitals."

His team have shone light into

over 100 different chemical structures to see how they function and respond to the presence of certain important bioactive species. They have looked particularly closely at how citrate and lactate bind to luminescent structures within fluids.

Citrate and lactate are vital for our bodies' metabolism for normal function. Citrate provides energy for cells and the amount found in the prostate varies considerably due to an enzyme called maconitase, which transforms it. This enzyme is very sensitive to zinc and, in prostate cancer sufferers, zinc levels are depressed and the enzyme switches on again.

Professor Leslie Costello from the University of Maryland said: "Citrate is formed in cell metabolism processes which alter as cancers grow. The analysis of the citrate concentration of prostatic fluid can provide an accurate way to screen and diagnose prostate cancer.

"Since citrate concentrations decrease markedly early in malignancy, this technique makes it possible to analyse what's happening quickly in the early and treatable stage of prostate cancer. It shows much promise as a clinical tool."

The new test requires only a microlitre of fluid and the sample can be easily measured in an optical instrument. Using samples from male volunteers, the researchers have developed a portable instrument that can give results in three minutes.

The team's challenge has been how to accurately measure changes in the amount of citrate or lactate in fluid samples using the technique. The early results are promising and the team intends to look at the analysis of other body fluids. A possible way forward is to examine the citrate levels in seminal fluid samples, which are made up of 50 per cent prostate fluid.

Durham University has launched a spin-out company called FScan Ltd to develop the technique and to seek commercial backing. The team has looked at 20 samples so far and verified the analysis in every case. The next stage is to work with a local hospital and examine samples from 200 volunteers to see whether the first Durham results correlate.

Professor Parker says: "It's been a complex process to develop the technique but we're very optimistic about it. Ultimately, this could provide an accurate method of screening for prostate cancer in men that could be carried out in three minutes once a biopsy has been obtained from the patient at a hospital outpatient department."

The discovery follows the invention in 2006 by Durham University Professor Douglas Newton of a Urine Flow Meter. The UFlow Meter helps men to assess if they have a restricted rate of urine flow – one of the warning signs of prostate problems.

The establishment of FScan Ltd is part of the university's aim to enhance the exploitation of the Intellectual Property generated by high quality research activities.

Tim Hammond, head of technology transfer at Durham University, said: "We quickly realised the potential of this research and have worked closely with Professor Parker and his team to secure initial proof of concept funding and to establish FScan Limited as the vehicle to validate and commercialise the technology."

The process for testing is:

1. Sample of prostatic fluid taken from patient in hospital using local anaesthetic.

2. 200 fold dilution of 1 microlitre of sample with a buffer solution into pre-coated disposable cuvettes.

3. Optical spectroscopy on the sample, using a versatile bench top instrument with easy to use software.

4. Reading of results after three minutes, directly reading out actual citrate concentration.

The sample is taken from the prostate gland – part of the biopsy procedure during clinical analysis in urology.

• Source: www.news.bbc.co.uk