



Prostate Cancer
Foundation
of Australia

PROSTATE SUPPORTER

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

www.prostate.org.au

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Barbecuing season is back with a vengeance

The PCFA is urging Prostate Cancer Support Groups to start organising events with local Bunnings stores for September.

BUNNINGS hardware stores across Australia successfully raised more than \$60,000 to assist local Prostate Cancer Support Groups during 2009 – and in 2010 the national hardware chain plans to double this amount by joining with our support group network in events scheduled for the Father's Day weekend, from Friday September 3 to Sunday September 5.

Support groups across South Australia and Northern Territory can join with their local Bunnings stores to run prostate cancer awareness and fund-raising events leading up to Father's Day and then throughout national Prostate Cancer Awareness Month in September

The Prostate Cancer Foundation of Australia believes that the

benefit of being associated with a huge Australia-wide brand such as Bunnings is greater ease with reaching a mainstream audience, effectively spreading the message to more men and families about the benefits of early detection of prostate cancer through regular yearly check-ups from the age of 50.

Bunnings stores are gearing up to have even bigger events than before in store as part of their celebration of Father's Day, recognising the importance of the role that dads play within their families and the wider communities.

Part of this broad message is recognising the need for fathers to be healthy and stay healthy.

The Central Australia Chapter Council endorses and supports the offer by Bunnings stores across South Australia and the

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



COOKING UP A STORM: Adelaide Support Group members Carl Hopkins, Paul Ferrett and Pam Fisk at the Bunnings barbecue during September 2009. *Picture: Karyn Foster.*

Northern Territory to assist all local support groups wherever possible in spreading the message about men being active and sensibly managing their health.

All support groups in the chapter are urged to contact their local Bunnings store to see what promotional and fundraising events can be organised for September.

in brief...

- The Prostate Cancer Foundation of Australia's second international conference at the Gold Coast is being held from August 6 to 8. Conference registrations and accommodation bookings can be completed 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.

- 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

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99
or visit the website www.prostate.org.au

Prostate Cancer Action Group

COMING EVENTS JULY 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 JULY 13. 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.

• 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>

Heralding a brand new PCFA presence in South Australia

STOP PRESS: On July 1, 2010, the Prostate Cancer Foundation of Australia conducted the first meeting of its new South Australian Board.

This preliminary meeting saw most of the board members introduce themselves (a few absentees forwarded their apologies). Many of the new board members had previously served on the board of another group called Prostate SA – which has now been absorbed into the PCFA structure, to ensure more cohesive and fundraising and promotional message programs about prostate cancer.

The meeting, hosted by Adelaide Real Estate



impresario Michael Brock in the boardroom of Brock Harcourts, was attended by PCFA CEO Andrew Giles.

The full board comprises Professor Villis Marshall (Chair), Michael Brock (Deputy Chair), Margie

Andrewartha, Michael Barrett, Nick Bolkus (Chair of Government Relations and Advocacy), Helen Dundon, Malcolm Ellis (Support Groups Representative), Peter Hurley, Justin Jamieson, Dr Peter Sutherland, Will Taylor (Chair

of Business Development), Steven Trigg, Dr Dick Wilson (as Rotary Representative), with Karyn Foster serving as secretary. More details of this meeting will be featured in the next edition of Prostate Supporter.

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

• An older gentleman had an appointment to see the urologist who shared offices with several other doctors. The waiting room was filled with patients.

As he approached the receptionist's desk, he noticed that the receptionist was a very large, unfriendly woman who alarmingly looked like a Sumo wrestler.

He gave her his name. Then, in a very loud voice, the receptionist said: "YES, I HAVE YOUR NAME

HERE. YOU WANT TO SEE THE DOCTOR ABOUT IMPOTENCE, RIGHT?"

All the patients in the waiting room snapped their heads around to look at the very embarrassed man.

He recovered quickly, and in an equally loud voice replied: "NO, I'VE COME TO INQUIRE ABOUT A SEX CHANGE OPERATION, BUT I DON'T WANT THE SAME DOCTOR THAT DID YOURS".

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99 or visit the website www.prostate.org.au

Prostate Cancer Support and Awareness: ADELAIDE GROUP

Learning from the experiences of others in the support group

Even when a support group meeting doesn't go according to plan, the membership have many valuable insights to share with their colleagues, as Ian Fisk reports.

AS the proposed speaker for the Adelaide Support Group's June meeting asked to be rescheduled to August, a general discussion was held instead in which various men reported on where they were in their prostate cancer journey. Their treatments ranged from two years to more than 10 years ago and varied between surgery, radiotherapy and hormone treatment. Some explained that they had experienced more than one treatment.

One of our group members has not been diagnosed with prostate cancer but has had a widely fluctuating PSA reading for many years. He has had a number of biopsies but still no reason has yet been determined for his changing PSA.

In other matters at the meeting, Jeff Roberts reported to members about the first support group meeting and Central Australia Chapter meeting in Whyalla, as well as the recent Action Group activities in Mt Gambier and Barmera. Jeff also advised that the Action Group will be holding an information stall at the Man Alive health festival at Semaphore in November this year.

While the number of regular support group attendees was reduced – several for health reasons, and one was cycling in Europe! – it was an interesting occasion to have compared our experiences, topped off with a friendly supper.

COMING EVENTS

JULY 19 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 July meeting will feature Diabetes Educator Michelle Hogan from Diabetes SA, speaking on the subject of diabetes.

• **The Adelaide Support Group's August meeting will feature a Beyond Maturity Blues talk by a speaker from the Council on the Ageing (COTA)**

• *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*

Research findings and news items from around the world

Prostate patients can feel calm about coffee

DRINKING coffee could help cut the risk of advanced prostate cancer. A US study found the heaviest coffee consumers had a 60 per cent lower risk of aggressive tumours than men who did not drink any coffee.

Coffee has an effect on the way the body breaks down sugar and also on sex hormone levels, both of which have been linked to prostate cancer.

The Harvard Medical School study was presented to an American Association for Cancer Research conference, where researcher Dr Kathryn Wilson said: "Very few lifestyle factors have been consistently associated with prostate cancer risk,

especially with risk of aggressive disease, so it would be very exciting if this association is confirmed in other studies."

Researchers are unsure which components of coffee might have a positive effect. However, it is known to contain many biologically active compounds, such as minerals and antioxidants, which limit damage to the tissues caused by the release of energy in cells.

The researchers documented the coffee intake of nearly 50,000 men every four years from 1986 to 2006. They stress that more work is needed before any firm conclusion can be drawn about the beneficial effects of coffee.

Dr Wilson said: "Our results suggest there is no reason to stop drinking coffee out of any concern about prostate cancer." However, Helen Rippon, of UK Prostate Cancer Charity, said previous research on the effect of caffeinated drinks on prostate cancer had produced mixed results.

"We would not recommend that men cultivate a heavy coffee drinking habit on the back of this research, not least because a high caffeine intake can cause other health problems. However, men who already enjoy a regular cup of coffee should be reassured that they do not need to give this up for the sake of their prostate."

• *Source: BBC News, Dec 2009*

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99 or visit the website www.prostate.org.au

**COMING
EVENTS****JULY MEETING:**

The support group met 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**.

Many hands make a successful barbecue

The efforts of numerous helpers resulted in a very successful and social support group barbecue, as John Shields reports.

THE City of Onkaparinga Support Group's annual mid-year barbecue, held on June 6, was yet again well attended and, as always, provided an enjoyable opportunity to meet with families, friends and supporters in an informal way.

Our special thanks go to Brian and Rhonda Foreman for the big effort they put in to make sure that the group's barbecues are a success, and to Peter Kiley for collecting the meat and assisting with the cooking.

It was good to see Mayor Lorraine Rosenberg and members of the Willunga Lions at the event, and our sincere thanks go to Willunga Lions for allowing us to use their great all weather facility with its big barbie and central heating.

Thanks also go to the Womens Auxillary, and several of our support group members for providing some nice prizes for the raffle.

We were pleased that Rhona Standley was able to attend

(thanks again to Rhona for donating a beautiful painting for the raffle), and our thoughts have been with Ruth Dohnt who was unable to attend.

It was also good to catch up with our patron, Councillor Artie Ferguson, who is now heading up the Fleurieu Cancer Network, and his wife Juli, who tested our mental powers with some puzzles that kept us thinking very deeply for quite some time. The Ferguson's daughter Victoria must also be thanked for once again providing the group with delightful entertainment.

BUNNINGS BARBECUE

A FUNDRAISING barbecue for the Onkaparinga Support Group has been booked for Sunday August 1 at Bunnings' Noarlunga store, so plenty of helpers will be required throughout that day.

ELLIS UPDATE

MALCOLM Ellis, the Onkaparinga Support Group Vice President and Chairman of

the Central Australia Chapter, recently had treatment for angina in the Flinders Medical Centre. He now has a stent in place and hopefully this will give him relief from the accompanying pain from angina. Recurring chest pains led to doctors finding a blockage on the other side of his heart, so Malcolm will need an angiogram and angioplasty to clear blocked heart arteries. We wish him a speedy recovery to good health.

KIND DONATION

MANY thanks go to Tony Moore for donating \$50 to our support group. Tony is recovering from his prostate cancer treatment and appreciated some information passed on to him from one of our members.

BLOG SUBSCRIPTION

THE PCFA has informed us that all Support Groups have been offered a free one-year subscription to Medical Oncologist and Prostate Cancer survivor, the informative blog of Dr Charles "Snuffy" Myers.

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

• **TWO DOCTORS** – a psychiatrist and a proctologist – opened an office in a small town and put up a sign reading "Dr Smith and Dr Jones: Hysterias and Posteriors".

The town council was not happy with the sign, so the doctors changed it to read "Schizoids and Hemorrhoids." This was not acceptable, either, so in an

effort to satisfy the council, they changed the sign to "Catatonics and High Colonics." No go.

Next they tried "Manic Depressives and Anal Retentives". Thumbs down again. Then came "Minds and Behinds." Still no good.

Another attempt resulted in "Lost Souls and Butt Holes." Unacceptable again!

So they tried "Analysis and Anal Cysts." Not a chance. "Nuts and Butts"? No way. "Freaks and Cheeks"? Still no go. "Loons and Moons"? Forget it.

Almost at their wit's end, the doctors finally came up with: "Dr Smith and Dr Jones, Odds and Ends."

Everyone loved it.

Mitcham Prostate Cancer Support Group

We aren't bulletproof but we sure can help each other

Revealing personal prostate cancer stories reminds everyone in support groups that they are not alone, as Mitcham Support Group deputy chairman Roland Harris reports.

‘ARE we really bulletproof and think we're made of steel?’ These lyrics, adapted from the song *Talk About It*, pose a challenging question which the Mitcham Support Group considered during its June meeting.

After listening to the poignant new Mike Brady CD *Talk About It* – which we learned about after being featured in the June issue of the PCFA publication *Prostate News* – the meeting was opened up for discussion about personal prostate-health issues, a topic which proved popular last October.

To use the Real Estate analogy, nobody had wanted to put in the first bid, though Peter got the theme rolling with the story of his prostatectomy 5 years and 7 days prior (but who's counting?). After his bold lead, 11 other members followed with a mix of stories highlighting good results and others still being a “work in progress”.

We enjoyed the humorous, self-effacing side of some members' experiences, and listened in respectful empathy when a friend's treatment encountered complications. Individual cases proved to be as varied as we all are, but a support group respects and nurtures each member based on this knowledge. It is also a welcome fact that in addition to professional advice and support groups, a growing resource of DVDs, books, products, and brochures can assist a prostate cancer patient.

I would urge other groups to follow this type of open discussion format on a regular basis, because new members who are deciding on an appropriate treatment can benefit from the shared knowledge, and our peers within a group can provide welcome encouragement.

While support group members are urged to refrain from giving medical advice, we can offer empathy and support to

men deciding their choice of treatment, based on their own experience.

I speak with the benefit of such helpful discussion; I met with the Royal Adelaide Hospital's first robotic-procedure prostate cancer patient more than five years ago, and was grateful that he shared his experience, which confirmed my own choice of treatment.

In other matters at the group's June meeting, our Librarian Peter explained the book-lending procedure and promoted “freebie” brochures. Jeff Roberts then spoke about the aims and role of support groups, the PCFA and Cancer Council – aspects that emphasise we are not alone!

I would also like to endorse John Shields' call for trained support group volunteers to offer help and fellowship to prostate cancer patients in local hospitals. Refer to Page 4 of the May-June Prostate Supporter Newsletter for more information.

COMING EVENTS

JULY 22 MEETING
The next Mitcham Support Group event will be held on Thursday, July 22, in the Colonel Light Gardens RSL club rooms at 4 Prince George Parade, Colonel Light Gardens, from 7pm. Guest speaker will be Dr Graham Lyons, HarvestPlus Research Fellow at the University of Adelaide, who will speak on “Nutritherapy: a promising new cancer treatment”.

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

An inspirational song for prostate cancer patients



The Prostate Cancer Foundation of Australia has launched an important new men's health song, called *Talk About It*. It's composed and sung by famous Australian singer

and songwriter Mike Brady – composer of the footy anthem *Up There Cazaly*, Melbourne radio personality and also a member of the PCFA Victorian Board. Mike has

donated this song to the PCFA to raise awareness of men's health issues. The CD can be ordered via the www.prostate.org.au secure online shop or freecall 1800 206 700.

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99 or visit the website www.prostate.org.au

Barossa Prostate Cancer Support Group

COMING EVENT JULY 20 MEETING

• The next meeting of the Barossa Support Group is at the Lion's Tinker Shed, Research Rd, Nuriootpa, next to the Barossa Village maintenance area, from 2pm to 4pm on Tuesday July 20. All members and guests are welcome. Please phone Barossa support group convenor Don Piro on 8562 3359 for further information.

Research findings and news items from around the world

Exercise may keep fatigue at bay during treatments

Radiation therapy places enormous distress on the body of patients undergoing prostate cancer treatments, though exercise can help counter side-effects.

RESearchers from Canada have reported that exercise provides at least short-term relief from fatigue for men with prostate cancer who are undergoing radiation therapy, and may result in long-term improvements as well.

The details of this study, which first appeared in the January 20, 2009, issue of the Journal of Clinical Oncology, are now being examined more closely and acted upon by increasing numbers of Canadian doctors.

Radiation therapy is an important part of the treatment strategy for early-stage prostate cancer in men who have a long life expectancy.

However, many patients who undergo radiation therapy report extreme fatigue, which tends to grow worse throughout the course of treatment and even persists once treatment is complete.

Researchers in Canada performed a randomised, controlled trial to evaluate the effects of exercise in men undergoing radiation therapy

for prostate cancer. The study included 121 men who were randomised to one of three groups: aerobic exercise, resistance exercise, or "usual care".

Participants in the two designated exercise groups undertook exercise sessions three times per week for a total of 24 weeks under the supervision of qualified trainers.

"We found that resistance exercise generated longer-term improvements and additional benefits for quality of life"

The resistance group followed a weight training regimen, while the aerobic group exercised on a treadmill, elliptical machine, or stationary bike.

The usual care group was asked not to initiate an exercise program during the study.

The Functional Assessment of Cancer Therapy-Fatigue (FACT-Fatigue), Prostate (FACT-P), and General (FACT-G) scales were used to assess fatigue and quality

of life prior to initiation of radiation therapy, at 12 weeks, and again at 24 weeks.

Analysis of the results indicated that both aerobic and resistance exercise reduced fatigue over the short term.

During the first 12 weeks, both resistance and aerobic exercise reduced fatigue compared with usual care; however, over the entire 24-week period, only resistance exercise was shown

to be superior to usual care.

The researchers speculated that exercise may have impacted fatigue levels for a variety of reasons, including improving neuromuscular efficiency, reducing muscular fatigue, reducing depression, improving sleep, and increasing socialisation.

The researchers also acknowledge the possibility of a placebo effect with the exercise, leaving the exercise

participants to believe they were feeling in better health without proof to support this notion.

Regardless of the reasons, it appears that exercise may help prostate cancer patients who are undergoing radiation cope with fatigue.

The researchers summarised: "In the short term, both resistance and aerobic exercise mitigated fatigue in men with prostate cancer receiving radiotherapy.

"We found that resistance exercise generated longer-term improvements and additional benefits for quality of life, strength, triglycerides, and body fat."

Although exercise can be a challenging and unappealing task in the face of fatigue during arduous treatments, it may well be the best option for surmounting fatigue and improving a patient's quality of life during the radiation treatment.

• Source: News item on www.cancerconsultants.com 9/2/10

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99 or visit the website www.prostate.org.au

A postcard from the United Kingdom ...

Why men shouldn't rely on the prostate cancer test - by the doctor who devised it

Terry Harbour from the Mitcham Support Group is currently in the UK about prostate cancer news in the UK and was startled to read this headline in a recent edition of national newspaper The Daily Mail. This is what the article reported:

DR Richard Albin, the medico who developed the PSA blood test more than 40 years ago, says he was disappointed with his outcome, as he had hoped to find an antigen that occurred only in cases of prostate cancer, though this one appears even when there is no cancer.

“Ironically that protein (PSA) is world famous and had become the basis of the principle screening tool used for prostate cancer, which every year kills 10,000 British men,” Dr Albin says.

He says he does not revel in his discovery – he believes testing for PSA in healthy men has been a huge waste of money and led to many men, particularly in the US being left unnecessarily frightened, frustrated, impotent and incontinent.

Dr Albin appreciates that had it not been for the PSA test, some lives would have been lost, but also says that due to the test, many more cancers had been detected that have not merited treatment. A majority of these men, he says, could have lived painlessly with their tumors until the natural end of their lives.

In 1968, the Food and Drug Administration (US) approved the test as a “harbinger” for recurrence, deciding it could be used for monitoring or prognosis. In other words, the

PSA was a tool for checking the effectiveness of treatment – if levels rose, it meant the patient needed more therapy.

Several urologists saw that the non-invasive PSA test offered an alternative to the more traditional rectal examination.

However, in 1987, a landmark paper appeared in the New England Journal of Medicine that claimed the PSA test could be used to detect cancer. This caused a storm in the US, where the PSA test was officially approved specifically for diagnosing cancer. As a consequence, radical prostatectomies in the US trebled – irrespective of the fact it is a major operation and with high rates of impotency and incontinence.

As Dr Albin points out, PSA is not cancer specific and the patient could be suffering from prostatitis or BPH and that if there is an extremely high level in the blood “something is going on” and needs examination.

He says that part of the problem is that the figure set by which you “pass or fail” was arbitrary, as no one knew what the correct amount was – or even if there was one. In the end, officials set the pass mark at four nanograms per millilitre of blood. If one had a reading higher than 4, there was a strong possibility he had cancer and follow up treatment (biopsy) was in order.

Dr Albin comments that the “pass mark” struck him as foolish and confusing. He says data showed that of men who had a score between 4 and 10 ng/ml, 80 per cent had benign prostatic hyperplasia, not cancer. Of those who scored less than 4, 40 per cent actually did have cancer. Healthy men were being tested and becoming terrified, yet many men with cancer were being reassured they did not have it – and being sent home.

This happened, Dr Albin says, because they were using the PSA test – developed to test the progress of the disease – as a diagnostic tool.

He says another problem not adequately addressed is the issue of severity of the cancer, with some more aggressive than others.

If you take PSA samples from men who don't have any symptoms aged 60 to 70, 65 per cent will have cancer. But is the cancer a “turtle” (his description of a non-aggressive cancer) or a “rabbit” (more aggressive requiring further treatment). He therefore advocates watchful waiting with periodical PSA tests to follow the trend and in the absence of increase there is no point in a biopsy.

He points to US studies which have shown no difference in the death rate between those screened and those not screened. Studies from Europe

last year showed that 48 people are mistreated just to save one life. “So I'm not saying PSA testing does not have a use. But asking it to detect cancer is not what it is fit for.”

I read this article a few times to digest some of Dr Albin's comments. As he says, he was aiming at devising a process to detect prostate cancer, but didn't succeed in doing so and this disappointed him.

As such, he is right in saying that the PSA test is being misused if it is being used by medicos to detect cancer in the first instance, simply because high PSA count could indicate one of a number of problems.

However, from my personal experience, what it did do – effectively and in a non-invasive way – was indicate to me and my doctor that something wasn't quite right. This was despite three DREs and one biopsy indicating no abnormalities at all.

The PSA test placed me in a position where I could make informed decisions about what further treatments I wanted.

I assume that most men, after discussions with their doctor, are aware that high PSA does not automatically equate to prostate cancer.

Until a more definitive test is discovered, the PSA test is one of a number of tools doctors can use to determine the state of health of a man's prostate.

Payneham Prostate Cancer Support Group

Building stronger immunity

The immune system has the ability to fight antigens in our system, though we must do more to maintain a healthy immune system, as Payneham Support Group coordinator Phil Davis reports.

ASKING the question “What is Cancer?”, Dr Stephen Hardy – guest speaker at the Payneham Support Group meeting for June – offered his own definition: “A selfish cell, with the ability of the molecular mechanics to survive, adapt and reproduce.”

Dr Hardy has a PhD in biochemistry and immunology, published research on the role of cell-cell communication in cancer and immune cell function, and a permaculture design certificate that qualifies his extensive knowledge of organic farming, agriculture and eco-system management. However, as a result of his research, Dr Hardy has found that instead of finding answers, even more questions are now posed.

The incidence of cancer has risen 58.07 per cent since the 1970s, yet Dr Hardy states that we don't get cancer: it is already in our bodies. So why doesn't everybody die of cancer?

Each person has an immune system, designed to defend the body against foreign and dangerous cells (from bacterial to tumour cells) or substances, such as pollution, chemicals and poisons. Our bodies also contain DNA errors; each person on average has 175 errors in each and every cell of their body. It is therefore crucial to have a healthy and strong immune system to prevent and reduce the chances of developing illness.

Helping our immune system

Dr Stephen Hardy says that to prevent disease we need to work with nature and keep our immune system healthy, especially when the immune system becomes weaker as we age.

1. Make intelligent lifestyle choices. What we eat has a significant effect on our immune system. Go organic or biodynamic.
2. Avoid chemicals and toxins.
3. Take appropriate supplements.
4. Eat low on the food chain; vegetables and fruit, and avoid processed foods.
5. Keep regular physical activity and keep within a healthy weight range.
6. Keep as positive as possible. What we think and feel affects our body, so relaxation is important, and practice random acts of kindness.

To defend the body against such invaders, the immune system must be able to distinguish between what belongs in the body (self) and what does not (non-self). Substances identified as non-self that stimulate an immune response in the body are called antigens.

Antigens may be contained within or on bacteria, viruses, other microorganisms, or cancer cells. They may also exist on their own, as food molecules or pollen.

A normal immune response consists of recognising a potentially harmful foreign

antigen, activating and mobilising forces to defend against it, attacking and eliminating it.

If the immune system malfunctions, an illness or disease may develop. When the immune system malfunctions it may attack the body's own tissue, causing an autoimmune disorder, such as rheumatoid arthritis, thyroiditis or lupus.

Dr Hardy stated that 90 per cent of all diseases involve a faulty immune system, 80 per cent of cancers are preventable, with 35 per cent dietary related. Drugs have limitations and that we have more control

COMING EVENTS

JULY 20 MEETING:
The Payneham Support Group will meet in the Payneham RSL Clubrooms, 360 Payneham Rd, Payneham at 7pm on Tuesday July 20th. The meeting will feature a DVD of a lecture recently given in Sydney by renowned US urologist Professor Charles Myers, speaking about advanced prostate cancer, and how to tailor treatment for your disease.

• 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

over ourselves than doctors. For further reading on this subject, visit the website www.promotinggoodhealth.com or read *The Silent Threat* by Professor Alfred Poulos, available from the support group's lending library.

The Prostate Cancer Foundation of Australia freecall hotline is 1800 22 00 99 or visit the website www.prostate.org.au

McLaren Districts Prostate Cancer Support Group

Focusing on feet helps to keep your health balanced

The advice of a podiatrist showed that our feet have a greater role to play in our general wellbeing than most people would suspect, as Bryan Hearn reports.

LOCAL podiatrist Airlie Nicholls, who was extremely pregnant with her first baby, presented a very interesting powerpoint slide show to the June meeting of the McLaren Districts Prostate Cancer Support Group that depicted an ultrasound picture of one foot of her unborn child.

She explained how a human foot contains 26 bones of varying sizes and how it is estimated that during an average life span, a person might walk 130,000km—much of this on hard surfaces. Given the complicated structure of a foot, it's no wonder that many foot problems occur.

A lengthy list of illnesses that can effect the condition of our feet include diabetes, heart conditions and circulatory problems, showing such symptoms as pain, numbness, temperature extremes, dry flaky skin and colour changes.

It was particularly interesting for prostate cancer sufferers to note that medication including chemotherapy and radiation can also have a serious effect on the condition of feet.

With the help of slides Airlie described the correct method for trimming toenails and provided tips about foot skin care. Things can go badly wrong if these matters are not attended to properly.

She mentioned the concern of contracting tinea in communal showers, such as at caravan parks. The real reason for tinea is that the space between toes is left damp, which opens pores and leaves them susceptible to attack. Treatment by betadine or salt water is recommended, followed by cream once the situation shows signs of improvement.

Even though the soles of our feet have an additional layer of skin for protection, by the time most people are aged 50 they will have lost 50 per cent of the fatty padding in the heels and soles, thus exposing foot bones and muscles to greater risk of injury and damage.

With every step we take, the weight of our body is transmitted through our big toes; even so, walking is recommended for general exercise, with 30-60 minutes a day (7000 to 10,000 steps) satisfying much of our bodies' needs. To walk for fitness, sessions can be broken down to 10-minute groups. Walking at a pace where you can still talk is good, though if you are walking to loose weight, a 60-minute walk is recommended at a higher pace.

To keep a record of your walking routine, it is recommended that each season is measured by wearing a pedometer. For those interested in the benefits of

COMING EVENT

THURSDAY JULY 22

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, July 22. The guest speaker will be Andrea Kanas representing Australian Hearing.

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

walking, more information can be obtained via the website www.10000steps.org.au

Balance can deteriorate with age and this can extend to suffering from reduced circulation. It is therefore important to maintain a good sense of balance and mobility. These aspects can be improved by general exercise on a regular basis, which should be done within any individual's physical ability.

For maintaining balance, it is recommended that initially we should stand bare foot alongside a piece of furniture and then alternately lift each foot for 30 seconds at a time while holding onto the piece of furniture for support.

Once you have become confident with this routine, you should then perform the same exercise without the support of a piece of furniture.

Airlie discussed with the

support group members the benefits of orthodontic inserts and offered samples for examination and consideration. In some cases these were molded to suit individuals needs.

Good advice about choosing suitable footwear—particularly sports shoes for walking in—specified that shoes should be stable and have no more than 1cm heel rise, and have a firm sole with little or no bend or flexibility.

Examine new shoes with your hand to determine the condition of the inside of the shoe. If internal seams can be felt, then this shoe really should be avoided as such a surface could give rise to irritation “hot spots” which result in blisters or other similar conditions.

In particular, this situation is very necessary for diabetes sufferers to avoid.

Even a muddled media message can spark interesting responses

Media controversy added a pinch of spice to a recent public meeting, as Darwin group convenor Keith Williams reports.

APPROPRIATELY, the Darwin Prosper Support Group's monthly meeting coincided with at the commencement of Men's Health Week, so despite the fact that it was on the Queen's Birthday holiday, we decided to extend our usual meeting to become a public meeting.

Due to this, we got masses of publicity – the most effective was through Keith being seriously misquoted in the local press about a doctor's comments on DRE testing (which created much more interest than the expensive advertisements we placed).

Sadly this preliminary interest didn't translate into bums on Seats, as can be seen in the accompanying photos. Our recently imported Ambassador Geoff Ockleshaw led off with a PowerPoint presentation, followed by urologist Trent Farebrother, who gave one of the most lucid and down-to-earth expositions on the subject that I have heard.

It was great to see Giam, practice manager for Darwin's Radiation Oncology Clinic, in attendance. Giam has given the OK for the Central Australia Chapter Council to tour the state-of-the-art facility, on route to the council's meeting in Katherine later this month.

Albert Goodrich completed the trilogy of speakers, with an impassioned outline of

his prostate cancer journey, and the importance of his twin pillars (his faith and our Support Group) that have been essential in helping him not be depressed or crushed by his serious condition.

While there was no immediate reaction to the sensational misquotations in the press, a fiery letter was published in the local paper a few days after the meeting. It was penned by Greville Savage, who attended the meeting:

"I COME to Darwin annually from Melbourne, and was appalled to read in the *NT News* on June 8 that some doctors up here refuse to administer the DRE test for diagnosis of possible indicators of prostate disease/cancer. Little reason was given and I noticed there was no follow-up or outrage from the readership.

"I know the DRE is not 100 per cent as a diagnosis of prostate disease but it can be combined with a simple blood test... the PSA... also not 100 per cent. But the combined effect of these tests is probably a good diagnostic tool.

"These doctors need to be taken to task ... they are withholding potentially lifesaving diagnoses from their patients. They should also be made to explain their lack of action in trying to promote the health and well being of their patients."



Despite plenty of prior publicity and the decision to broaden the monthly meeting into a public event, numbers could (and should) have been better at the June meeting of the Prosper Darwin support group, though there were enough interested participants to reap good benefits from the Powerpoint presentation and wisdom imparted by three guest speakers.



COMING EVENT

The Prosper Darwin support group will next meet on MONDAY, JULY 12. 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.

The July meeting will be preceded by a meal at Fisherman's Wharf. Our program will include viewing some of the excellent materials which have recently come to hand from the PCFA.

Alice Springs Prostate Cancer Support Group

General practice network NT helping to 'close the gap'

Health services in the Northern Territory primarily are town based but GPNNT is dedicated to improving the lot for the people in the bush, as support group convenor Murray Neck reports.

The Alice Springs Prostate Cancer Support Group has, since its inception, held its monthly meetings in the well appointed conference room of the General Practice Network headquarters in Alice Springs. This happened at the invitation of Health Care Services Manager Jenny Mills, who also played a vital early role in establishing the support group.

For the group's monthly meeting in June, Jenny was guest speak, enlightening the membership about the full role and ongoing mission of this important health organisation within the Northern Territory.

The General Practice Network is a national body with state and territory offices, set up to supply a network that can assist general practitioners, nurses and other health care providers to deliver improved services in their localities.

While Australia's larger cities may have a number of offices within their boundaries, in remote and sparsely populated areas such as Central Australia, one office in Alice Springs is responsible for almost 50 per cent of the Northern Territory footprint – and responsibilities even flow across state borders to the fringe of neighbouring states.

None of this would

been possible without the introduction of computerised information technology services – which now enables a health worker in the remotest part of Australia to have instantaneous access to information from other parts of the nation.

The network's program aims to deliver effective integrated support services that will improve the access to and the quality of health services, thereby closing the gap between services delivered to city folk and inhabitants of remote areas – and especially better health support parity between non-indigenous and indigenous people.

The network has access to health care professionals and professions allied to medicine, should the need arise for specific help. These specialists also provide ongoing training and familiarisation courses that are so essential in rural and remote areas, where skilled staff are often transients.

A year ago, Professor Robert Newton from Edith Cowan University in Perth was brought to Alice Springs to present a series of lectures on the importance of exercise in keeping a healthy body. These proved to be a great success.

The network's services in the Northern Territory has

recently increased to include more activities promoting men's health issues. The headquarters introduced a pit-stop health check, which has been well received by local men, some of whom would not have otherwise been inclined to check their health status.

High on the current agenda of the Alice Springs GPN office are services that can be provided to support local GPs, work force programs and upgrading E-health projects – such as securing electronic messaging, electrical transfer of prescriptions and secure electronic access to health care that provides up-to-date patient information.

Closer liaison with Royal Flying Doctor Services, Mental Health and Chronic Diseases services has a high priority, as has closer attention to breast cancer – now a significant issue for indigenous women – and lung cancer, which has a high prevalence among indigenous men.

The General Practice Network NT has a strong capacity to shape and influence health issues as well as contribute to national primary health care policy and practices. Dedicated and caring people such as Jenny Mills will ensure the things that matter do actually happen.

COMING EVENTS

JULY MEETING:
The Alice Springs Prostate Cancer Support Group met on Thursday July 8 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.

Why should men perform pelvic floor exercises?

A regular regime of men performing exercises for their pelvic floor muscles can provide great help to restore bladder control after treatments for prostate cancer.

WOMEN have been encouraged to exercise their pelvic floor muscle for decades, but now we understand a strong pelvic floor muscle is just as vital for men too – and especially for men with specific health issues. Research has found that:

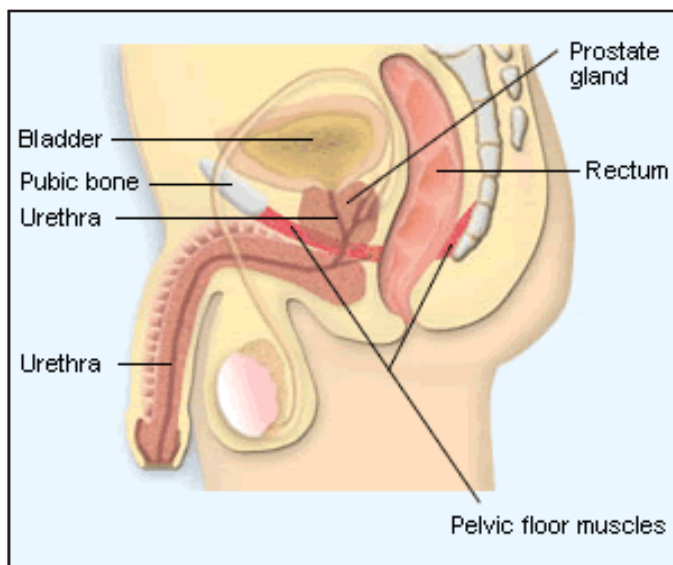
- Pelvic floor exercises are strongly recommended for men following a prostatectomy. Research has shown that pelvic floor strengthening can improve sexual function and overcome urinary incontinence. Some research shows that self-directed exercise can work just as well as intensive physio (Moore and others, 2008).

- Research showed 12 sessions of electrical stimulation and biofeedback (each 35 minutes long, starting seven days after catheter removal) resulted in almost all men regaining continence at six months (Mariotti and others, 2009).

- A strong pelvic floor helps overcome erectile dysfunction (University of Bristol, 2004)

- Pelvic floor exercises are a safer and cheaper option than drugs; Viagra is associated with damage to the eyes and vision in a significant number of men using it, but exercises are safe for everyone (May 2005).

- Pelvic floor exercise can “increase awareness of sexual sensations and enhance enjoyment” (Impotence Association, UK).



- Pelvic floor exercises can bring a dramatic improvement for men who experience dribbling after urinating (University of Bristol, 2005).

IDENTIFY THE MUSCLES

THE Australian Department of Health and Ageing provides guidelines on pelvic floor exercises for men, recommending the first step as finding the appropriate muscles around the anus and the urethra.

Start by sitting or laying comfortably with the muscles of your thighs, bottom and stomach relaxed. Tighten the ring of muscle around your anus without squeezing your bottom.

To feel these muscles around the urethra, try to stop your flow of urine mid-stream, and then restart it. You should only

do this to find which muscles to use, or to check your progress. Don't practice this more than once a week, or it could affect your ability to pass urine.

HOW TO EXERCISE

ONCE you can feel your pelvic floor muscles working, you can attempt to exercise them.

- Tighten and draw in the muscles around the anus and urethra, lifting the muscles up inside.

- Count to five, then release and relax. You should have a definite feeling of letting go.

- Men should repeat this up to a maximum of 8 to 10 squeezes, resting for 10 seconds after each tightening of the muscles.

- You should follow this by 5 to 10 short, strong squeezes in quick succession.

- Repeat the slow and quick

squeezes around four to five times a day.

In spite of the guidelines, it's very hard to identify, isolate and exercise pelvic floor muscles without help. Exercise aids and devices provide the little extra help that turns your effort into success, while DVDs and books provide ongoing guidance and support to help you achieve real results.

EXERCISE DEVICES

EXERCISE devices assist you in strengthening the pelvic floor in two main ways:

- Exercisers can provide resistance. Body builders do not build strong biceps by repeatedly contracting their arms in the air; they do it by using weights or other devices that provide resistance.

- Exercisers can provide feedback that the exercise is being done correctly.

Many men and women find it extremely hard to do anal pelvic floor contractions correctly, especially when they first begin, so they benefit from using a device that confirms the correct muscle is being exercised and that the contraction is being fully held for maximum benefit.

Physiotherapists use such exercise aids and devices to assist in teaching correct exercise techniques, but they are also available for you to use in the privacy of your own home.