

# Montreal West Island

# Prostate Cancer Support Group

### EVERYONE IS INVITED TO ATTEND OUR PUBLIC MEETINGS

We meet every fourth  
Thursday of each month except  
July, August and December

### NEXT MEETINGS

January 22, 2009 @ 7:30 PM  
Dr. Maurice Anidjar  
Urologist  
ROBOTIC PROSTATECTOMY

February 26 @ 7:30 PM  
Speaker and subject to  
be announced

### MEETING LOCATION

Sarto Desnoyers Community Centre  
1335 Lakeshore Drive, DORVAL

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- ❖ Videoconference on "Prostate Cancer 101". Last October 2008, our support group was invited to partake in a videoconference as part of a Telehealth Program to inform people from remote regions of Quebec about our activities and resources available for PC support groups. Participants from our support group comment on their participation.....p. 3
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## Supporters



This Newsletter is available at our website:

<http://mtlwiprostcansupportgrp.ca/>,  
as well as at  
[www.procure.ca](http://www.procure.ca) & [www.cpcn.org](http://www.cpcn.org)



# Happy New Year!



## Our New Website

Our new website is now up and running. Its internet address is <http://mtlwiprostcansupportgrp.ca/> The website provides information about our group, links to CPCN and Procure and gives access to current and past issues of our newsletter as well as up-to-date information about our meetings and other items of interest. Check it out and give us your feedback. Our Director Monty Newborn is the creator and manager of the site and our WEBMASTER.

## Controversy on Prostate Cancer Screening

Men aged 75 years and older should not undergo prostate cancer screening, and younger men should discuss the benefits and drawbacks of the prostate-specific antigen (PSA) test with their doctors prior to undergoing screening, US experts recommend.

These recommendations, have been arrived at, by the US Preventive Services Task Force following a review of published studies conducted by Dr Kenneth Lin, and colleagues, from the Agency for Healthcare Research and Quality in Rockville, Maryland,.

The PSA test was approved by the US Food and Drug Administration in 1986, and its use for prostate cancer screening has increased significantly among men of all ages since the mid-1990s.

High PSA levels, however, can indicate the presence of non-cancerous conditions of the prostate such as benign prostatic hyperplasia (BPH), as well as possibly prostate cancer, says the team.

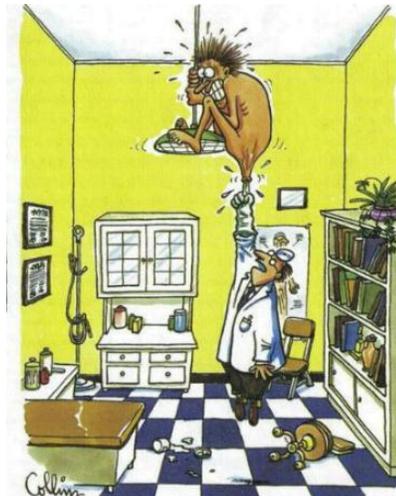
In addition, because of a number of potential drawbacks associated with prostate screening such as additional medical visits, adverse effects of prostate biopsies, anxiety, and over diagnosis, the identification of prostate cancer that would never have caused symptoms in the patient's lifetime, may lead to unnecessary treatment, anxiety and other negative psychological effects unnecessarily.

After examining the evidence, the US Preventive Services Task Force, says that as men aged 75 years have an average life expectancy of around 10 years, the negative effects of prostate cancer screening outweigh the positive effects. For the same reasons, men younger than 75 years with long-term medical problems and a life expectancy of less than 10 years are also unlikely to benefit from screening.

The Task Force furthermore recommends that all men younger than 75 years should be educated about the risks and benefits associated with screening before undergoing the PSA test.

"Because many prostate cancers grow slowly, early detection may not benefit a patient's health and in some cases may even cause harm," said Task Force

Chair Dr Ned Calonge, chief medical officer for the Colorado Department of Public Health and Environment in Denver.



"Relax, Mr. Wilde, it's just a simple prostate examination!"

He added: "We encourage men younger than 75 to discuss with their clinicians the potential, but uncertain, benefits and the possible harms of getting PSA readings, before they decide to be screened."

William J. Catalona,\* writes in the Washington Post "This misguided recommendation, and the resulting media coverage, could give reluctant men an excuse to postpone or forgo screening. The consequence might be that many men die of prostate cancer unnecessarily. Men should follow the recommendations of the American Urological Association, the American Cancer Society and the National Comprehensive Cancer Network, all of which recommend screening for early detection and treatment of prostate cancer."

Original research was published in *Ann. Intern. Med.* 2008; 149: 185-191, 192-199, and recently reviewed in an article by William J. Catalona in the Washington Post issue of Tuesday, August 26, 2008.

**Francesco Moranelli**

\* William J. Catalona is medical director of the Clinical Prostate Cancer Program at the Robert H. Lurie Comprehensive Cancer Center at Northwestern University's Feinberg School of Medicine. He receives research support and honorariums for speaking from Beckman Coulter Inc., a manufacturer of PSA tests.

## Videoconference on "Prostate Cancer 101"

On October 22, 2008, from 6:30PM to 8:30PM, the Montreal Children's Hospital (MCH) hosted the Community Public Health Education Program Videoconference entitled "Prostate Cancer 101."

The program was broadcast live from the MCH to four remote regions in Quebec. Included were the Magdalen Islands, Thetford Mines, the Town of Gaspé and New Carlisle on the Gaspé. Some 88 eager participants from these regions partook in the program and submitted questions to members of the panel.



*Monty Newborn, Charles Curtis, Allen Lehrer and Dr. Kuzmarov.*

The session was moderated by Jo Ann Jones of the Community Health and Social Service Network (CHSSM) with assistance from Kelly Howarth.

This historic event, sponsored through a Telehealth Program was led by Dr. Irwin Kuzmarov with a one hour presentation covering some basic facts on prostate cancer, treatment options, community support, and resources available.

Our support group was also invited to participate. Members of our Steering Committee, Charles Curtis, Allen Lehrer and Monty Newborn, attended and delivered presentations about our activities. Charles gave an historical account of our organization, Allen spoke on his role in greeting new members and getting them involved in the group, and Monty, our webmaster, made the audience aware of our new website and pointed out how it could be of great service to all, regardless of their location.



*Dr. Kuzmarov, Jo Ann Jones, Kelly Howarth and Dr. Wise, an associate of Dr. Kuzmarov*

The presentations were followed by a wide assortment of questions directed to all members of the panel.

Until the time of this videoconference, these remote communities had difficulty accessing information and help online. As of this teleconference, they can now do so through our support group as well as those from other parts of Canada, that have a presence on the internet.

Thanks to all the hard work of our members and Steering Committee members ever since the inception of our organization, we now outreach beyond our immediate borders and reach people in remote areas of our country.

Our attending members unanimously felt that this event was an overwhelming success and would welcome doing this again. After all, providing first hand information is the very essence of our existence as a group.

***Charles Curtis***

***Allen Lehrer***

***Monty Newborn***

***Francesco Moranelli***

## Notes on Open Forum Discussion of November 27, 2008

The session opened with various examples of the reactions of men to the news that they have PC. Once the new patient overcomes denial, he will realize that he must make important decisions as to which basic treatment to opt for, and what secondary effects can he cope with. He will need to know the therapies and drugs he will take including their side effects, such as incontinence and impotence. However, starting a conversation on these topics is tabu to some, not easy to most. Talking to medical people is often hard to understand, and a "new" patient may turn to the Internet as his main source of information. Not always the best resource without guidance.



*Discussion forum in session at our Nov. 27 2008 meeting*

Several recent newcomers to the group at the session have had this problem and they have resolved it with the answers in discussions with Support Group members. Members who have been there and done that! In fact, right from the start, this has been the major feature offered by the Montreal West Island Prostate Cancer Support Group.

Several senior members of the group have volunteered to answer these questions and concerns either during the monthly meetings and/or by phone during the week. Some of these volunteers have been providing basic information as well as details on new developments for many years through the Support Group.

One member in the group shared a frustrating situation: he was complaining that his workouts in the gym gave him good muscular control but try as he could, he was not able to control his bladder. Incontinence is one of the two major side effects of PC. The other is impotence. The patient who was trying to control his bladder told us that he had gone on to use an absorptive pad for 9 months. Then he decided there must be a better technology, and tried to improve by using a condom catheter and has been using different models since then. This topic was picked up by another patient in the discussion who was considering an artificial



*One of our attendants, Raquel De Leon, of the McGill University Health Centre, sharing information with our members.*

sphincter which is controlled by a manual switch underneath the skin. A doctor at a Montreal hospital has had some positive experience with that approach.

Another discussion started, but more on the structure of the typical PC approach: surgery vs radiation and the pros and cons of these basic steps in the treatment. The current position is that if both steps are contemplated, surgery must be done first. However developments in equipment and technique may be changing this and that is the question.

The different topics which were discussed during the session demonstrate the value of an open forum. There was a wide range of first hand experience where patients new to PC were able to learn the basics and get some feedback on their concerns. As an example the importance of the Kegel exercises were mentioned several times during various discussions. In the same group, more experienced patients have discussed the details of incontinence and whether or not a dry day can be achieved with a home built cure. A similar discussion might have taken place on the topic of impotence.

***Bill Corless***

### **A word from your editor:**

Hi folks,



My name is Francesco Moranelli and I am the new editor of your Newsletter. I hope my first attempt meets with your approval and satisfaction. I would appreciate your feedback and suggestions, and topics you would like to see covered in subsequent issues. Please drop me a note either by e-mail or a hard copy at our library desk at our general meetings. Better still I would not mind meeting you individually and discuss any direction we might take in this endeavour. My best wishes to you all and your families for 2009 and beyond.

***Francesco***

### MEET GEORGE LARDER

George is the Secretary of the Steering Committee, but he is much more. Along with the normal duties of recording and reporting Minutes and handling correspondence, George prepares schedules and agendas, helps organize and coordinate our participation in community events and conferences related to prostate cancer, and contacts, now with some help, local media to publicize the meetings. Aside from all his good work, George is a leader. In very gentle ways, he prompts, urges, helps and encourages others in their tasks. George also stays in touch with members who have fallen ill or who for various reasons cannot attend meetings. If you want to know how so-and-so is, call George. We think we know his secret; he cares deeply about his friends and fellow survivors.

This is not to say that there are not others on the committee doing excellent work, performing important functions enthusiastically and in a timely manner. The Group has had the good fortune to have very competent individuals in key positions, including presidents, who to a man, were and are dedicated and determined to advance our cause. If invited to, I would like to do a write-up in appreciation of the people referred to in the above; it has been my great pleasure to know these men.



*George Larder reflecting on a year of many achievements behind an inviting glass of red wine.*

However, back to George Larder. Perhaps one of his most important achievements was the rescue of the Newsletter. When Ludwick Papaurelis moved away, George looked for a volunteer to take over the job of Publisher/Editor. When no one offered their services, George undertook the responsibility. He enlisted his son Stephen to do the layouts and persuaded his friend Bill Corless to write the reports on the monthly

meetings. Both moves produced wonderful results. Also, we saw the addition of relevant cartoons and photographs a nice touch. The Newsletter is maybe a little less medical and maybe a bit more people oriented, but thanks to George, it is in fine shape. Finally, George has found his volunteer. As of this issue, Francesco Moranelli takes over as Publisher/Editor. We are certain he will be successful.

George's medical history is fairly typical. He was diagnosed in late 1998 and had a radical prostatectomy on his birthday in 1999. He was held in the hospital for 17 days because of an infection in the incision and then required further treatment by the CLSC and his wife at home for some time after leaving the hospital. As for after effects, again typically, certain things don't function as well as they used to.



*Members of the Steering Committee discussing and reminiscing on this past year's achievements, during the annual Christmas luncheon*

George's introduction to the Support Group is an interesting story in itself. While sitting in his doctor's office before his operation, he saw in a Maclean's magazine an article about prostate cancer support groups. He called the number mentioned in the article. It was a Toronto number but they gave him the number of the Montreal group. The telephone was answered by Charles Curtis, who then as now handled calls on the Help Line. Charles invited George to the next meeting. At that meeting, George met the president, Joe Soul, who it turns out was a former work colleague at RCA. So began George's career with the Support Group

*Tom Grant*

### Medical Jokes Corner

... A man walks into his doctor's office and sits down in the waiting room. While he is waiting his turn to be seen, a casual acquaintance walks in and sits down next to him.

The newcomer asks "W w what are yyy you ddd doing here?"

The man replies, " I am waiting to see the doctor."

"W wwwhy dd do yyy you wwant to sss see hhim?"

The man replies, "Well, if you must know, I have a prostate problem."

"A pp prostate ppp problem, wwwhat's ttthat?"

"Well, if you must know. I pee like you talk."

**Heard any good ones lately? Feel free to share them with us.**

### Special Request

Ladies and gentlemen, the Steering Committee is currently updating our mailing lists for the distribution of our Newsletter and of any other important information that arises from time to time. In doing so, we are taking into consideration the high costs for mailing the Newsletter by surface mail. If you are currently receiving correspondence by surface mail, and have an e-mail address available, you can help us cut down our mailing expenses significantly by opting to receive your copy of the newsletter by e-mail. In addition to helping us save money, your copy of the newsletter will look more attractive in color. Alternatively if you regularly attend our monthly meetings, you can pick up your copy at the meeting. If any of these options are convenient for you and are currently receiving your copy by mail, please contact our secretary George Larder to make arrangements for an alternate mode of delivery. Please rest assured that if you do not have alternate delivery options available to you, that you will continue to receive your copy by surface mail.

*Francesco*

### **Telephone Helpline (514) 694-6412**

#### **IMPORTANT NOTICES:**

- ❖ **The Montreal West Island Prostate Cancer Support Group Inc encourages wives, loved ones and friends to attend all meetings. Please ask basic or personal questions without fear or embarrassment. You need not give your name or other personal information.**
- ❖ **The Montreal West Island Prostate Cancer Support Group Inc does not recommend treatment procedures, medications or physicians. All information is, however, freely shared. Any errors and omissions in this newsletter are the responsibility of the authors.**
- ❖ **The Montreal West Island Prostate Cancer Support Group Inc. is a recognized charitable Organization. All donations are acknowledged with receipts suitable for income tax deductions. Your donations and membership fees (voluntary) are a very important source of funds vital to our operations. Together with contributions from several pharmaceutical companies these funds pay the cost of printing and mailing our newsletter, hall rental, phone helpline, equipment, library, etc.**

**Your support is needed now!**

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**VOLUNTEERS URGENTLY NEEDED!**

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