

March 2015 - Issue #89



Prostate Cancer Canada Network

Montreal West Island

EVERYONE IS INVITED TO ATTEND OUR MEETINGS

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

MEETING LOCATION

Sarto Desnoyers Community Centre
1335 Lakeshore Drive, DORVAL



On March 26, 2015, **Marie-Josée Lord, Physiotherapist** and recognized authority on Kegel exercise - pelvic floor muscle training, will speak on "Let's Talk Plumbing."

On April 23, 2015, we will hold our **Annual General Meeting**, as well as present our annual **Outstanding Contribution Award** to this year's candidate - Dr. Jacques Corcos.



Make an In Memoriam Donation

Consider making a gift in memory of a loved one who has died of prostate cancer. While flowers are beautiful, many people today prefer to make memorial contributions in honour of a loved one's memory. A tax receipt will be issued upon receipt of a donation.

This Newsletter is available at our website:

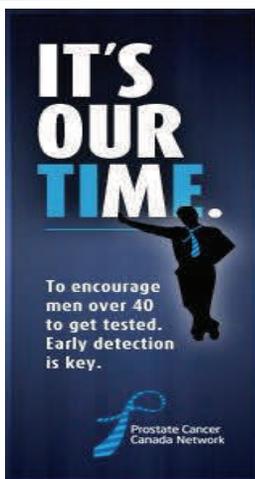
<http://mtlwiprostcansupportgrp.ca/>, as well as at www.pccn.org



Dr. Jacques Corcos to receive Outstanding Contribution Award from The Prostate Cancer Canada Network – Montreal West Island

At its upcoming Annual General Meeting on April 23, 2015, Dr. Jacques Corcos will be presented with the 2015 Outstanding Contribution Award from the Prostate Cancer Canada Network – Montreal West Island. He is receiving the award from the prostate cancer support group "in appreciation of his distinguished career dedicated to the treatment of so many of us in the Montreal area so afflicted." (cont'd on p 2)

On May 28, 2015, **Dr. Michel Tremblay**, Professor, Jeanne and Jean-Louis Leveques Chair in Cancer Research, Goodman Cancer Research Centre and Department of Biochemistry, McGill University, will speak on "Cancer Vaccines; new directions to fight cancer from within"



You are all cordially invited in celebrating our 20th anniversary at the April 23th,

2015 General meeting. Please join us in celebrating 20 years of support provided to prostate cancer patients and their families, and spend some time with old friends and new acquaintances, as well as reunite with fellow founding members over sweets and refreshments.

Support your local prostate cancer support group PCCN - Montreal West Island . Get Involved!



PCCN - The Montreal West Island Prostate Cancer Support Group

Our Website

Be sure to check out our website. Our internet address is <http://mtlwiprostcansupportgrp.ca/> The website provides information about our group, links to PCCN 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.

(cont'd from p 1) Dr. Corcos is a physician in the Department of Urology at the Jewish General Hospital and a Professor of Surgery (Urology) at McGill University. He also serves as the Director of the Urology Unit at the Shriners' Hospital and as Director of the Urology Unit at the Rehabilitation Institute of Montreal.

As an urologist, Dr. Corcos has focused his research mainly on bladder dysfunction, benign prostatic hyper trophy, incontinence, urodynamic- and neuro-stimulation. Incontinence is often a complication that accompanies prostate cancer. He is the owner of one patent and has recently deposed two other patent applications. He is deeply involved in medical education, teaching students and residents and organizing national and international ongoing medical education activities and meetings. He has established cooperation and training programs in developing countries, benefitting young physicians in Morocco, Mexico, Cambodia and China. He has received funding for these programs from the Canadian government, the Société Internationale d'Urologie (SIU), and Canadian Urological Association (CUA). For years he has been actively involved with the International Continence Society (ICS), presenting his team's work, moderating sessions and animating workshops. He serves as president and founder of the Canadian Foundation for Research on Incontinence granting basic and clinical research in Canada.

Dr. Corcos is a member of the editorial and review boards of several journals. He serves as co-editor in Chief of the Chinese Journal of Urology. He has published more than 80 articles in peer-reviewed journals, eight of which were published in 2014-2015. He has also written several book chapters.

He graduated from Montpellier University (France) in 1977, remaining there until 1985 while completing his training in surgery, urology and tropical medicine. From 1978 to 1980 he served in the French army as a surgeon at Bambari Hospital in the Central African Republic where he was in charge of caring for lepers at Aghoudou Manda.

In addition to his career as a physician, Dr. Corcos enjoys being with his family, cooking, reading, and hiking, while managing to play an excellent game of tennis.

The ceremony will take place in the Sarto Desnoyers Community Center in Dorval at 7:30PM on April 23, 2015. The public is welcome to attend. There is no admission charge and parking is available and free. For further information, contact Monty Newborn at 514-487-7544 or at newborn@cs.mcgill.ca.

Monty Newborn

[More evidence breast cancer and prostate cancer cluster in families](#)

By Kathryn Doyle March 10, 2015

(Reuters Health) - Women with close male relatives with prostate cancer are more likely to be diagnosed with breast cancer, a new study confirms. These findings, from the large Women's Health Initiative, reinforce the results of a 1994 study in the Journal of the National Cancer Institute, the authors write.

"This is not the first study to examine this relationship, but it is one of the larger to date, if not the largest study," said lead author Jennifer L. Beebe-Dimmer of Karmanos Cancer Institute in Detroit. Cancer is a disease of the DNA, she said, and family clustering indicates that breast and prostate cancers may have genes in common.

Beebe-Dimmer and her colleagues used data for more than 78,000 women in the Women's Health Initiative who were over age 50 and cancer-free when the study began in 1993. At the start they had comprehensive physical exams and gave detailed personal and family medical histories.

Most women remained in the study for more than 10 years.

By 2009 there had been 3,506 new breast cancers in the original group.

Overall, more than 11,000 women had a first-degree relative – mother, sister or daughter - with breast cancer, and this was more common for those who were eventually diagnosed themselves. Twenty percent of women with breast cancer had first-degree relatives with the disease, compared to nearly 15 percent of those who did not develop breast cancer.

There was a similar, but very slight, association with prostate cancer, the researchers reported in Cancer.

More than 11 percent of women who developed breast cancer reported a first-degree relative with prostate cancer, compared to about 10 percent of women without the disease. Having a father, brother or son with prostate cancer increased the risk of breast cancer by about 14 percent.

Compared to women with no family history of breast or prostate cancer, those with a family history of both were 80 percent more likely to develop breast cancer, the authors found.

"We know that the major breast cancer susceptibility genes BRCA1 and BRCA2 are also linked to prostate cancer," Beebe-Dimmer told Reuters Health by email. That may explain some of the clustering, she said.

Metformin Plus Gene Inhibitor May Offer New Hope for Prostate Cancer

By John Schieszer News Genitourinary Cancer Targets,
February 23, 2015



Xiaoqi Liu, PhD, metformin and gene inhibitor in prostate cancer

Low doses of the antidiabetic drug metformin, and a gene inhibitor known as BI2536 may be able to successfully halt the growth of late-stage prostate cancer tumors, according to a new study published in *The Journal of Biological Chemistry*.

Researchers at Purdue University in West Lafayette, Indiana, found that these two agents may work synergistically to suppress castration-resistant prostate cancer based on their patient-derived xenograft studies. Xiaoqi Liu, PhD, associate professor of biochemistry and cancer research, and colleagues found that metformin and BI2536 may be a promising way to treat late-stage prostate cancer with less toxicity. They note that both agents are well tolerated, and may help those patients who are not cured by the current standards of care.

BI2536 is the first Plk1 inhibitor to enter clinical trials. This agent has been studied in phases I and II cancer trials and has been shown to be safe and well tolerated. It is theorized that this agent may help stop the production of androgens, which are fueling the disease. Plk1 promotes androgen receptor signaling and acts as a negative regulator of tumor suppressor p53.

While the current standard of care includes ADT (androgen deprivation therapy), Liu said that new approaches for treating the most persistent forms of prostate cancer are urgently needed. He noted that prostate cancer is the cause of the second biggest cancer killer in men in the United States.

ADT fails in many patients because castration treatment can inadvertently encourage the cancer to get tougher and heighten oxidative stress on the prostate gland. Liu said this increases the expression of Plk1 and over-expression of Plk1 can trigger the synthesis of androgen. He said prostate cancer cells eventually become smart enough to make androgen, which is why the cancer continues to grow. It is hoped that these men with castration-resistant disease may benefit from this combination therapy.

Previous studies have demonstrated that metformin--which has been used for more than 40 years--is particularly active against prostate cancer tumors. Increasing evidence suggests that metformin has several antitumor characteristic, and it has been shown to help lower the risk of developing castration-resistant prostate cancer.

Researchers tested the drugs in a classical cell culture assay of prostate cancer cells and in advanced prostate tumors in mice. Low concentrations of the drugs significantly slowed the development of cancer in both challenges. The mice tumors were grown from the tumor of a late-stage prostate cancer patient. Liu and his colleague's report that these agents combined help prevent androgen synthesis while not impacting healthy prostate cells. Liu said the next step in the research is to test the combination in clinical trials.

See more at: <http://www.oncotherapynetwork.com/genitourinary-cancer-targets/metformin-plus-gene-inhibitor-may-offer-new-hope-prostate-cancer?>

Manitoba docs make prostate cancer breakthrough

WINNIPEG SUN,
WEDNESDAY, MARCH
04, 2015



A group of Manitoba doctors say they've made a breakthrough in the treatment of prostate cancer. The group, lead by Sabine Mai of

CancerCare Manitoba and the University of Manitoba, have made advancements in their study of circulating tumor cells and believe a new blood test, on which they presented findings recently, will improve prognoses for intermediate-risk prostate cancer patients.

Mai worked in collaboration with Darrel Drachenberg and Jeff Saranchuk of the Manitoba Prostate Centre. The test will focus on an intermediate group of men diagnosed with the disease, which is the most commonly diagnosed cancer among men.

"The new blood test for prostate cancer will be less invasive with a potential to be more accurate," Mai said.

Stuart Edmonds of Prostate Cancer Canada said the test will help doctors pinpoint severity.

"I think it's very promising," Edmonds said. "We need

to have a better test to distinguish between the aggressive disease that a man will die of rather than the more indolent, or non-aggressive disease, that a man will die with. Research could also determine if this test could assist in the prognosis of other cancers.

The group lauded the efforts of the Motorcycle Ride for Dad, an annual local fundraiser that has raised more than \$860,000 in the past five years.

Statins Improve Prostate Cancer Survival: Harvard Study

Tuesday, 10 Mar 2015

Cholesterol-lowering statin drugs may slow down prostate cancer in men who are also taking medication to reduce their levels of male hormones, according to new research.

Taking a statin alongside androgen deprivation therapy slowed the progress of prostate cancer by about 10 months, said the study's lead author, Dr. Lauren Christine Harshman, an assistant professor at Dana-Farber Cancer Institute and Harvard Medical School.

"Patients on a statin have a significantly longer time to progression," Harshman said.

The study's findings were presented recently at a meeting of the American Society of Clinical Oncology (ASCO) in Orlando, Fla. Research presented at meetings is generally viewed as preliminary until published in a peer-reviewed journal.

The study did not prove a cause-and-effect link between statins and prostate cancer survival, just an association.

Prostate cancer feeds on male hormones, which are called androgens and include the commonly known hormone testosterone. Cancer doctors often treat prostate cancer by using medications to suppress androgen levels in a man's body.

Previous research has associated statin use with improved prostate cancer outcomes, said Dr. Charles Ryan, an ASCO expert and associate professor of medicine and urology at the Helen Diller Family Comprehensive Cancer Center at the University of California, San Francisco.

For the current study, Harshman and her colleagues re-

viewed medical data from 926 prostate cancer patients being treated with androgen deprivation therapy.

About 31 percent of the men were taking a statin at the time they began prostate cancer treatment. Researchers noted that statin users were less likely to be initially diagnosed with aggressive prostate cancer.

Tracking the men's progress, researchers found that statin users had about 27.5 months of progression-free survival on androgen deprivation therapy. Men not taking statins had about 17 months of progression-free survival, according to the study.

The link remained statistically significant even after accounting for other factors, the study authors said.

There are a couple of potential ways that statins might affect prostate cancer, Ryan and Harshman said.

The body produces male hormones "based on a cholesterol backbone," Ryan said. By reducing cholesterol levels, statins might cause a reduction in available androgens by inadvertently robbing the body of a key building block for those hormones.

On the other hand, statins might interfere with the process through which prostate tumor cells absorb male hormones, Harshman said.

Laboratory tests have shown that statins tend to crowd out androgens, beating them in line to be absorbed by prostate cancer cells, she said.

Follow-up research and clinical trials are needed to verify this effect, Ryan said.

Additionally, he noted that in this study the men were taking statins due to high cholesterol levels, not to improve their cancer treatment.

"It's a good observation, but it still requires further study and validation," he said. Harshman agreed that

a randomized clinical trial is needed.

"The main thing is, what can you get out of this effect? How does it change therapy?" she said.

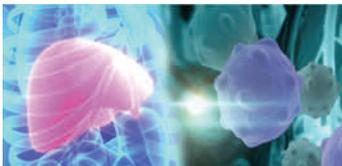
Source: <http://www.newsmax.com/Health/Health-News/statins-prostate-cancer-harvard/2015/03/10/id/629235/>

New weapon in the fight against cancer could be in your body already

Summary:

A tool for keeping the most common forms of cancer at bay could be in your gut, a new study concludes. For the study, the research team tested thousands of chemicals found in the body with the help of a robot and discovered more than 20 that could delay the aging process, something inevitably linked to cancer.

Where can you find the next important weapon in the fight against cancer? Just do a little navel-gazing. New research from Concordia confirms that a tool for keeping the most common forms of cancer at bay could be in your gut.



Lithocholic acid, a bile acid produced in the liver, is particularly effective in killing cancer cells.

Credit: Image courtesy of

Concordia University

In a report published in the *International Journal of Molecular Sciences*, Vladimir Titorenko, a professor of biology at Concordia, and his colleagues show that lithocholic acid, a bile acid produced in the liver, is particularly effective in killing cancer cells.

For the study, the research team tested thousands of chemicals found in the body with the help of a robot and discovered more than 20 that could delay the aging process, something inevitably linked to cancer.

Most effective was lithocholic acid. When entering a cancer cell, the acid goes to "energy factories" called mitochondria and then sends molecular signals that lead to the cells' demise.

It not only helped slow the aging process but also had an anti-tumour effect, killing cells of breast, prostate and neuroblastoma cancer -- in a petri dish, that is. Indeed, these results aren't applicable to humans -- yet. Titorenko performed the first round of studies using yeast because the ways aging progresses, and the ways it can be delayed by some diets, are similar in both yeast and humans.

"Various cancers are associated with aging -- the older you get, the more instances we see of diseases like breast and prostate cancer -- so studying how diet can slow that aging process is important," says Titorenko, who holds a Concordia Research Chair in genomics, cell biology and aging.

In collaboration with Thomas Sanderson from the INRS-Institut Armand-Frappier in Laval, Titorenko is now testing whether the same bile acid can delay the development of prostate cancer in laboratory mice.

If those trials confirm the anti-tumour effect of lithocholic acid, the hope is that it will have a similar effect in human patients, along with the possibility of slowing the human aging process in general.

The study progresses the fundamental knowledge of how to naturally slow down aging of non-cancerous cells as well as how to kill cancer cells.

"We are attempting to understand what kind of molecular processes within our cells are responsible for cell aging and aging-associated death," Titorenko says.

"Satisfying our curiosity as scientists pursuing new fundamental knowledge fits with our other objective: to find ways that natural chemical products can delay aging and the diseases associated with it."

Story Source:

The above story is based on [materials](#) provided by **Concordia University**

Journal Reference:

Anthony Arlia-Ciommo, Amanda Piano, Veronika Svistkova, Sadaf Mohtashami, Vladimir Titorenko. **Mechanisms Underlying the Anti-Aging and Anti-Tumor Effects of Lithocholic Bile Acid.** *International Journal of Molecular Sciences*, 2014; 15 (9): 16522 DOI: 10.3390/ijms150916522

RNA biomarker may lead to urine test for prostate cancer

A new biomarker for prostate cancer has been identified that can be detected in tissue and urine samples. Researchers at Sanford-Burnham Medical Research Institute in Orlando, FL, have found a set of RNA molecules detectable in prostate cancer patients but not in men without this cancer. They publish their findings in *The Journal of Molecular Diagnostics*.

Currently, screening for prostate cancer consists of testing for high concentrations of prostate-specific antigen (PSA) in blood samples. These PSA tests are

often followed by a biopsy to confirm the presence of cancer.

However, the PSA test is considered to be imperfect, and in 2013 the American Urological Association recommended against PSA tests being offered routinely. Dr. Vipul Patel, medical director of the Global Robotics Institute at Florida Hospital in Orlando, explains:

"While elevated PSA can be an alert to a lethal cancer, it can also detect less aggressive cancers that may never do any harm.

Moreover, only 25% of men with raised PSA levels that have a biopsy actually have prostate cancer. Prostate cancer needs to be screened for; we just need to find a better marker."

The RNA molecules that the Sanford-Burnham researchers have identified are "long noncoding RNAs" (lncRNAs). Until recently, the usefulness of lncRNAs had not been appreciated by scientists, who dismissed the non-coding molecules as "non-functional noise in the genome."

lncRNAs are now believed to regulate cellular development. Evidence is also mounting that lncRNAs may contribute to a variety of diseases, including cancer.



Because the long noncoding RNAs are easily detected in urine samples, prostate cancer screening could become more accessible than it currently is with blood tests.

lncRNAs were elevated in prostate cancer patient samples across three distinct groups:

- Human prostate cancer cell lines and normal prostate epithelial cells

- Prostate adenocarcinoma tissue samples and matched normal tissue samples
- Urine samples from patients with prostate cancer or benign prostate hypoplasia, and normal healthy individuals.

In each group, prostate cancer patients exhibited higher levels of lncRNAs compared with healthy control subjects.

"We have identified a set of lncRNAs that appear to have an important role in prostate cancer diagnostics," says Ranjan J. Perera, PhD, associate professor and scientific director of Analytical Genomics and Bioinformatics at Sanford-Burnham's Lake Nona campus in Orlando.

"The findings advance our understanding of the role of lncRNAs in cancer biology and, importantly, broaden the opportunity to use lncRNAs as biomarkers to detect prostate cancer," Perera adds.

Because the lncRNAs are easily detected in urine samples, prostate cancer screening could become more accessible than it currently is with blood tests.

Fast facts about prostate cancer

- **In 2014, more than 230,000 new cases of prostate cancer will be diagnosed among American men**
- **1 in 7 American men will get prostate cancer at some point in their life**
- **1 in 36 American men will die from the disease.**

Dr. Patel concludes:

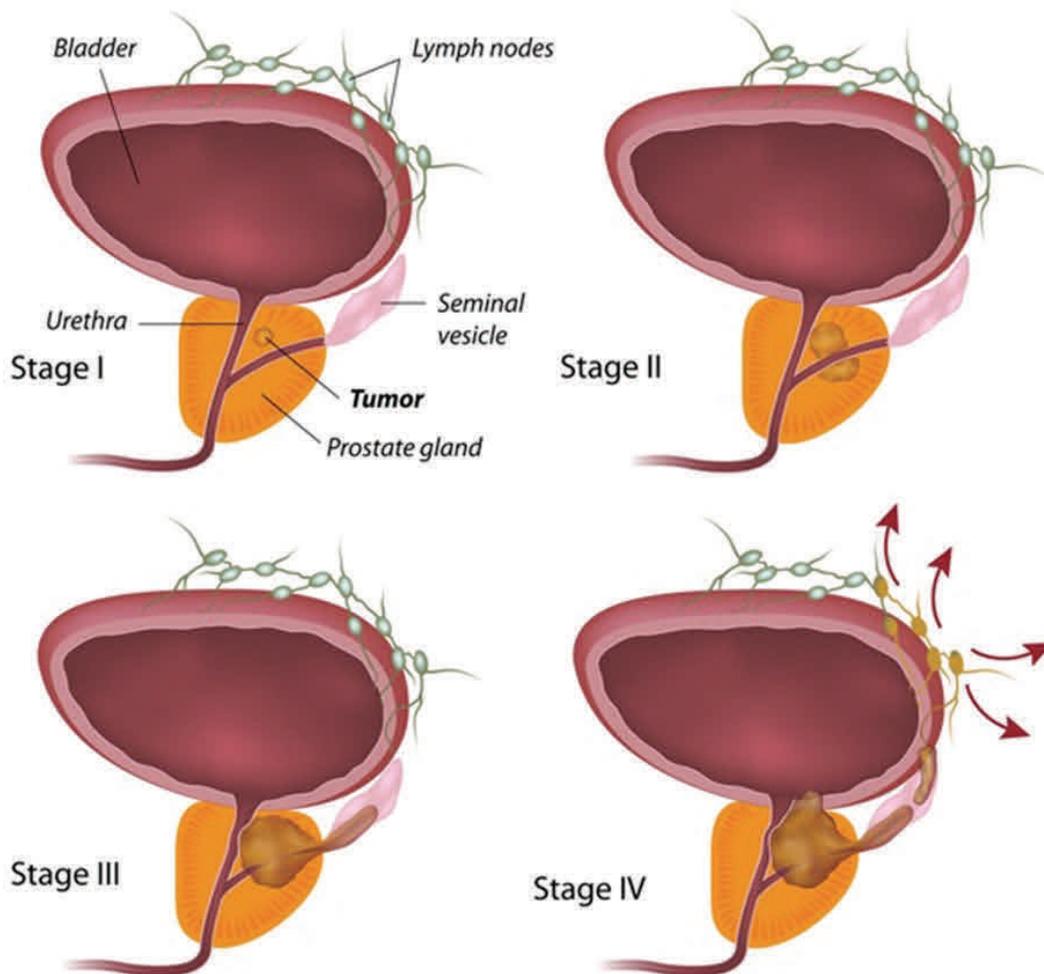
"There is a tremendous unmet clinical need for better non-invasive screening tools for early detection of prostate cancer to reduce the overtreatment and morbidity of this disease. Our findings represent a promising approach to meet this demand."

Other recent proposed alternatives to the PSA test include an "electronic nose" designed to differentiate between prostate cancer and benign prostatic hyperplasia, which share similar diagnostic properties.

Earlier this year, *Medical News Today* reported on the eNose and quoted researchers who claimed the device's results were on a par with those published for the PSA test and were "achieved rapidly and in a completely noninvasive manner."

Written by David McNamee

Stages of Prostate Cancer



Please join us in celebrating 20 years of support provided to prostate cancer patients and their families, and spend some time with old friends and new acquaintances, as well as reunite with fellow founding members over sweets and refreshments.



The stages of prostate cancer. Image © Alila Medical Media/ shutterstock.com - See more at:
<http://www.oncotherapynetwork.com/genitourinary-cancer-targets/slide-show-prostate-cancer?cid=em.otn.30815&GUID=3FCE14B4-3FEF-499C-8FBE-124523BD06D6&rememberme=1&ts=08032015#sthash.nLXukql2.dpuf>

We are currently in need of an individual who is proficient and highly interested in navigating the internet in search of the latest information on prostate cancer, and compile interesting news items into a newsletter for our membership. Some knowledge in the use of Microsoft Publisher – a highly intuitive software,, would be an asset, although some training would be provided. We urgently require such an individual to fill the post of Newsletter Editor. If interested please approach any of the members of the Steering Committee.

Special Appeal

We need new volunteers to join our Steering Committee!

We are in desperate need of your help. If you would like to volunteer some of your time to our group, we would greatly appreciate it. Specifically, at this point in time, we are in need of a *Secretary* to record the minutes of our meetings, a *Treasurer* to manage our finances, and a *Newsletter Editor* to carry on with our publication.

We are dedicated individuals, committed to the important mission of providing support to prostate cancer patients and would-be patients. Please approach us via email, telephone, or in person at our general monthly meetings.

Newsletter Disclaimer:

All articles appearing in this newsletter are for information purposes only and not intended to be a substitute for the advice of a doctor or healthcare professional or recommendations for any particular treatment plan. It is of utmost importance that you rely on the advice of a doctor or a healthcare professional for your specific condition.

NOTICE OF THE ANNUAL GENERAL MEETING

APRIL 23th, 2015

In accordance with Article X of the General By-Laws, the Annual General Meeting will be held at the Sarto Desnoyers Community Centre, 1335 Lakeshore Drive, Dorval on Thursday, April 23th, 2015 at 7:30 p.m.

This meeting will take place just prior to the monthly general meeting.

AGENDA

- Minutes of Meeting of April 24th , 2014
- President's Report
- Treasurer's Report
- Nomination Committee Report
- New Business
- Adjournment

It should be noted that opinions and questions are welcome from all participants. However, only those who have paid their membership fee are eligible to vote.

Nominations for the position of Officer or Director must be accompanied by the signed approval of the nominee and the signed endorsement of two other members. These are to be submitted to the Secretary.

REPORT OF THE NOMINATION COMMITTEE

The nominees recommended by the committee to be the officers and directors of the board for the year 2015/2016 are as follows, and the specific responsibilities are as listed:

<u>POSITION</u>	<u>NOMINEE</u>	<u>RESPONSIBILITY</u>
President	Ron Sawatzky	Officer
Vice-President	Allen Lehrer	Officer
Secretary	Open *	Officer
Treasurer	Open *	Officer
Director	Fred Crombie	e-mail
Director	Open *	Outreach
Director	Open *	Hospitality
Director	Dr. Irwin Kuzmarov	Founding Member
Director	Allan Moore	Library
Director	Open ***	Newsletter Editor
Director	Monty Newborn	Publicity & Website
Director	Les Poloncsak	Library & Hall Setup
Director	Ron Sawatzky **	Speakers
Director	George Larder	Membership
Director	Open *	Fundraising

* Position urgently to be filled

** Will continue on until someone suitable is found.

*** Current Editor—Francesco Moranelli will continue until a replacement is found

Telephone Helpline (514) 694-6412

IMPORTANT NOTICES:

- ❖ **The PCCN—Montreal West Island Prostate Cancer Support Group 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 PCCN—Montreal West Island Prostate Cancer Support Group 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 PCCN—Montreal West Island Prostate Cancer Support Group is a recognized charitable Organization (registration # 87063 2544 RR0001). 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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Senior Advisors:

Charles Curtis, Lorna Curtis and Tom Grant.