



Healing Ingredients Can Help Us Find Our Path: Woerner

by Richard Bercuson

Body - Emotion - Mind - Spirit.

If we want to heal, we need to look at not just the physical body, which we must listen to.

This was part of the message delivered by Gabriele Woerner at



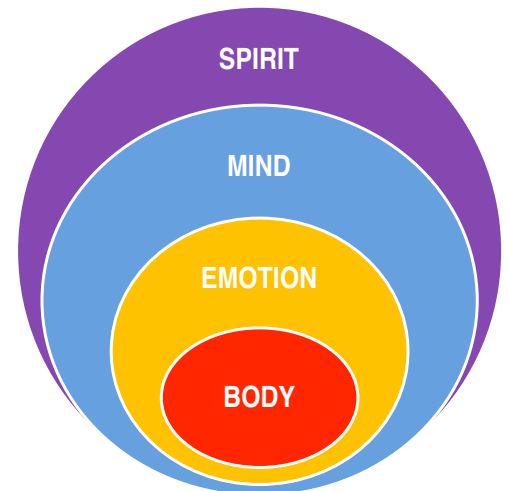
the February 21 monthly meeting. A registered psychotherapist with an extensive background teaching and counselling adults, Woerner presented an altogether different and provocative look at how anyone, particularly cancer survivors, can help themselves with some simple techniques. Her extensive work has been mostly with people who regularly go through life's challenges. She also teaches nurses about holistic experiences.

Ms. Woerner attends bi-weekly sessions of the new Gatineau support group some of whom were in attendance at this session. She brought to Ottawa a sampling of her techniques. Her talk, which was filmed and available on our web site (pccnottawa.ca), included breathing breaks initiated with a large stop sign on the power point.

"Our breath is our ally," she would say and then lead the group through the simplest of breathing exercises.

She stressed the importance of emotional hygiene, noting that our emotions are so strong, they can influence our bodies. She gave the example of a baby in the womb which is able to laugh, cry, and feel fear. "Every thought is like a radio wave sending signals to the environment," she said. "What is the quality of our thoughts?"

What are the Ingredients of Healing?



She asked the group to consider Albert Einstein's comment: "There are only two ways to live your life. One is as though nothing is a miracle. The other is as though everything is a miracle." In fact, as a student in Germany, she'd been part of a class that examined a section of his brain.

At one point, she queried the audience, "Who are you?" The responses were varied: I am a man. I am a thinker. I'm confused. From this, she shared that our personalities create the reality and to carefully look at the tools of what we feel and think.

"Does the thought you have right now do you any good?" She posed. "Am I aware of my thoughts?"

By the end of the hour-long talk, Ms. Woerner had likely managed to convince a great many of the power of the mind and soul. ■

CRACKING OPEN THIS WALNUT

We acknowledge that everything in The Walnut, including our page 2 disclaimer, is fascinating reading. Still, we ask you to pay particular attention to the page 6 item about our co-chairs' Back to Basics movement (though not to be confused with any of Beethoven's movements).



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PCCN OTTAWA is a volunteer organization of prostate cancer survivors and caregivers. Our purpose is to support newly-diagnosed, current, and continuing patients and their caregivers. PCCN Ottawa is a member of the Prostate Cancer Canada Network.

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PCCN Ottawa Mission Statement

We provide information on prostate cancer to those in need, gathered from a variety of sources. We participate in events that provide a venue for promoting awareness of prostate cancer through our informed member interaction at public gatherings or as speakers. We collaborate with local organizations such as The Ottawa Hospital, the Ottawa Regional Cancer Foundation, the Canadian Cancer Society, urologists and oncologists for information and support.

Newcastle Disease Virus Shows Promise as Safe Prostate Cancer Treatment

Zeenews.com

Washington: Researchers have found that a recombinant Newcastle disease virus kills all kinds of prostate cancer cells, including hormone resistant cells, leaving normal cells unscathed.

A treatment for prostate cancer based on this virus would avoid the adverse side effects typically associated with hormonal treatment for prostate cancer, as well as those associated with cancer chemotherapies generally, said corresponding author Subbiah Elankumaran of Virginia Polytechnic Institute, Blacksburg.

Newcastle disease virus kills chickens, but does not harm humans. It is an oncolytic virus that hones in on tumors, and has shown promising results in a number of human clinical trials for various forms of cancer.

However, successful treatments have required multiple injections of large quantities of virus, because in such trials the virus probably failed to reach solid tumors in sufficient quantities, and spread poorly within the tumors.

The researchers addressed this problem by modifying the virus's fusion protein. Fusion protein fuses the virus envelope to the cell membrane,

enabling the virus to enter the host cell. These proteins are activated by being cleaved by any of a number of different cellular proteases.

They modified the fusion protein in their construct such that it can be cleaved only by prostate specific antigen (which is a protease). That minimizes off-target losses, because these "retargeted" viruses interact only with prostate cancer cells, thus reducing the amount of virus needed for treatment.

Retargeted Newcastle disease virus has major potential advantages over other cancer therapies, said Elankumaran.

First, its specificity for prostate cancer cells means it would not attack normal cells, thereby avoiding the various unpleasant side effects of conventional chemotherapies. In previous clinical trials, even with extremely large doses of naturally occurring strains, "only mild flu-like symptoms were seen in cancer patients," said Elankumaran.

Second, it would provide a new treatment for hormone-refractory patients, without the side effects of testosterone suppression that result from hormonal treatments. ■

Steering Committee Report Delayed

The February Steering Committee Summary was not available this month. It will be available in mid-March online at pccnottawa.ca. Its highlights will be published in the April issue. ■



WARRIORS GROUP REPORT

for February, 2013

By Ludwick Papaurelis

While we currently have 16 registered members, regular attendance varies from 3 to 10. Everyone seems happy to have this forum to discuss advanced prostate cancer problems. We do need help from the Association to make this support more visible to the members.

We have an announcement in the Maplesoft monthly program. It reads as follows (and includes meeting dates and times):

Warriors Support Group for Advanced Prostate Cancer Patients

The Warriors are a caring and compassionate group, focused on sharing knowledge and experience in the management of their advanced prostate cancer disease. They provide personal support for each other with quality of life issues.

The Warriors are part of the support function of PCCN-Ottawa, and their meetings are open to all advanced prostate cancer patients, including those who are not official members.

Further Information: <http://pccnottawa.ca/warriors/intro>.

Yahoo Groups Mail Discussion List

We have 23 members on this discussion group, including 12 from our Ottawa group. The others are advanced prostate cancer patients from Montreal, Toronto, Winnipeg, and Calgary. We are working to get more to join to have a truly Canadian place to discuss the problems we have here. We are continually seeking new members.

Request to PCCN-Ottawa

We request this Warriors Support Group be listed in all the literature the Association produces including the listings in the steering group. We also think it is a good idea to provide direct contact information for the various support functions to make it more personal and approachable. ■

PUNishing...

Energizer bunny arrested. Charged with battery.

I wondered why the baseball was getting bigger. Then it hit me!

Broken pencils are pointless.

I dropped out of communism class because of lousy Marx.

Cartoonist found dead in home. Details are sketchy.

NEXT MONTHLY MEETING

Thursday, March 21

6:30-7:30 p.m.: Mentoring for newly diagnosed in the Shalom Room.

6:30 p.m.: Prostate Café. It's coffee time.

7:15 p.m.: Time for PCCN Ottawa business.

7:30 p.m.: Presentation of the 2012 Dried Prostate Award to philanthropist Stephen Greenberg

Back to Basics: In a special Town Hall meeting, interim co-chairs John Arnold and Bill Dolan will speak about their "vision" for PCCN Ottawa and the role of membership in working together to make our support group even better.

We meet the third Thursday of each month at St. Stephen's Anglican Church, 930 Watson Street. Follow the Queensway to the Pinecrest exit and proceed north, past the traffic lights, to St. Stephen's Steet on the left. Parking is at the rear of the church.

PLEASE REMEMBER YOUR CONTRIBUTION FOR THE ST. STEPHEN'S FOOD BANK.

WARRIORS SUPPORT GROUP

Thursday, March 21: 1-3 pm

at the Maplesoft Centre for Cancer Survivorship Care
1500 Alta Vista Drive (at Industrial in Cancer Survivors park, across from Canada Post)

Is Proton Beam Therapy for Prostate Cancer Worth The Cost?

By Durado Brooks, MD, MPH

Thousands of men are diagnosed with prostate cancer each month. These men and their loved ones often turn to the internet to learn about their disease and treatment options, and these searches may lead to medical centers offering proton beam therapy. These centers espouse the benefits of this treatment approach, and some include glowing testimonials from men who have undergone the treatment.

So is proton therapy the “magic bullet” for prostate cancer?

Proton therapy is a type of radiation treatment. Traditional radiation therapy has been used to treat cancers for a century using radioactive energy rays called “photons.” When radiation is directed at a cancerous tumor inside the body the rays must pass through normal, healthy tissue in order to reach the cancer cells. In doing so, photons often cause harm to these healthy cells in their quest to get to the tumor.

In the case of prostate cancer, the radiation beams must pass through the skin, the bladder and the rectum on the way to the prostate gland, and once they reach the gland they encounter normal prostate cells and the nerves that control penile erections. Damage to these tissues can lead to the complications that often accompany radiation treatment for prostate cancer, including bladder problems, rectal leakage or bleeding, and difficulty with erections.

Proton therapy is a new way to deliver radiation to tumors using tiny, sub-atomic particles (protons) instead of the photons used in conventional radiation treatment. Proton therapy

uses new technology to accelerate atoms to 93,000 miles per second, separating the protons from the atom. While moving at this high-speed, the particles are “fired” at the patient’s tumor. These charged particles deliver a very high dose of radiation to the cancer but release very little radiation to the normal tissue in their path. In theory, this approach minimizes damage to healthy organs and structures surrounding the cancer.

In contrast, most studies of proton therapy for prostate cancer suggest that this new approach may be just as good as standard photon radiation treatment at controlling the growth and spread of the cancer, but there is no evidence that proton treatment does a better job of curing the cancer.

And in spite of the theory that protons cause less damage to normal tissue, there is at present no convincing evidence that urinary (bladder problems), gastrointestinal (rectal leakage or bleeding), or sexual (erectile dysfunction), complication rates are lower following proton therapy. A few studies suggest that rates of some side effects might even be higher.

While the cost to build a treatment center is high, proton therapy presents a lucrative opportunity for those who are willing to make the investment. Established facilities in the US report annual revenue approaching \$50 million. This profit potential is leading to a veritable “arms race” in the field, with the number of facilities in the US expected to double in the next few years.

Given the rising cost of US healthcare it is increasingly important to prove through studies that paying more is associated with better outcomes. A great deal of research is currently underway to determine whether proton beam therapy for prostate cancer can fulfill the hope of saving livings while limiting side effects and complications. However, men who are choosing treatment today should be aware that proton therapy’s hoped-for benefits have not yet been proven. ■

The Walnut Laureate



BLADDER BATTLE

by Glenn Kletke

This one is for the pack of radiation guys ordinary joes jolted into fancy juggling acts told by technicians to show up every day with a full bladder and an empty rectum for their treatment on that cold metal table a balancing feat filled with the frustration of empty at the back and full at the front sometimes even a contradiction of intent two things that don't always go together and there's you on the way to the hospital trying to time the whole operation, to hold the home front that puts pressure on you bladder battle you hope you can win until the radiation blast is done and they tell you you can go and go you do, your mad dash to the bathroom, rushing stream of relief a flush and the regular world yours again.

Glenn Kletke's poetry has most recently appeared in "Whistle for Jellyfish" published by Booklands Press

Novel Cancer Hypothesis Suggests Antioxidants Are Harmful

By Zosia Chustecka
From Medscape.com

A new hypothesis that focuses on reactive oxygen species (ROS) proposes that antioxidant levels within cancer cells are a problem and are responsible for resistance to treatment.

The theory destroys any reason for taking anti-oxidative nutritional supplements, because they “more likely cause than prevent cancer,” according to Nobel laureate James Watson, PhD, from Cold Spring Harbor Laboratory, New York.

Dr. Watson explains that the vast majority of agents used to directly kill cancer cells, including ionizing radiation, most chemotherapeutic agents, and some targeted therapies, work by generating — either directly or indirectly — ROS that block key steps in the cell cycle.

This generation of ROS creates a hypoxic environment in which cancers cells undergo a transformation from epithelial to mesenchymal cells (EMT).

These transformed cells almost inevitably possess very high amounts of antioxidants, which effectively block the effects of anticancer treatments, Dr. Watson notes.

Once a cancer becomes resistant to chemotherapy, it usually is equally resistant to ionizing radiation, he points out.

In addition, these transformed EMT cancer cells generate free-floating mesenchymal cells, which have the flexibility and movement that allows them to metastasize to other body locations (brain, liver, lung). “Only



when they have moved do most cancers become life-threatening,” Dr. Watson notes.

Dr. Watson proposes that anticancer therapies work by generating ROS, which cause apoptosis. However, as cancer cells evolve, they produce antioxidant proteins that block this effect, such as glutathione, superoxide dismutase, catalase, and thioredoxin.

The fact that cancer cells largely driven by *RAS* and *Myc* are among the most difficult of cancers to treat could be due to their high levels of ROS-destroying antioxidants, Dr. Watson argues. High anti-oxidative levels might also explain the effective incurability of pancreatic cancer, he adds.

If this theory is correct, then drugs that lower antioxidant levels within cancer cells would be therapeutic. In fact, the ROS-generating agent arsenic trioxide has been shown to reduce levels of glutathione and thioredoxin. Arsenic trioxide is currently being used to treat promyeloblastic leukemia, but this theory suggests that the drug could be useful in many major cancers.

One far-reaching implication of this theory is that antioxidants as nutritional supplements, including beta-carotene, vitamins A, C, and E, and selenium, could be harmful in cancer. ■

Prostate Cancer Is Not Funny: a Book Review

By Roger Clark

A review of “Prostate Cancer is (not) Funny” by Dan Laszlo, 2012 (154 pp.), \$9.95

www.prostatecancerisnotfunny.com

Available from Amazon.com and createspace.com

Nobody likes to grow old and most of us have a deep-seated anxiety about reaching a point when various bits of our bodies no longer work as well as they used to. Worse is the fear that serious illness will leave us incapacitated, frustrated, and depressed. Cancer is a major prize winner in these stakes and prostate cancer takes its place on the podium. So where does Dan Laszlo get off writing a humorous book about a serious illness? The typical response might be to dismiss the idea as preposterous or to feel insulted that we are not being shown the compassion we feel we deserve.

Laszlo gives us a clue early on when he refers to “this therapeutic work”. Later, he states that most of the book consists of “humor steeped in reality and fact.” Like all good comic writers (and comedians), Laszlo understands that most successful comedy has an undercurrent of seriousness and even tragedy. The human condition is such that we often need an escape hatch that will let us out of the blackness that surrounds us from time to time. This book is one good escape hatch!

There are other reasons for the success of the book. One is undoubtedly the quality (and bawdiness) of the illustrations by Zeana Bey. His honesty is the real strength of this helpful and somewhat comforting book. It is a must-read for family members or friends who are committed to accompanying a man with prostate cancer on his difficult (and sometimes fatal) journey. We need to be told in simple terms what a biopsy entails, how incontinence comes about, why sex can be such a “big” issue after surgery or radiation treatment, and what our future holds for us. Laszlo explains the meaning of prostate jargon and demystifies the whole business, making it that much more bearable.

Prostate cancer is certainly no joke but if we want to retain some of our dignity and humanity, we need to be able to look at ourselves with a measure of humour. Above all, we need to show ourselves the compassion and generosity we deserve. With this book, Dan Laszlo does just that and he earns our gratitude for it.

Ottawa resident Roger Clark is a prostate cancer survivor.

HEAR YE! HEAR YE! HEAR YE!

Upcoming Research Study on Prostate Cancer

HealthViews, a Canadian healthcare market research firm, is currently hosting a national study on the topic of: Prostate Cancer. We are looking to speak with men who have been diagnosed with refractory/castration resistant or hormone refractory cancer as well as their caregivers.

This particular study will consist of sharing thoughts, experiences and feelings about your diagnosis through a series of exercises. Those who qualify will be asked to mail the completed reflective journal within one week of receiving the material. All exercises will be mailed out on March 11th, 2013. As a thank you for your time, those who qualify will receive **\$250**.

If you are interested in participating, please fill out our short qualifying questionnaire through the link below:

<https://www.survey.smartpointresearch.com/se.ashx?s=1C9C34E34D0079EA>

If you have any questions, please contact Robyn through email at rmurray@hvsample.com or by phone at 1.888.484.2507 ext. 1302.

Your insights will be valuable and greatly appreciated!
Upcoming Research Study on Prostate Cancer
Suite 300 – 1140 Homer Street • Vancouver, BC Canada
V6B 2X6 • Phone 888.484.2507 • Fax 604.633.1921

Rocco Rossi Becomes New PCC Head

Rocco Rossi was recently named CEO and Managing Director of PCCN. He takes over from Helene Vassos who was interim CEO following the autumn departure of Steve Jones.

Rocco Rossi is a Canadian businessman, executive and former political candidate. His board experience is through his work with the United Way of Greater Toronto, AMR, the Ivey Foundation, the Internet Advertising Bureau of Canada, Toronto's 2008 Olympic Bid and the Empire Club of Canada. He is also a supporter of Rotary International, Presidents of Enterprising Organizations and the Young Presidents' Organization. Rocco was the CEO of the Heart and Stroke Foundation of Ontario from 2004 – 2009 and from 2009 – 2011, was active in municipal and provincial politics.

New Co-Chairs Bring Message: Back to Basics

As Bill Dolan tells it, at one recent PCCN Ottawa Steering Committee meeting, he somehow got drawn into leading the group.

So he turned to John Arnold, the Outreach/Awareness director, and they agreed to serve as co-chairs until a permanent chairman stepped forward. Dolan and Arnold have since decided to solicit ideas from various members of the association.

The summary of their informal interviews will shortly be published and made available to the entire membership.

They are creating a "Back to Basics" framework that clearly defines the aims, objectives and functions of the PCCN Ottawa organization. Members were recently mailed a letter challenging them to give back to the Ottawa prostate cancer community.

It reads, in part: "PCCN Ottawa is a club we didn't volunteer for... Our members care about our fellow man, particularly those dealing with prostate cancer... There are 750 newly diagnosed prostate cancer patients in our region every year. We touch about 40, or .05% of them. Our first challenge is to raise this percentage and secondly, to continue to provide ongoing support to those living daily with prostate cancer. A final challenge is bolstering our support mechanisms to meet these challenges. We have very competent people but we need more to address these challenges."

Interested individuals who wish to volunteer may contact them as follows:

Bill Dolan 819-685-0230 b.dolan@sympatico.ca

John Arnold 613-730-1190 pspo@magma.ca

Haberdashery Dept: New Golf Shirts Now Available

PCCN Ottawa has produced dark blue golf shirts with "Prostate Cancer Support Ottawa" in gold lettering. The shirts are subsidized by your association and sold to the members for just \$25 each. The sizes are medium, large and extra-large.

If you would like a shirt, please contact John Arnold at 613-730-1190 or email him at pspo@magma.ca