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THE WALNUT

December 2022

Newsletter of the Prostate Cancer Support Group–ACT Region

Postal address: C/- SHOUT, Building 1, Collett Place, Pearce ACT 2607

<https://pcsg-act.org.au>

Coming Group events

**Christmas get-together, 6:30 pm
Thursday 15 December 2022,
Community Dining Room, Canberra
Southern Cross Club, Woden**

This Christmas celebration is an opportunity to meet informally with other members and friends.

Please [let President, Greg McRoberts know](#) if you will be attending (to help with reservations).

**Coffee morning, 10:00 am Tuesday
10 January 2023**

Our next coffee morning is at the Canberra Southern Cross Club, Woden.

**Harness Racing ACT fund-raiser, 5:30 pm
Sunday 15 January 2023**

Harness Racing ACT is again sponsoring the Group at its meet on Sunday 15 January. Details are in the President's Message (opposite).



From the President

My best wishes to you all for the Christmas season and for the New Year.

A reminder about the following events:

**Xmas Dinner/Drinks - Southern Cross Club
Woden - Thursday 15th December @
6.30pm**

[Please update me](#) on your intention to attend this event and associated numbers to ensure we have booked enough seats.

**Canberra Harness Racing Club's Annual
Fundraiser for PCSG Canberra & Region -
Sunday 15th January 2023 @ 5.30pm**

At this stage I expect the cost will be \$60 per head which will include a two-course meal, wine, beer and soft drink.

All proceeds from the meals and raffles on the night are donated to our Group, so please show your support by attending and where possible inviting friends to join us as well.

Please [advise by email](#) advising attendance and numbers by 5pm Monday 10th January.

Payment details will be advised.

**The Combined Prostate Cancer Support
Groups of Rural NSW - Conference - 10th to
12th March 2023**

Full details of this event are yet to be sent. It is expected to be held in Dubbo.

To provide organisers with an indication of numbers, [please email me](#) if you would like to attend this event.

Greg McRoberts

Our Meeting on 16 November

Michael Irvine from Southside Physio was the presenter at our November meeting.

Michael provided a good overall coverage of prostate cancer issues, including:

- living with prostate cancer;
- managing the adverse effects of the treatment of diagnosed prostate cancer, in particular incontinence;
- treating erectile dysfunction;
- Peyronie's disease; and
- PROST! - Men's Health Classes.



Living with prostate cancer

Michael spoke about the importance of healthy lifestyle choices, which will reduce the risk of getting cancer. These include:

- not smoking;
- including vegetables (particularly cruciferous vegetables), lycopene, nuts, poultry/fish, selenium, soy foods, omega-3, turmeric, and foods rich in vitamins C, D and E in your diet;
- avoiding alcohol, processed meat, processed sugar, trans fats, too much dairy, well-done red meat and high energy foods;
- regular exercise; and
- other issues, such as good sleep patterns and mindfulness that can reduce stress levels.

Michael also spoke about the need for active surveillance of prostate health for people who do not require treatment or are in identified higher risk groups, with the aim of avoiding the need for treatment in the future.

Managing adverse effects of treatment of diagnosed prostate cancer

Michael discussed some of the adverse side effects of a prostatectomy and radiation. These include:

- Radical prostatectomy: incontinence, erectile dysfunction and shorter penis. With continence previously being controlled by a sphincter in the urethra, which is removed with the prostate surgery, there is a need to retrain the pelvic floor muscles to manage continence.
- Radiation: incontinence (less than radical prostatectomy), over-active bladder syndrome (greater than radical prostatectomy) and erectile dysfunction (less than radical prostatectomy).

To help manage these side-effects, it is recommended that patients:

- where possible, have a pre-operative assessment and six weeks pelvic floor training (for patients having a radical prostatectomy). Southside Physio's program involves two physiotherapy sessions over six weeks before surgery to start building pelvic floor muscle strength;
- have post-operative continence training and exercises (NOTE: Medicare card holders can ask their GP for an Enhanced Primary Care referral which will enable them to receive up to five subsidised treatments);
- build up to walking between 30 and 60 minutes a day; and
- undertake a weight loss program if their BMI is greater than 30 or their waist circumference is greater than 94 cm. Southside Physio runs a five weeks program with a dietician and exercise physiologist to help reduce surgical complications.

Around 95% of men will become continent with pelvic floor training. A physiotherapist can help patients use their pelvic floor muscles correctly. This may involve using a real-time ultrasound to ensure that the muscles are being used correctly.

Treating erectile dysfunction

Michael outlined the options for treating erectile dysfunction. These included:

- PDE5i (phosphodiesterase type 5 inhibitors) medications, such as Tadalafil, sold under the brand name Cialis among others;
- a vacuum erection device;
- shockwave therapy; and
- injections; and
- psychosexual therapy.

With all options it is important to promote cardiovascular fitness because erectile function is a part of the cardio system.

It is recommended that men get advice on options for treating erectile dysfunction and when to commence their use at an early stage.

PROST! - Men's Health Classes

The PROST! Program originated in WA and the classes have been shown to improve post-prostate cancer treatment outcomes. Southside Physio runs these classes every Monday and Thursday and the first class is free.

David Ault's Tasmanian Trail Walk

The December/January edition of the *Great Walks* magazine includes a story on David's 500 km Tasmanian Trail walk in autumn this year. It is now five years since David's confirmed diagnosis for prostate cancer. It is pleasing that so far there is no sign of spread of the cancer.

David recently completed his sixth participation in the 30 km distance at the Stromlo running festival. After his parathyroid/thyroid operation in June, he has been unsure about his staying part in these distance events.



If you don't already subscribe to PCFA's Blue Horizons newsletter, why not do so. There is no charge and it contains a lot of useful information. The following are some items from the latest newsletter.

New PSA testing rules

Prime Minister Anthony Albanese and Health Minister Mark Butler have joined the Prostate Cancer Foundation of Australia to announce an overhaul of Australia's Clinical Guidelines for PSA Testing. The announcement was made at PCFA's annual Parliamentary Big Aussie Barbie in Canberra in November. The review process will take two years with interim guidance to be released in the meantime.

[Read the article.](#)

Cry for new research: Deadly cancers set to double

The number of Australian men being diagnosed with aggressive prostate cancers is expected to more than double over the ten-year period to 2028, prompting renewed calls for prostate cancer to be recognised as a national research priority. The call follows the release of new data predicting a 123% increase in the number of men being diagnosed with high-grade disease.

[Read the article.](#)

Science on the move: Exercise the best medicine

Although research has found exercise can reduce the risk of death in men with prostate cancer, exercise medicine is still not widely recognised as an essential part of treatment and disease management. To overcome this obstacle, experts are conducting a randomised controlled trial to test whether a targeted exercise program improves survival outcomes in men with advanced prostate cancer.

[Read the article.](#)

Articles and Reports of Interest

The following articles which have appeared recently on web sites or other sources may be of interest to members. Any opinions or conclusions expressed are those of the authors. See Disclaimer below.

Lower prostate cancer screening rates tied to higher rates of later advanced disease

Medical centres with lower prostate cancer screening rates have higher subsequent increases in advanced prostate cancer, according to [a study published in JAMA Oncology \(24 October 2022\)](#).

According to the study, PSA screening rates were 47.2 percent in 2005, peaked at 50.8 percent in 2008, and declined to 37.0 percent in 2019. Declines were seen across all age and race groups. The long-term non-screening rate increased in parallel during the study period.

Simultaneously, metastatic prostate cancer incidence was 5.2 per 100,000 men in 2005, reached a low of 4.6 per 100,000 in 2008, and rose to 7.9 per 100,000 men in 2019. There was an association between higher facility-level PSA screening rates and lower metastatic prostate cancer incidence five years later. Similarly, higher long-term non-screening rates were associated with higher metastatic prostate cancer incidence five years later.

Single-fraction PSMA PET and multiparametric MRI-guided stereotactic body radiotherapy for local recurrence of prostate cancer

At our October meeting we had a very useful presentation by Dr Paul Conway on stereotactic ablative body radiotherapy (SABR) treatment of metastatic prostate cancer. SABR is an emerging technology that has become increasingly used to treat localised prostate cancer.

This [study in BJUI International \(17 September 2022\)](#) included 64 patients with PSMA-PET-positive prostate cancer local recurrences treated with single-fraction SABR treatment between 2016 and 2020. The majority of the patients had previously undergone a radical prostatectomy. Only patients with a

localised disease in the prostate, prostate bed, or seminal vesicles were analysed in the study. Recurrences in local lymph nodes were excluded. Identification for subsequent recurrences or metastatic spread based on increasing prostate-specific antigen (PSA) levels were evaluated using PSMA-PET imaging.

This study of single-fraction SABR treatment for local prostate cancer recurrence found that the treatment was well-tolerated and resulted in a significant reduction in PSA levels that appeared durable.

Association between initiation of PSA testing at a younger age and prostate cancer-related mortality outcomes

This [study in European Urology \(17 November 2022\)](#) investigated the association between PSA screening at a younger age and prostate cancer-related mortality outcomes. Initiation of PSA screening at the age of 55 years led to a 50% reduction in the risk of prostate cancer-related mortality compared with initiation of screening at the age of 60 years.

Melanoma diagnosis is associated with increased risk of subsequent prostate cancer

Melanoma diagnosis is associated with an increased risk of subsequent prostate cancer, according to a [study published in the British Journal of Cancer \(1 November 2022\)](#).

The University of Sydney team examined the association between cutaneous melanoma and subsequent risk of prostate cancer for 96,548 eligible men in the Sax Institute's 45 and Up Study (Australia) recruited between 2006 and 2009. 1,899 men were diagnosed with melanoma during the melanoma diagnosis period. During follow-up, 3,677 incident prostate

cancers were diagnosed.

The researchers found that the risk of a

subsequent prostate cancer diagnosis was increased for men with a melanoma diagnosis versus those with no melanoma.

Borrowing items from the library

You can borrow items from the Group's library. There is a wide range of materials, from books to videos. Those who are interested in borrowing items from the library or finding out more about our collection can contact U.N. Bhati, email:

librarian@pcsg-act.org.au

Personal support

For general information, please call SHOUT (Self Help Organisations United Together) during normal office hours on (02) 6290 1984, and their staff will arrange for someone to contact you.

If you would like immediate advice, support or assistance, please contact one of the following two people:

President: Greg McRoberts, president@pcsg-act.org.au 0413 480 864

Secretary: John McWilliam, secretary@pcsg-act.org.au 0416 008 299

Appreciation

Thanks to all those supporting the Group's fund raising activities, in particular, Harness Racing ACT, the Canberra Southern Cross Club, ACT Masters Hockey, Chartertech ACT and Paddywack Promotional Products.

From the editor

If you are aware of news, products, publications, web sites, services or events that may be of interest to members of the group, we would like to be informed of them. If you have received this newsletter indirectly and would like to be emailed a copy direct, or if you would like to add any of your friends or carers to our distribution list, or if you no longer wish to receive copies of the newsletter, please send an email to:

secretary@pcsg-act.org.au

Disclaimer

From time to time in our newsletters we provide information about developments in the diagnosis and treatment of prostate cancer, research articles, documents, audiovisual products, presentations and other interesting materials. However, the group does not have the medical expertise required to make an informed evaluation of the conclusions and recommendations presented in such materials, and we have not verified such conclusions and recommendations through appropriately qualified medical professionals. The information presented in this newsletter must not be interpreted as being endorsed or recommended by the group.

Any recommendations made in such materials may not be applicable in your case. Before implementing any recommendations made in the materials that are reported, it is essential that you obtain advice from appropriately qualified medical professionals. The view of the group is that no two prostate cancer cases are alike and that no single treatment option is better than any other in all cases. While the information in this newsletter should be of interest, there is no substitute for getting informed medical advice from your own GP, specialists and other medical professionals.