

East Lancashire Prostate Cancer Support Group Newsletter



Volume4

Issue2

Date February 2015



“Amazing Response to Life Saving Event”

Prostate Cancer Screening Saturday 31st January 2015.

273 men were tested in approx. 3 & quarter hours!, (see pages 2,3 &4 for more detail) Shows how many men are now becoming aware of the disease.

from there to be tested, our local MP Gordon Birtwistle came and was tested, another was a Ribble Valley Councillor who asked if it

What's Inside

Life Saving Event P1, P2, P3 P4

Quite honestly it was amazing! At 8-45 guys were queuing to be tested and it hardly eased off until 12 noon.

We know that the **Radio Lancs.**

would be possible to hold an event in the Ribble Val-

Drug Combo Suppresses Growth of Late Stage PC Tumours P5

We had been allocated the Brian Miller Suite but realised immediately that it was going to be too small for the number



Our Stu get's Gordon Birtwistle MP to shed some blood for PSA test event.

ley. So, many thanks for your support and as we discussed earlier we will

Drug Study Request for Volunteers P6 P7

Optimised PSA Screening Programme P8

of people coming and Burnley FC very kindly allowed us to also use the Harry Potts Suite directly opposite, which we used for

announcements contributed to the success because a lot of men said they had heard it on

Thank you once again on behalf of **East Lancashire Prostate Cancer Support Group** (www.elpcsg.com)

Stuart Marshall (Sec.)

I would like to thank Burnley FC and staff sincerely

the 8 Phlebotomists, and used the Brian Miller for registration, form filling etc.

your programme and subsequent bulletins throughout the morning. One man heard it in Chorley and came all the way

Next Meeting is 5th March 2015

Letter of Thanks to the Chairman, Directors & Staff of Burnley FC

on behalf of our Support Group for the excellent support you have afforded us in order for us to be able to stage the Prostate Cancer Blood Testing (PSA) Event and kindly offering us the loan of your facilities in the Bob Lord stand. Without your support it would have been difficult for us to stage the event. The event was organised and promoted by our Support Group and the testing was carried out by Gary Steele MBE and his team including 8 Phlebotomists who had travelled from Cheshire during the early hours of the morning.

The event was the first time PSA testing had been carried out on such a large scale in this area and the result was far beyond our expectations! During the morning over 260 men came to the Football Club to have the blood test! Men came from all over East Lancashire, including Chorley and the Ribble Valley. It was apparent that by 8.45am we were going to be short of space due to the large numbers arriving early, Michael who had 'opened up' for us came to our aid by allowing us to also use the Harry Potts suite, in addition to the Brian Miller suite.

We would like to specifically thank your Catering Dept. – (Chris Emmerson & Chris Gibson) for offering us the use of your facilities, your Football In the Community Dept. – (Neil Hart) for their efforts with the promotion of the event and your Media Dept. – (Darren Bentley) for his support and the page in the match day Programme. We, and I personally are very aware of the work and efforts that Burnley FC does in the Community and this is just another shining example.

As you will be aware Prostate Cancer is the most prominent and ever increasing Cancer affecting men, to the extent that 1 man in 8 will be diagnosed with the disease in the UK. This has been the reason Gary Steele decided to do something about it - he set up a team who now go out in to Communities independently testing men knowing that it will save lives due to men being diagnosed early. It has proved successful to date and has helped to save many lives. He was awarded an MBE in 2012 for his fund raising efforts in order to finance the blood testing sessions.

We can only hope that with all our joint efforts on this occasion it will help local men avoid any unnecessary problems with the potential disease that is Prostate Cancer.

Our Support Group meetings are held on the first Thurs. of every month at Burnley Gen. Hospital, 2-4pm

Once again, many, many thanks,

Stuart Marshall (Secretary)

**LEIGHTON HOSPITAL PROSTATE CANCER SUPPORT GROUP
AND AWARENESS CAMPAIGN, CHESHIRE**

E-Mail: grsprostate.awareness@gmail.com

PCS NORTH OF ENGLAND

**HELP LINE 0845 601 0766
Registered Charity No. 1092102**

**MR. G. R. STEELE MBE
58 CHERRY CRESCENT
WINSFORD
CHESHIRE
CW7 1EE**

Tel.No. & Fax 01606 553097

1st February 2015.

The East Lanc's Prostate Cancer Support Group.

Dear Stuart,

First my thanks to those members of your group who came along on Saturday and gave of your time to help with the PSA blood testing event and also the hard work you all put in to ensure its success, it was most appreciated.

As you will see from the enclosed letter I have sent to **Burnley F.C**, we tested 273 men in the 3 hours, no mean feat I'm sure you'll agree, (would you believe the team really enjoyed it), and the amount raised **£2550.00**.

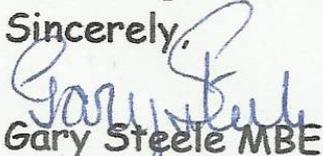
The sum of money received will of course be used to fund the event and although it is quite a sum it falls short firstly in those who attended by **£180.00** and costs for Phlebotomists and payment for samples tested and posted by **£816.00**, on this occasion to which the group will of course make good.

I enclose these details only to show how costly these PSA tests can be, however, we have to consider the fact it is worth it and as "Tackle" suggested more groups were to be encouraged to fulfill these testing events, did they really consider the amount of costs involved? I don't think so or that they even knew the costs.

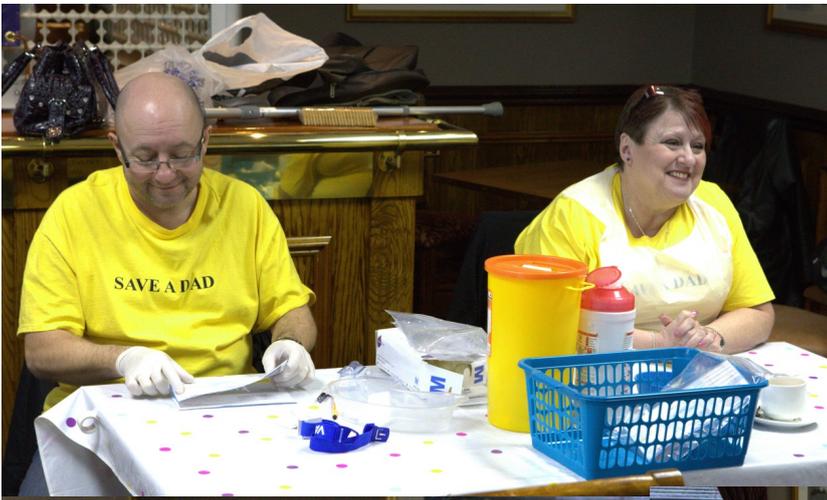
As you have now seen for yourselves and also been involved, the above group is fully equipped to travel anywhere and provide the opportunity for any number of men to be tested for early detection prostate cancer and only need the assistance of groups such as yours with the same dedication to apply some effort as you did on this occasion.

We all admired your dedication and friendly nature and would like to be involved with you again as I'm sure there are further opportunities in this area of Lancashire. My thanks again for all your help and assistance it was a pleasure being with you and hope to repeat the experience again in the near future.

Sincerely,


Gary Steele MBE

Chairman Leighton Hospital Prostate Cancer Support Group





From Left to Right Hazel Goulding (Treasurer) Leon D Wright (IT Admin) Stuart Marshall (Secretary) Steve Laird (Vice Chairman) Dave Riley (Chairman)

Contact Information

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We are a group of local people who know about prostate cancer. We are a friendly organisation dedicated to offering support to men who have had or who are experiencing the effects of this potentially life threatening disease.

The East Lanc's Prostate Cancer Support Group offers a place for free exchange of information and help for local men and their supporters (family and friends) who may be affected by this increasingly common form of male cancer.

At each meeting we strive to be a happy, supportive and upbeat group of people; encouraging open discussion on what can be a very difficult and perhaps for some an embarrassing subject. We have lively, informative, interactive, sharing and above all

Drug combo suppresses growth of late-stage prostate cancer tumors

ABSTRACT

Inhibition of polo-like kinase 1 (Plk1) enhances the anti-neoplastic activity of metformin in prostate cancer

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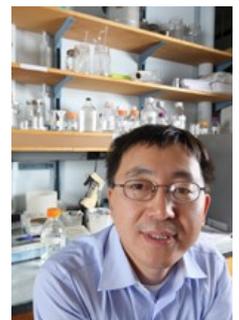
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Xiaoqi Liu

The widely used anti-diabetic drug metformin has been shown to exert strong anti-neoplastic actions in numerous tumor types, including prostate cancer. In this study, we show that BI2536, a specific Plk1 inhibitor, acts synergistically with metformin in inhibiting prostate cancer cell proliferation. Furthermore, we also provide evidence that Plk1 inhibition renders prostate cancer cells carrying wild types p53 to be much more sensitive to low dose metformin treatment. Mechanistically, we found that co-treatment with BI2536 and metformin induces p53-dependent apoptosis and further activates the p53/Redd-1 pathway. Moreover, we also show that BI2536 treatment inhibited metformin-induced glycolysis and glutamine anaplerosis, both of which are survival responses of cells against mitochondrial poisons. Finally, we confirmed the cell-based observations using both cultured cell-derived and patient-derived xenograft studies. Collectively, our findings support another promising therapeutic strategy by combining two well-tolerated drugs against prostate cancer proliferation and the progression of androgen-dependent prostate cancer to castration-resistant stage.



Dear Stuart,

Tackle has been asked to take part in the following survey and would appreciate your help. If you have any queries, please ring:

Stella Frost

T:0161 284 8889 M: 07769 718 573

"We are an independent market research agency working with independent researchers to carry out patient focussed research in the UK.

We would like to interview men with Prostate cancer currently taking one of the following treatments..

Abiraterone (Zytiga)

Enzalutamide (Xtandi)

The research involves some telephone interviews; some face to face interviews at home on a day & time convenient to the patient and also some on-line interviews

We are also looking for men who are currently or in the last 5years received the following treatment; androgen deprivation therapy (ADT) or complete androgen blockade

This research involves a combination of telephone and on-line interviews.

The research is about understanding, from the patients perspective, what impact PC has on men's lives; their family and friends and how their experience of treatment for this condition affects them. It is very much about understanding the patient journey from diagnosis to the current day and everything about how this has affected them at various stages.

The interviews would last for 30- 90mins (depending on type of interview) and be carried out within the guidelines of the Market Research Society and British Healthcare Business Intelligence Association codes of conduct. This guarantees the anonymity of anyone taking part in this type of research. At no time would we advise on the condition; pass comments about treatment or discuss any other condition they may have.

The research studies has been commissioned by companies in the pharmaceutical industry in order to gain the views of what are ultimately their end customers. The research provides the company with a much greater understanding of how this condition affects men and their families and friends but also how taking whatever treatment they have experience with, also affects them and the people around them. The report is used to educate researchers; marketing teams and communication teams in the oncology departments about what it is like from a patients perspective to have this condition. This in turn creates a better understanding of the way these companies provide not only the drugs they develop but the information leaflets or booklets they provide with their drugs or in clinics.

As you know, pharmaceutical companies are not allowed to speak to patients directly but gain second or third hand views on how this condition affects them or how their drug treatment affects them from doctors or nurses working in this area. They are used to looking at clinical trial data but this does not give a personal view of real life patients with this condition. To have information "from the horse's mouth" is invaluable insight that hopefully benefits all concerned

In appreciation of their time the people taking part will receive a cash honorarium of £30-£60 depending on the type of interview they take part in. In some cases we may also want to interview the wife/partner of the gentleman taking part and they would receive the same honorarium.

We would also make a donation of around £30 to Tackle Prostate for each person who takes part in an interview that came via your organisation.

We appreciate that these are difficult patients to access and that they can be quite unwell but would really appreciate you contacting you membership to see if anyone is interested in helping with this research study. We would like to arrange interviews as soon as possible.”

Once again, if you have any queries, please ring:

Stella Frost

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tackle
prostate cancer

Charity Registration No: 1123373

Prostate cancer: optimised PSA screening programme developed at the MedUni Vienna

(Vienna, 3rd February 2015) As an indicator of prostate cancer, the PSA test is regarded in urology as highly controversial since it is not always unequivocal. A team of researchers from the Comprehensive Cancer Center at the MedUni Vienna and Vienna General Hospital has now developed a programme that compensates the shortfalls of PSA screening with methods from personalised medicine. As a result, prostate cancer screening is able to reach a new level of quality.

According to Statistik Austria, around 4,700 men develop prostate cancer (adenocarcinoma) every year in Austria. Around 1,146 of these men die during the same period. The PSA (prostate-specific antigen) is the most important marker used for diagnosing prostate cancer. In the professional field, however, it is viewed as being too inaccurate and therefore serves merely as an indicator. A team of scientists led by Shahrokh Shariat, Head of the University Department of Urology at the MedUni Vienna and the Vienna General Hospital and member of the Comprehensive Cancer Center (CCC) Vienna, has now developed a programme that optimises the testing procedure. As a result, prostate cancer screening is markedly improved.

PSA: still the best bio-marker in oncology

Says Shariat: "Although the PSA is not an ideal marker, it is still the best diagnostic bio-marker across the whole of oncology. At a younger age, i.e. around 40 - 45 years, it is very useful in terms of predicting the risk of prostate cancer. The data also confirms this. Since the PSA screening test was introduced, deaths from prostate cancer have fallen by 40 per cent. So the question isn't about whether PSA screening should be carried out or not. It's more about doing it cleverly."

Personalised medicine for the PSA test too

The weak point of the PSA test is that a raised PSA level does not always indicate an increased risk of prostate cancer, or even the presence of a cancer at all. Consequently, if the PSA level was raised, the previous approach has been to instigate aggressive therapy, which was often associated with major risks such as incontinence or erectile dysfunction. To counteract these side effects of "overtherapy", Shariat and his team have developed a programme that harnesses the methods of personalised medicine.

If the patient is still young and the PSA level is only slightly raised, he is actively monitored with regular follow-ups. This avoids unnecessary procedures and also ensures that any malignant development of the tumour does not go undetected. If the value is so raised that a biopsy needs to be considered, the test is repeated within twelve weeks at the most and further bio-markers and mathematical calculation models are factored into the decision-making process.

Says Shariat: "In addition to the PSA test, we use the new molecular methods in imaging and pathology to create a comprehensive biological profile of the cells. This enables us to make a precise risk assessment in the MDT, localise the tumour accurately and determine its molecular structure. We also use special calculation models in formulating a prognosis."

With this method, doctors can better estimate whether treatment is needed and would be useful, and how likely it is that the patient will respond to surgical or drug-based therapy. As a result, patients are spared unnecessary treatments and possibly also side effects.

If the MDT still recommends surgery as the therapy of choice, Shariat strongly advises having the surgery carried out in a specialist hospital that carries out this type of surgery often, since this is where the expertise of the clinicians, the familiarity with the condition that is required and the relevant diagnostic procedures can be found. Says Shariat: "These hospitals also have the latest specialist equipment. The MedUni Vienna and the Vienna General Hospital, for example, have the latest Da Vinci robots, which make the procedure more precise and more tolerable for the patient, who is of course at the centre of everything."

CCC on Cancer Day at Vienna's City Hall

For patients who would like to learn more about this or other oncology-related matters, Cancer Day is again being held at Vienna's City Hall on Tuesday, 10 February 2015. The Comprehensive Cancer Center Vienna will be there with its Cancer School CCC Vienna, its educational organisation for patients, and will be on hand to answer questions. At the Cancer School CCC Vienna, CCC experts offer brief lectures under the motto "Cancer knowledge for all" about the condition, its causes and development, diagnostic procedures and treatment options. The next block of lectures will begin at the end of April / start of May 2015. Information: www.cancerschool.at.