

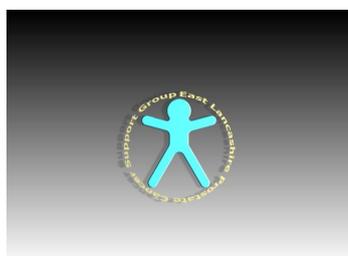
East Lancashire Prostate Cancer Support Group Newsletter



Volume5

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PSA Self Testing Kit's

Colin Ormston ELPCSG Member

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Something of interest for the meeting today. Seen at my local Pharmacy in France this morning - PSA self test kits. Everything you need to take a blood test and test for PSA. Two items for taking a pinprick of blood, a pipette for placing the sample on the tester, fluid for activating the test, and a swab. The kit simply gives a positive or negative result based on the level of PSA in the sample - which I assume is 4. It does warn that a negative result does not rule out the presence of cancer. Cost of the kit is around £10.

I bought one just out of interest and will bring it along to the meeting in May. Attached photos of the kit.

Colin.



Do DIY testing kits really work?

by CHARLOTTE DOVEY, Daily Mail

Home testing kits, readily available from chemists or via the internet, claim to be able to detect the early warning signs for conditions ranging from Alzheimer's disease to prostate cancer.

But should such tests be carried out without proper medical guidance and support? And are the results conclusive? We purchased six kits and asked key medical experts to give their verdict.

Read more: <http://www.dailymail.co.uk/health/article-163402/Do-DIY-testing-kits-really-work.html#ixzz4auQc3JUt>

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PROSTATE PROBLEMS

Prostate cancer is the second most common cancer in men in the UK, after lung cancer. More than 21,700 new cases are diagnosed each year.

Symptoms include having to rush to the toilet to pass urine, passing urine more often and/or at night, discomfort (pain or burning) while passing urine, a feeling of not having emptied the bladder fully, blood in urine or semen, and pain in the back, hips or pelvis.

Wellbeing prostate Disorders Test, £10.95

CLAIMS: This screening test measures the PSA (prostate specific antigen) levels found in the blood. These levels can help to detect prostate cancer.

HOW IT WORKS: PSA is a protein produced by both normal and cancerous prostate cells. A high level of PSA can be a sign of cancer. This test requires you to prick your finger with a lancet and press a drop of blood into a test area. Liquid is added to help absorption. If the result is higher than 4ng/ml in the blood, the test is positive.

VERDICT: A spokesperson for Prostate Cancer Charity (0845 300 8383, www.prostate-cancer.org.uk) says: 'This test is used by hospitals throughout the country where a patient's history and life-style is also taken into account.'

'However, at present there are reservations about using PSA as a screening tool for prostate cancer. Sixty per cent of men with a raised PSA level don't have prostate cancer, while 25 per cent of men with prostate cancer don't have a raised PSA level. 'Additionally, the older you are, the higher your threshold for PSA rises. In a man over 70, levels of 7ng/ml in the blood are an indicator -not the 4ng/ml stated in the test.'

What is also not noted in the literature is that exercise and sexual activity can increase PSA without detriment to health. Only a biopsy can truly diagnose prostate cancer.

Read more: <http://www.dailymail.co.uk/health/article-163402/Do-DIY-testing-kits-really-work.html#ixzz4auQRa31H>

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Prostate cancer: Test for inherited risk

BBC NEWS

6 July 2016

From the section [Health](#)

<http://www.bbc.co.uk/news/health-36701515>

[Read more about sharing.](#)

Men with advanced prostate cancer could be checked for high-risk family genes because they are fairly common, affect treatment and can be passed on to their children, say experts.

According to the international researchers, more than one in every 10 men with the advanced disease carries a faulty gene, inherited from a parent.

One of the genes is BRCA1 - already linked to breast and ovarian cancer.

The study, in the journal NEJM, is the largest of its kind to date.

It included nearly 700 patients with aggressive prostate cancer and found that a "significant proportion" of these men are born with mutant DNA.

Men with these genes may benefit from newer drug treatments that exploit the damaged genetic code to locate and kill off cancer cells.

Inherited risk

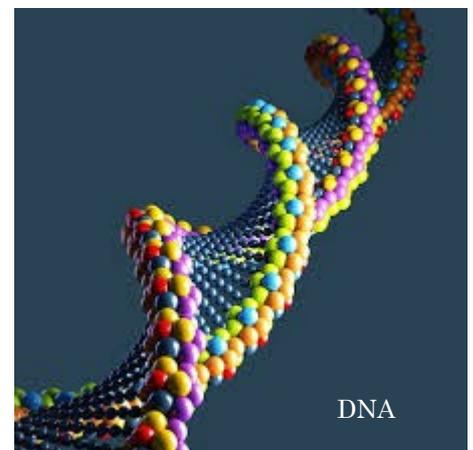
One in eight men will get prostate cancer in their lifetime - that is 47,000 men diagnosed with the disease every year in the UK.

Some prostate tumours are very slow growing and may never cause any symptoms or harm. Others - about a third - are faster growing and can be lethal.

Researchers have been looking for ways to better recognise which cancers will be more problematic and they believe looking at a person's genes could help.

Prof Johann de Bono, from London's Institute of Cancer Research, and colleagues used a saliva test to check the DNA of the 692 men with advanced prostate cancer who took part in their study.

About 12% of the men were found to have inherited DNA mutations that the experts say could be the root cause of their cancer.



Prof de Bono believes identifying patients in this way could improve treatment.

"We could offer these men drugs such as PARP inhibitors, which are effective in patients with certain DNA repair mutations and are showing important anti-tumour activity in ongoing clinical trials."

He said it was too early to recommend screening whole families for the mutations, but that might be sensible in the future.

"As doctors, we all know patients who say their father and grandfather had this cancer.

"We need to do trials to evaluate this risk. Then we could look at preventive strategies."

He said if the risk was high then maybe the men at greatest risk could consider having their prostate removed as a precaution.

He pointed out that doctors already do similar preventive surgery for breast and ovarian cancer linked to the BRCA genes.

But he cautioned that it was still early days - more studies are needed to assess this.

Dr Iain Frame of Prostate Cancer UK agreed, saying: "In future testing all men with advanced disease for these mutations might help select the most effective treatments for them.

"However, there's still a lot of work to do to see how this could be done in a routine clinical setting, and to consider the consequences for men and their families."

Dr Imran Ahmad from Cancer Research UK said: "As the cost falls, the cancer sequencing approach used in this study will become more and more relevant, making it possible to routinely examine all men with advanced prostate cancer for inherited mutations."



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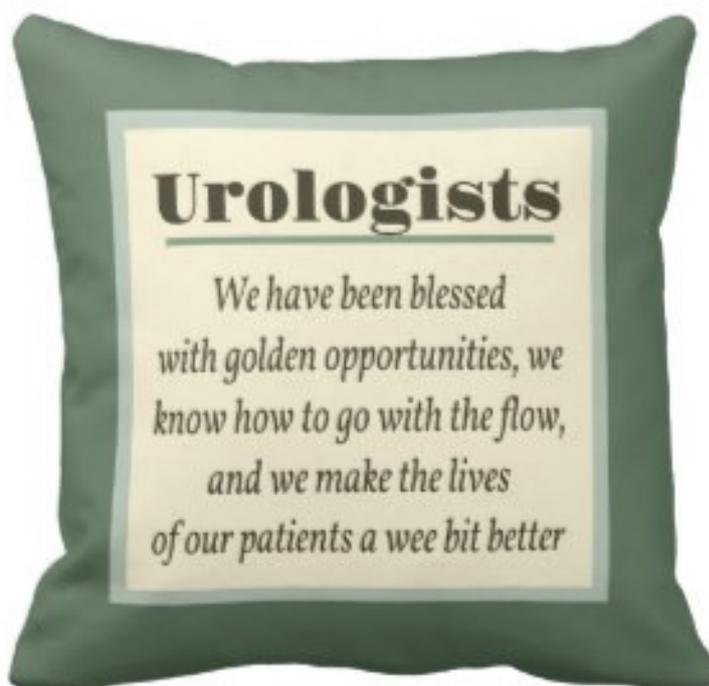
From Left to Right Hazel Goulding (Treasurer) Leon D Wright (IT Admin) Stuart Marshall (Secretary) Steve Laird (Vice Chairman) Dave Riley (Chairman)

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 supportive meetings.

What Urologists Do!



Sponsors



EAU Patient Symposium

Tuesday 28 March 2017 Excel Centre Room 14 (see below)

Programme

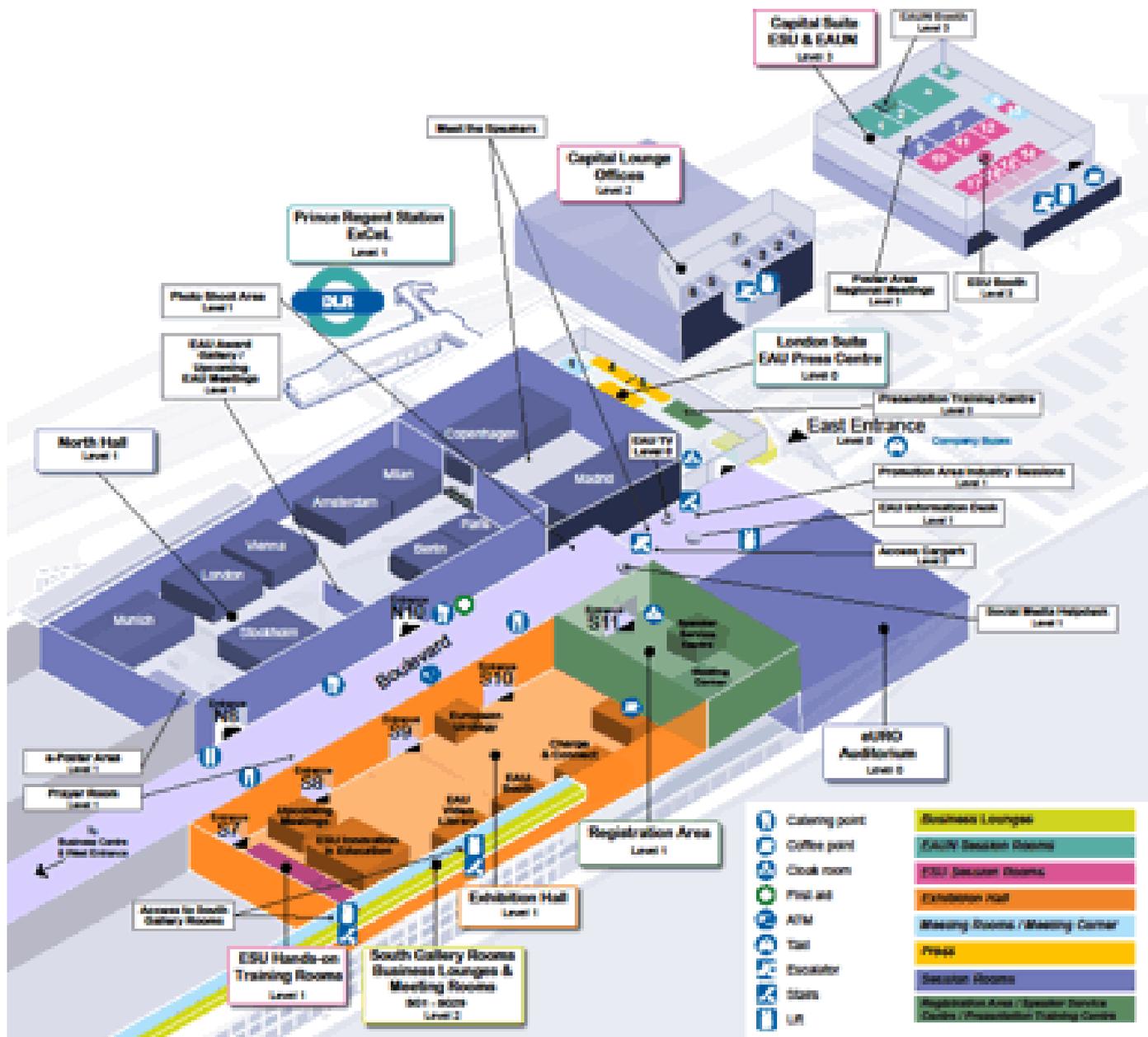
Dear Colleague, although we have thirty or so attendees booked for the symposium on 28th March at London's Excel I would really value your help in drumming up more nominations. We have space for over 100 and I have assembled some top speakers (our Chris Booth included!).

If you know of more people that can attend please let Simon know , who is co-ordinating numbers.

EAU Patient Symposium

Tuesday 28 March 2017 Excel Centre Room 14 (see below)

1000	Welcome and Opening Remarks		Ken Mastris, Chairman, Europa Uomo
1005	Programme Overview	Today's topics and speakers	Professor Frank Chinegwundoh MBE, Chairman Tackle Clinical Advisory Board
1015	Session 1	Latest Developments in Prostate Cancer Diagnosis and Treatment	Dr Lina Carmona Echeverria, Clinical Research Associate, University College, London
1045	Session 2	It takes more than milk to improve Bone Health!	Lawrence Drudge-Coates, Uro/Onco Clinical Nurse Specialist & Honorary Lecturer, Kings College, London
1115	Comfort Break		
1130	Session 3	Engaging Men in Health Messages	Rebecca Porta, Chief Executive Officer, ORCHID Male Cancer
1200	Session 4	PSA Testing : A More Informed Approach	Chris Booth, Emeritus Consultant Urologist and Chairman of CHAPS Men's Health charity
1230	Panel Discussion	Q & A, Open Forum	Professor Frank Chinegwundoh MBE
1255	Closing Remarks		Ken Mastris



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Tackle Prostate Cancer is the campaign name of The National Federation of Prostate Cancer Support Groups
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