



11th-ANNIVERSARY **POUGHKEEPSIE**
MAN TO MAN



Prostate Cancer Education & Information Support Program since July 1993

July 8, 2004 Issue 7 (Meetings to date # 147)

Dennis P. O'Hara, Founder & Facilitator Emeritus. Local ACS # 845-452-2932 e-mail: <iggy41@aol.com>

Co-Facilitators: Jim Kiseda 845-223-5007 and Paul Totta 845-297-7992

American Cancer Society Information - 1-800-ACS-2345 or WWW.Cancer.Org

Our web sites <http://www.geocities.com/charl2ep/Cancer/> or <http://www.boodrow.com>

Man to Man (M2M) is an educational, not for profit, prostate cancer support program of the American Cancer Society. It is a forum for discussing medical developments & experiences. Protocols discussed at M2M meetings are sometimes based on anecdotal information. It is always advisable to consult a physician before adopting any form of treatment

In This Issue:

- Program for M2M on July 8, 2004
- Newcomers & PCa. 101
- Takeover of Organics
- Pesticides can cause prostate cancer
- Dendreon Announces Phase I Study Results
- Are we losing the battle against cancer?
- Passed Away-Mario P. Menelly
- Vitamin D Book by Dr. Mercola
- Joke Du Jour
- Popular pain medication may slow PCa.

A joint meeting of Man to Man (M2M) and Side by Side (SXS), the prostate cancer (PCa) support and education groups sponsored by the American Cancer Society, was held on July 8, 2004 in the Central Hudson Electric Company Auditorium-6, Rt.9, Poughkeepsie, NY. There were 50 in attendance including 4 new M2M members and 7 SXSs. Several of the new members were given our NEWBIE BOOK.

PLEASE NOTE Poughkeepsie M2M has back issues of our newsletters & information on PCa.

go to

<http://www.geocities.com/charl2ep/Cancer/>

or <http://www.boodrow.com>

PROGRAM

GENERAL MEETING

MAN TO MAN & SXS held general meetings on July 8 at Central Hudson Auditorium. There was a lot of participation from the audience in relating their experiences and providing information to all.

The PC 101 group was highlighted as a help to newbys and to others seeking more info. This group, led by Herb Ilker, meets for a short time after the formal meeting is over and delivers a newby book to newly diagnosed men and discusses treatment options.

Two new library books were added to our collection. One was a large book on herbs and the other was a statement issue from the NCI, which explained the research program for the coming year and the budgets.

In the meeting announcements, we mentioned Joel Miller, our state assemblyman, who is a tentative speaker. For this meeting we would like to have many suggestions for state action on his part. To that effect, we provided a suggestion box that we will have at the next meeting.

Our 11th annual celebration of life dinner will be held September 30 at 6:30 pm at the Villa Borghese. (see insert for details) We would like to have sign ups as soon as possible to meet our guarantee of 30 people to the restaurant. The cost is \$22 per person.

For the latest news, we talked about the PAACT newsletter, watchful waiting, TUNA, The Bolens Report and vitamin D. Again, we have to extol PAACT newsletter for 3 exciting articles written for the PCa patient in a manner understandable to all. The first article was written by Dr. Stephen Strum and neatly summarizes things we have talked about at previous meetings. It was titled "A Strategy of Success in the Treatment of PCa." It was Part II of a three series paper. The prime thrust of the paper was establishing a very large baseline data base in order to more exactly propose the proper therapy and to use that data for predicting success using the very powerful tables and formulas that now exist. I will list these tests here. Look to the article for full explanation. They are:

- PSA
- Gleason
- Stage
- PC Core Percentage
- Testosterone
- QCT Bone Densitometry
- PAP
- Ploidy
- Pyrimidins D

Other hormone levels and protein markers

Dr. Leibowitz and Tucker again struck home with their article entitled "Early Hormone Therapy Works Ridiculously Well." Following was Mark Moyad, with his excellent coverage of medical experiments and nutrition.

The newsletter is published quarterly and is free for the asking. Many men came up at the end of the meeting to get contact info.

One of the longest studies of early prostate can-

cer suggests that untreated, slow growing tumors become more lethal after 15 years. These findings argue for more aggressive treatment in younger men. This was reported in the latest issue of JAMA.

TUNA therapy results in significantly reduced side effects. TUNA stands for Trans urethral needle ablation using radio frequency. It is primarily used for BPH but could also be used for constriction caused by PCa therapy. We mention this use for BPH because some of our attendees do not have PCa yet but do have BPH. The significance is that if a TURP is used for BPH and the patient later acquires PCa, his rate of remission for PCa treatment is lower due to that procedure. TUNA would be better for him.

We spoke of the extreme importance of vitamin D and testing. See the column added to the newsletter for a full explanation.

A very good website called The Bolen Report can be found at <http://bolenreport.com>. It covers medical news from a critical standpoint. Also contains the largest number of links to other health sites in a three page listing. Very nice to have this all in one place so that not much time has to be spent surfing all over the place to get info.

Ed Tucker, who is a distributor for Herbalife products, has graciously offered a 20% discount to M2M members. He carries a huge line of supplements designed for all sorts of categories in health treatment. The line can be checked out at www.ultimatehealthstore.com. Phone is 845-831-0786. M2M does not endorse any particular product but does present information that anyone can use through their own discretion.

Jim Kiseda Poughkeepsie M2M

Newcomers & PCa. 101

1) He was diagnosed in 2002 and underwent

RP. Following RP, his PSA was 0.1. One year later it is up to 1.2. He is here for more information. Triple hormone therapy was discussed.

2) He underwent RP nine years ago, following RP his PSA was 0.1. Several months after undergoing RP, colon cancer was diagnosed, he is here for data on a good diet. It was suggested to him that he look at our last months newsletter where Dr. Pescatore outlines a diet recommended for cancer survivors.

3) He was diagnosed in 1995 and had seed implants. His cancer was discovered through a TURP (roto roter) procedure as he was having trouble urinating. Since the implants, the cancer has returned and he had cryosurgery but that was not successful. He is now on hormone therapy but is receiving only Lupron. Triple hormone therapy was again discussed and the effects of why the three drugs are used rather than only one. Diet was also discussed.

4) He has had two biopsies, the second one was positive for PCa with a GG=6. 1 of 15 cores was positive for PCa. He is taking Proscar, his PSA is 2.4 but is calculated to be 4 due to the effect of Proscar. He is in the information gathering mode.

TAKEOVER OF ORGANICS

Many in our group have banked on the organic label as a "gold standard" for healthy products. Think again because the rug has been pulled out from under us.

America's organic standards have come under heavy attack over the past few weeks. The US Department of Agriculture's (USDA) National Organic Program (NOP) announced on April 14 that they would no longer monitor or police organic labels on non-agricultural products, clearly opening the door for unscrupulous companies to put false organic labels on products such as fish, fertilizer, pet foods, body care products and clothing.

Take seafood for example. The market is already starting to become flooded with products bearing the organic name even though the production methods (industrial fish farms) frequently violate traditional organic principles. In the process, the new USDA scope policy penalizes real organic companies that source, certify and label their product as organic.

The USDA has now stated that if a farmer does not know the specific ingredients of pesticides applied to "organic" plants, the crops can be sold as "organic." Pesticide companies are not legally required to list the ingredients on their products!

The new fishmeal guidance statement allows fishmeal, frequently contaminated with mercury, PCBs and other synthetic chemicals, to be fed to "organic" cattle. These dangerous toxins collect in the body fat of the animal and are relayed to the consumer via dairy or beef products.

The booming organic market and strict organic practices apparently are a threat to the bottom lines of big agribusinesses and the biotech industry. They would never call on their friends at the administration's USDA to degrade organic standards by promoting industrial agricultural practices such as pesticides, non-organic feed, growth hormones and antibiotics, or would they? For more information and to take action visit www.organicconsumers.org or contact Organic Consumers Association at 218-226-4164.

Back in December 2000, the USDA announced the final adoption of the first standards ever imposed for the labeling and processing of organic foods. Now of course the clock has been turned back.

In 1990 Congress ordered the new federal standards, but it took more than a decade to bring it to fruition. The USDA tried to put forth a watered down version but nearly 300,000 citizens protested and the standards were tightened up significantly.

This is a good example of consumers and activists getting results even though there was a lot of opposition from non-organic industries.

A few days ago after I wrote this article the USDA backed off from degrading organic standards. Confronted by a nationwide backlash from public interest groups such as the Organic Consumers Association, Consumer Union, etc., and some of the 30 million consumers who buy organics, USDA gave in when it became clear that a groundswell of citizens refused to accept USDA's arrogant policies.

Consumers are still out of the loop on many important decisions by the USDA, and Congress is still subsidizing, with our tax dollars, genetically engineered crops, factory farming and chemical-intensive agriculture at the tune of 20 to 30 billion dollars a year. By contrast, a measly 5 million dollars is allotted to organic research.

Mike Kulla, Poughkeepsie Man to Man

Pesticides Can Cause Prostate Cancer

Farmers have an unusually high risk of prostate cancer, likely due to their use of certain pesticides, according to a study.

The results confirm previous studies that have found associations between pesticide use and risk of prostate cancer among farmers. Researchers analyzed 55,332 farmers and nursery workers who worked with pesticides in Iowa and North Carolina.

Among the participants, 566 new cases of prostate cancer developed between 1993 and 1999, compared to 495 that would normally be expected.

Compared to the general population, the farmers who used pesticides had a 14 percent greater risk of developing prostate cancer.

Six pesticides, chlorpyrifos, coumaphos, fonofos, phorate, permethrin and butylate, raised the prostate cancer risk in men with a history of the disease, while one pesticide, methyl bromide, raised the risk in all of the men.

About 30,000 U.S. men will die of prostate cancer this year and more than 220,000 will be diagnosed, according to the American Cancer Society. The largest risk factors for the disease include age and family history. Additionally, African-American men have higher rates of prostate cancer than other ethnicities.

**Reuter's Health May 1, 2003
Danny Jakab M2M Florida**

Dendreon Announces Phase I Study Results for APC8024 Immunotherapy to be Presented at ASCO

SEATTLE, WA, June 3, 2004 – Dendreon Corporation (NASDAQ: DNDN) today announced the scheduled presentation of an abstract at the 40th American Society of Clinical Oncology (ASCO) Meeting to be held in New Orleans, Louisiana from June 5 – 8, 2004. Dendreon Corporation will also host booth #2139 at the meeting. Details are as follows.

Antigen Presenting Cell Based Immunotherapy Targeting HER2/Neu Positive Solid Tumors: Results of a Phase 1 Study of APC8024.
Poster Presentation: Monday, June 7, 2004, 8:00 a.m. – 12:00 p.m. (Abstract #2528) Presenter: Prema Peethambaram, MD, Mayo Clinic College of Medicine, Rochester, MN

This abstract may be accessed online at www.asco.org at the conclusion of the meeting. The poster presentations will not be web cast.

APC8024 is an immunotherapy that targets tumors that express the HER2/neu marker. In humans, HER2/neu is overexpressed in a variety

of solid tumors, including breast, colon and ovarian cancer. APC8024 uses Dendreon's proprietary Antigen Delivery Cassette™ technology to genetically engineer antigens such as HER2/neu to bind to antigen presenting cells and stimulate T-cell immunity. Treatment consists of three infusions of APC8024 over the course of a one-month period. The APC8024 approach is similar to the approach used in the development of Provenge®, another targeted immunotherapy that has produced promising results to date in clinical trials for the treatment of prostate cancer. Provenge is currently in a pivotal Phase 3 clinical trial.

About ASCO

The American Society of Clinical Oncology (ASCO) is the world's leading professional organization representing physicians who treat people with cancer. ASCO's members set the standard for patient care worldwide and lead the fight for more effective cancer treatments, increased funding for clinical and translational research, and, ultimately, cures for the many different cancers that strike millions of people around the world every year.

ARE WE LOSING THE BATTLE AGAINST CANCER

Fortune Magazine (3/22/04)? featured a hard-hitting investigative report claiming that we are losing the war on cancer and calling for a change in the battle plan.

The article reports that the annual death toll from cancer has risen 73% while deaths from heart disease and stroke have slowed dramatically. While researchers have amassed a great deal of knowledge essential to this disease, the focus, in the present day research and grant culture, is on finding tiny improvements to treatments rather than real breakthroughs.

Most of the emphasis is on shrinking tumors in the terminally ill, instead of where it should be spent, in understanding and arresting the

process of metastasis, the big killer.

Fortune looked at the National Cancer Institute's grants going back to 1972. Less than 0.5% of proposals focused on metastasis. Of nearly 8900 grant proposals awarded in 2003, 92% did not even mention metastasis.

The publication criticized the cancer establishment for not recognizing that tumors have quickly changing DNA, enabling them to mutate and develop new growth components that single-agent experimental drugs have difficulty arresting or eradicating.

The magazine then takes the FDA to task for obstructing drug approval by requiring rigid three-phase clinical trials that are designed to fail. Case in point: requiring that experimental drugs be given to end-stage patients, preventing scientists from learning if these promising drugs could be effective in early stage cancers that are more readily helped. Fortune found that scientists in the cancer community are a very frustrated bunch.

For solutions they propose a radical change in how we fight cancer including a change in the way NCI funds research, a consolidation of the federal war chest from 5 to 1 agency and an overhaul of the FDA drug-testing and approval process. A tall order!

On September 11, 2001, nearly 3000 Americans lost their lives in a surprise attack. In the same year 2,500,000 Americans died (554,000 from cancer). Terrorists were responsible for approximately 0.001% of these deaths.

According to Life Extension (see our library), for the first time in history we have the means to dramatically extend our healthy life span. Unfortunately the government spends relatively little on medical research, while billions of dollars are used to guard against terrorism. Several independent estimates of expenditures for defense and anti-terror will come to 754 billion in 2004. By contrast, the federal government has

allocated only 4.8 billion for cancer research and a paltry 2.2 billion for anti-aging research. Since, according to Life Extension, aging is the underlying cause of many diseases, including most cancers, the lack of funding for this type of research is hard to understand.

Cancer phobia has become so prevalent that hundreds of millions of dollars are spent each year on diagnostic procedures to rule out cancer. American Cancer Society urges that more Americans undergo these diagnostic procedures in the hopes of reducing mortality rates. Life Extension reports that several surveys have found that Americans would prefer to feel more secure knowing that cancer is more readily curable than feeling that we are completely protected against terrorists.

Cited are examples of FDA's denial of patients to receive advanced therapies. One instance in 2000 was a class of cancer drugs known as "epidermal growth factor receptor blockers" deemed by Life Extension to save lives. FDA did not approve them until 2004. Many cancer patients who might have benefited from these drugs over the past four years were of course prevented from doing so.

On January 26, 2004, The Wall Street Journal wrote an editorial about the delayed approval of Provenge. "We know that it works, and we know why it works. In any rational regulatory environment, that would be reason to speed Provenge to market. But this is the FDA we are talking about, the agency that sat on Iressa, another targeted cancer therapy, for months after an advisory panel recommended approval."

Life Extension reminds us that on a given day 6500 Americans will silently die from cancer, heart attack or one of the many other diseases of aging. You wont hear about this on the evening news. The media will cover stories relating to terrorism and isolated acts of violence though.

Mike Kulla-M2M Poughkeepsie.

PASSED AWAY **Mario P. Menelly**

It is with a deep sense of loss that I report the passing of Mario Menelly. Many of you knew Mario from his extraordinary work with diet and nutrition and the many alternative theories he used to treat his prostate cancer, his relentless efforts to educate men all over the country about prostate cancer. Mario spoke to our group several times.

I had the honor and privilege to know and meet Mario on many occasions and discuss many issues with him pertaining to prostate cancer treatment, education and advocacy. I considered him a close friend. I admired his knowledge which he shared, along with many precious hours of his time with so many of us. Words cannot express his courageous battle with PCa.

The world has lost a **"True Everyday Hero"** We all extend our deepest sympathies to his wife Ruthy and their children, we lost a true advocate for our cause but they lost a husband and a dad. May god bless you all. Below are the death notices, the first was in the local paper in Bellmore Long Island and the second one Harry Kessel posted on the internet.

Mario you will be missed by so many of us.

Mario P. Menelly, 51, of Wantagh, NY, on June 18, 2004. Beloved husband of Ruth. Loving father of Douglas, Melissa and Jeffrey. Brother of Louis DeVirgilio, Christine Toronzi and Richard Menelly. Son-in-law to Paul Plack. Friend to so many. You were so strong and never lost your sense of humor. We love and miss you so much. We know you are with God now and pray that you are at peace. We were so blessed with the time that we were given to be with you. Rest easy as we pray.. Interment, St. Charles Cemetery, Farmingdale. Mario, who was diagnosed with prostate cancer more than seven years ago, has been a volunteer and patient

advocate at the Education Center for Prostate Cancer Patients (ECPCP<\\@>aol.com). In lieu of flowers, contributions can be made to The Education Center.

On Friday, June 18th Mario Menelly lost his long fought battle with prostate cancer and passed away quietly at home under hospice care surrounded by his immediate family.

As some of you know, Mario was a good friend of mine and was also a friend and advocate for prostate cancer patients around the country and especially around the NYC metropolitan area.

He was active in many support groups and was a part time counselor for the Education Center for Prostate Cancer Patients (ECPCP) which is the organization Dr. Jim Lewis founded. His support, advice, and generosity of spirit will be missed by many throughout the country.

Harry Kessel PCa N.J.

ARNOLDS HEALTH FOODS

Purity Perfect Multi Vitamin are available along with many other supplements at Arnold's. He also offers a 20% discount (mention M2M) on all his Vitamins etc. **Call him at 845-462-6511 or visit Arnolds RT #376, New Hackensack Plaza, Poughkeepsie NY. 12603.**

Vitamin D Book Tells of the Dangers of Avoiding the Sun

Dr. Mercola's Comment:

Three months ago we did an interview with Dr. Michael Holick on his new book The UV Advantage. Dr. Holick is probably the top vitamin D expert in the world and you can read the interview we conducted below. As I said in a past newsletter, Dr. Holick has written the first book

about vitamin D that is written for the general public, The UV Advantage. This book is an incredibly important read for anyone interested in preventing numerous health problems and bettering their health, but is even more essential for those who follow the "experts" recommendations to stay out of the sun.

His new book is finally out and ABC News did a marvelous review of the book. They include an excellent three-page excerpt on this great book. Unfortunately, it is distributed over 15 pages on their site so it takes some clicking to get through, but it is well worth it for the read. Enjoy the interview.

1. Why did you write "The UV Advantage"?

I wrote the UV Advantage to disseminate the message that some exposure to sunlight is very beneficial to overall health and well-being.

2. Who would benefit from reading this book?

I believe that everyone who reads this book will benefit from its message. This is especially true for young and middle-aged adults who were brought up in a culture that recommended avoidance all sun exposure. This puts this group at high risk of vitamin D deficiency and many other chronic diseases associated with the deficiency.

In addition parents will be especially interested because it is now recognized that adequate vitamin D nutrition and sensible sun exposure during childhood not only will maximize the bone health of their children but may decrease their risk of many chronic diseases in life later including type 1 diabetes, multiple sclerosis, rheumatoid arthritis and common cancers.

3. What do you recommend to people who work indoors, have difficulty getting outdoors, or for whatever reason are unable to get sun exposure regularly.

Is there a substitute to the sun? It is reasonable for people who, for whatever reason, cannot take advantage of reasonable sun exposure to satisfy

their body's vitamin D requirement by taking a vitamin D supplement. Most experts, including myself, believe that at least 1,000 IU of vitamin D a day is necessary to maintain healthy blood levels of vitamin D in the absence of any sun exposure.

4. You mention that bright light therapy is effective for treating depression and SAD. Is this for the vitamin D, or is another component/result of the UVB rays responsible for the benefit? I ask because studies have found that low vitamin D may contribute to chronic fatigue and depression (1,2) and another study found that vitamin D was more effective in treating depression than using light boxes. Do you agree with these findings?

Bright light therapy is effective in treating seasonal affective disorder because of its effect on suppressing melatonin production in the pineal gland. However, often people during the winter suffer from malaise, muscle weakness, muscle aches and bone pain that often can exacerbate their depression. A study has been conducted demonstrating that vitamin D supplementation during the winter does help reverse some of the symptoms associated with SAD.

5. Is there any way to reduce sun damage, from previous sunburns for example, that's already been done?

There are ways of reducing photodamage from previous burns. I have included some of those approaches in my book.

6. You mention in "The UV Advantage" that you are not an advocate of tanning per se, however, for people who do not have access to regular sunlight, say during the winter months, would using a tanning bed for the sole purpose of gaining vitamin D be beneficial, or would vitamin D supplements or cod liver oil be a better choice?

For people who wish to tan, I recommend that they tan responsibly. They will benefit from the tanning process because it will enhance their skin's production of vitamin D. We recently conducted a study on tanners and nontanners and found that tanners had much higher and healthier blood levels of vitamin D compared to nontanners at the end of the winter and that their bone health was better.

For those who do not wish to tan and are concerned about vitamin D deficiency, taking a vitamin D supplement and/or cod liver oil that equals 1,000 IU of vitamin D a day should satisfy the body's vitamin D requirement. Whether there are other benefits from exposure to tanning bed radiation on β endorphin levels and other physiologic functions is not as well understood and obviously cannot be replicated by simply taking vitamin D.

7. If you could give readers one bit of advice from "The UV Advantage," what would it be?

The one bit of advice from "The UV Advantage" is that you should not be sun-phobic because it increases your risk of many serious chronic diseases. Consider the sun as a friend and use it sensibly i.e., take advantage of its beneficial effects while avoiding the damaging effects due to chronic excessive exposure.

8. What is your opinion of sunscreens and sunblocks? Should they be used, and if so, what type is best? Do you believe the chemicals in sunscreens can be harmful?

Sunscreens and sunblocks are important for preventing sun damage due to excessive exposure to sunlight. More importantly they prevent sun burning, which is considered to be a major cause of the most devastating form of skin cancer, melanoma. However, a sunscreen with an SPF of 8 when applied properly will reduce the skin's ability to make vitamin D by more than 95 percent.

Therefore, I recommend that people who are outdoors for only a few minutes need not wear a sunscreen. However, if they are going to be out for more than a few minutes they should take advantage of the beneficial effect of sunlight and then after those few minutes, as outlined in the tables in my book, they should topically apply a sunscreen with an SPF of least 15. I always recommend broad-spectrum sunscreen, which absorbs both the UVA and UVB.

There are always concerns about chemicals in any topical preparation that could potentially be absorbed through the skin into the blood stream and cause harm to the body. However, to date there is no evidence that the chemicals in sunscreens have any harmful effect.

Dr. Mercola's Comment: Although Dr. Hollick does not believe that sunscreens have any harmful effects, I don't believe in using them at all and advise avoiding them. One can avoid the damage from the sun by staying out of the sun during the harmful times from 10 a.m. to 2 p.m., staying in the shade during this time or wearing long sleeve shirts, long pants and a hat.

9. Do you have plans to write another book?

I do plan to write at least three additional books on skin health, hair health and bone health.

Related Articles:

**Sun Protects Against Cancer•
RDAs of Vitamin D Far Too Low•
Learn Why the Myth of the Sun Causing Skin Cancer Can Hurt Your Health•
Let the Sun Shine In (Especially When Pregnant)•
Why You Need to Have Your Vitamin D Level Tested Now•
Test Values and Treatment for Vitamin D Deficiency•**

References

1.Puchacz E, Stumpf WE, Stachowiak EK,

Stachowiak MK. Vitamin D increases expression of the tyrosine hydroxylase gene in adrenal medullary cells.

Brain Res.Mol.Brain Res. 1996;36:193-6.

Jim Kiseda Poughkeepsie M2M

Joke Du Jour

A doctor is walking down the street and he meets one of his regular patients.

"Mrs. Ginsberg, I haven't seen you in such a long time. How are you feeling these days?"

"Well, to tell you the truth Doctor, not so good. It hurts me over here. It hurts me over there. It hurts me up here. It hurts me down there."

"Mrs. Ginsberg, why don't you come into the office. We'll give you a complete check-up and see what we can do for you."

OK, Doctor...maybe next week, if I feel better."

Herm London-M2M Poughkeepsie

Survivors Day Event

Man to Man & Side by Side Volunteers

To whom it may concern:

I would like to take this opportunity to thank you for your contribution, which helped to make National Cancer Survivors' Day on Sunday June 13th, a wonderful success.

It was an important way for cancer survivors to celebrate their lives, and to enjoy a day of smiles and festivity with their family and friends.

Thank you again

Debbie Panetta

**Chair-National Cancer Survivors' Day
Committee**

**Administrative Director, Radiation Oncology
Vassar Brothers Hospital**

Popular Painkiller May Slow Prostate Cancer

Updated 6/11/2004 9:19:37 PM

By Jeanie Lerche Davis

June 11, 2004 -- The commonly prescribed painkiller Celebrex may slow prostate cancer growth, new research shows.

Drugs known as Cox-2 inhibitors, including Celebrex, have been shown to have anti-tumor effects on a variety of different cancer tissues, including colon, breast, lung, and prostate cancers, explains researcher J. Eric Derksen, MD, a urologist with the University of North Carolina at Chapel Hill.

Cox-2 inhibitors (commonly used to treat arthritis) relieve pain, inflammation, and swelling by blocking the body's production of an enzyme called Cox-2. These drugs, which also include Bextra and Vioxx, are less irritating on the stomach lining than earlier versions of anti-inflammatory drugs, like ibuprofen.

Recent research involving men treated for prostate cancer has shown especially promising results, says Derksen, who presented his findings at the American Society of Clinical Oncology's annual meeting this week in New Orleans.

In his study, Derksen enrolled 24 men who had rising PSA (prostate-specific antigen) levels, a marker for prostate cancer growth, despite treatment with radiation therapy or prostate removal surgery. The men took either 400 milligrams or 800 milligrams of Celebrex for one year. Their PSAs were checked at several points during that year. Celebrex had a positive effect on nearly all (92%) of the men after three months, reports Derksen. Overall, PSA declined in eight of the men and remained the same in three. The rise in PSA levels slowed in 11 men, indicating that their prostate cancer was growing more slowly. The two remaining men had no improvement at three months but the rise in their PSA levels slowed by one year.

It's a hopeful finding: The other option involves shutting down production of male sex hormones -- usually with medication -- which has not proven successful in slowing prostate cancer or improving a man's chances of survival. Also men in the early

stages of prostate cancer recurrence, such as the men in this study with rising PSA levels, usually have no symptoms. Therefore, shutting down production of male sex hormones could unnecessarily expose them to side effects, say the researchers.

"These results show that Cox-2 inhibitors may help delay or prevent [prostate cancer] progression in these patients," he writes.

SOURCES: American Society of Clinical Oncology 2004 annual meeting, New Orleans, June 5-8, 2004. News release, University of North Carolina School of Medicine.

Nelson Boudreaux M2M New Orleans

M2M POUGHKEEPSIE WILL BE IMPLEMENTING A NEW TIME CHANGE. OUR MEETINGS WILL BEGIN AT 6:30PM NOT THE USUAL 6PM. THIS CHANGE WILL TAKE PLACE OCTOBER 7, 2004. THE REASON FOR THIS CHANGE IS TO SEE IF WE CAN ATTRACT MORE NEW MEMBERS .

PLEASE NOTE

JULY is M2M POUGHKEEPSIE'S 11TH ANNIVERSARY. THANKS TO ALL OF YOU FOR MAKING THIS SUCH A SUCCESSFUL PROGRAM.

ATTENTION ATTENTION

OUR ANNUAL CELEBRATION OF LIFE DINNER will be HELD SEPTEMBER 30, 6:30PM at the Villa Borgese in Wappingers Falls. VOLUNTEERS ARE NEEDED TO COLLECT MONEY . E MAIL OR CALL Peter and Teresa Hardin hardin.pt@verizon.net 845-897-9667 for payment information.

Meetings and speakers for 2004

August--5 (TBA)

September--- 2 (TBA)

October----7 NYS Assemblyman Joel Miller

Nov,---4 (TBA)

Dec---2 (TBA)