



# POUGHKEEPSIE MAN TO MAN



*Prostate Cancer Education & Information Support Program since July 1993*

## Meetings to date 210

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.

December 10, 2009

Issue 12

### GUEST SPEAKER- Dr . Naeem Rahman

**Joint meetings of the Man to Man/Side by Side, the prostate cancer support and education programs sponsored by the American Cancer Society, was held Thursday, December 10, at 6:30 PM. Meetings are usually held in the Central Hudson Auditorium off of the Academy Street Exit, Off Rt 9, in Poughkeepsie.**

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- Program for December 10, 2009
- Newcomers & PCa 101
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- Vitamin D Musings
- Medicare Under Siege
- HT & Heart Attack
- Meetings and speakers for 2010

#### **Any Questions? We're here!**

Dennis P. O'Hara, Founder & Facilitator Emeritus.  
P/F-845-473-9827 e-mail: <iggy41@aol.com>

#### **Co-Facilitators:**

Jim Kiseda 845-223-5007 <jkiseda@optonline.net>  
Paul Totta 845-297-7992 <pmtotta@att.net>  
Herm London 845-831-3930 <hermlon@yahoo.com>  
Mike Kulla 845-635-1948 <Sue Saluga@aol.com>  
Frank Hildenbrand 845-454-8335 <fbhildenbrand@aol.com>  
American Cancer Society Information

1-800-ACS-2345 or WWW.Cancer.Org

#### DEC. 10, 2009 M2M SPEAKER

**Dr. Naeem Rahman  
Hudson Valley Urology  
NOVEL THERAPIES FOR  
PROSTATE CANCER**

Dr. Rahman spoke to our group in May 2009 about robotic surgery for PCa. He returned for this meeting to talk about new treatments for metastatic PCa after hormone ablation begins to fail ( testosterone is suppressed, but PSA still rises). This "refractory" condition usually occurs after a man has been on hormone blockade for a prolonged period of time. This condition is sometimes recognized as a PSA-only disease when the PSA rises but there may be no apparent bone lesions. The change of treatment is called secondary hormone manipulation.

Sometimes, simply removing Casodex from the regimen can cause PSA drop. Another treatment employs Ketocanazole, an anti-fungal agent,

which has reduced PSA by 50% in some patients. However there is a disadvantage in that Ketocanazole can interfere with adrenal gland function and must be administered with care. A new drug, Abiraterone, is still in phase 2 clinical trials but is very promising. A pill taken daily has been shown to drop PSA by 50-60%. The mechanism inhibits CPY17, a blood agent. Another drug still under study is MDV 100, a proposed replacement for Casodex.

**A** new LHRH inhibitor, DeGarelix, is similar to Lupron, Zoladex and Trelstar except that it doesn't have the PSA "flare" problem of the others.

Metastatic PCa typically goes to the spinal column and produces hormones which reduce bone density. Osteoporosis results with great risk for bone fracture. A bisphosphonate drug which has been around for some time, Zometa or zoledonic acid, has been used to change the bone behavior and reduce fractures. A new drug, Denosumab, is being acclaimed to be even better than Zometa and should be widely available soon.

In 2004, a new chemotherapy agent, Taxotare or Docetaxil, passed phase 3 trials and was an improvement over other chemo treatments, but still had side effects. The addition of Avastin or Revlimide (thalidimide related) helped extend survival by antiangiogenic action beyond the typical 3 months of Docetaxil. Atrasentan, another drug, is even better. Also, Lenolinamide blocks blood vessels feeding the cancer and is promising. In other words there are many agents under test which may extend life for PCa patients.

Lastly, there are immunologic treatments which are beginning to emerge which promise to extend life. One such treatment is Provenge where blood with Dendritic cells is taken from the patient and treated separately with Leukine to generate more dendritic cells which teach T cells to attack PCa as an invader. Provenge is near completion of clinical trials and can extend life by 3 years in some patients --- a start. Other vac-

cines in development are OMY-T1 (trials underway) and POX-virus derivatives where the resulting vaccine kills the PCa. All of these developments should make people feel encouraged that important developments for life extension in PCa patients are on the way.

**A** nurse from Hudson Valley Urology, Ann ScanDariato, RN., described the PCa clinical trials available at that facility. Currently, there are two phase 3 trials running on DeGarelix, the LHRH agonist which is free from PSA flare. Another trial is about to begin on Denosumab, the new alternative to Zometa which increases bone density. Other available trials may be reviewed on the internet or by calling the clinical trial department at HVU.

Paul Totta, M2M Poughkeepsie Co-facilitator

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### **Newcomers and PCa December , 2009**

Therer four new men. Due to our 101 person being ill, no info is available

**Herb Ilker PCa 101, Poughkeepsie M2M**

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### **Meeting Information**

Joint meetings 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 December 10, 2009 . There were 21 in Dec. including 4 new M2M members and 8 SXS.

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### **JOKE Du JOUR**

**An old M2M member lived alone in the country. He wanted to dig his tomato garden, but it was very hard work, as the ground was hard. His only son, Vincent, who used to help him, was in prison. The old man wrote a letter to his son, describing his predicament.**

**Dear Vincent,**

**I'm feeling pretty bad because it looks like I**

won't be able to plant my tomato garden this year. I'm just getting too old to be digging up a garden plot. I know if you were here my troubles would be over. I know you would be happy to dig the plot for me.

**Love, Dad**

A few days later he received a letter from his son.

**Dear Dad,**

Don't dig up that garden. That's where I buried the bodies.

**Love, Vinnie**

At 4 a.m. the next morning, FBI agents and local police arrived and dug up the entire area without finding any bodies. They apologized to the old man and left. That same day the old man received another letter from his son.

**Dear Dad,**

Go ahead and plant the tomatoes now. That's the best I could do under the circumstances.

**Love you, Vinnie**

**Mike Kulla, Co-Facilitator Poughkeepsie M2M**

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### **Response to Gamma Ray**

One item however that I think your readers should be aware of regarding gammagrams. The paragraph titled GAMMA RAY CAMERA does not mention that the 'decorating scheme' mentioned to make the tumors visible is injected radioactive isotopes which can CAUSE CANCER.

The whole body now radiates gamma rays and this is what the 'Gamma Camera' reads ---the radiation emanating from the patient. Injection into the bloodstream means that every organ (and every cell) in the whole body is affected, for many hours, until the isotopes are finally totally cleared from the body through the liver. This is the same as the 'BSGI' (Breast Scanning by Gamma Imaging) system used for detecting breast cancer and is nothing new (see article below). It has been used for taking pictures of various parts of the body for many years. For

prostate use, apparently the miniaturized rectal camera is the new addition.

The directions state that the attending operator does not need to get behind a lead shield as external radiation from the patient is minimal! How about the radiation WITHIN THE PATIENT??? The emitted radiation from the patient is intense enough however that a pregnant woman is not allowed to sit in the same chair for at least two hours after the patient leaves (the chair continues to radiate!). This radiation has a half-life of several hours, which means that the next day there is still appreciative radiation within the patients body. This is extremely toxic to the liver and as a result cannot be done in cases of hepatitis or if the liver is otherwise already stressed. It will probably be another ten years before we know the actual cancer increase from this tragic form of treatment. Meanwhile how many lives will be affected. A single diagnostic treatment is over \$2000.00!)

### **Harvey Kunz Facilitatr CARE Group in NJ**

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#### **VITAMIN D MUSINGS**

You have been flooded with information on vitamin D in these columns. Now that your well versed as to its numerous benefits, and your supplementing your D levels, I hope, you should be happy to fill your tool chest with even more.

The most conservative and sure way to get vitamin D is to briefly sunbathe with as much skin exposed as possible, at solar noon, when the sun is high enough in the sky so your shadow is shorter than you are. Just don't get burned and realize that summer sun makes vitamin D so fast you only have to stay out 10 to 30 minutes, depending on how fair you are. Washing with soap after being out in the sun reduces the amount of D you get. The sun makes little or no vitamin D during the colder months. Vitamin D sunlamps are the next best way to get it as they come close to reproducing the sun's rays

indoors. The best in-class, in-home UV lights are recommended by Joseph Mercola on his web site.

An alarming three out of four Americans are seriously vitamin D deficient (recent University of Colorado study). While 77% of Caucasians are in jeopardy, nearly all African-Americans (97%) need more vitamin D.

**Dr. John Cannell**, founder of the Vitamin D Council, introduced the hypothesis two years ago that influenza is merely a symptom of vitamin D deficiency. Dr. Joseph Mercola went one step further: Optimizing D levels is one of the best strategies for avoiding infections of ALL kinds, he said. In a new study involving 19,000 Americans with the lowest blood D levels, they are reported as having significantly more colds and flu.

Canada is one of the first countries to investigate the role of vitamin D in protecting against swine flu. Dr. Cannell reports that he can't get anyone in authority at CDC or NIH to listen to him about vitamin D and swine flu. Cannell describes several anecdotal reports appearing to support that high vitamin D levels protect against H1N1.

25-hydroxy-vitamin D or 25 (OH) D blood test is routinely used to diagnose vitamin D deficiency. Levels between 50 and 80 ng/ml are recommended. These are "natural" levels normally found in people who work in the sun. You can test your own vitamin D level for \$65 by getting a kit from Vitamin D Council.

Different labs use different testing techniques in regard to the hydroxy D test. The National Institute of Standards and Technology is coming out with standards for consistency and accuracy for vitamin D techniques. There are complications though, but it takes too long to get into.

In closing, I'm not getting into the importance of sufficient vitamin D levels for PCa. It's been beaten to a pulp in these pages. Worthy of mentioning is that vitamin D deficiency, expressed as different diseases, can be a real issue for infants and children. To learn more about this topic, go to "vita-

mindcouncil/johncannell" on the web. Contents of this article come from various sources.

**Mike Kulla, Co-Facilitator Poughkeepsie M2M**

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## Medicare Under Siege

Medicare, a government-run health insurance, aptly succeeds in covering a majority of M2Mers. We need, therefore, to keep informed about its viability. While arguments and disagreements rage about how to provide universal health care, lost in the noise is that Uncle Sam will soon be unable to pay the medical costs it's already on the hook for. Soon, Medicare will be paying out more in hospital bills than the premiums it will collect. The Fed is over 11 trillion in debt and rising. While these numbers are mind-numbing, they pale in comparison to Medicare's unfunded liability of 34 trillion. Compounding the problem is that what the fed collects in taxes has petered out in this recession.

As the country ages, Medicare consumes even greater chunks of economic output and will eventually overwhelm every other item on the budget! In the face of this pending train wreck, most politicians are shoving it under the rug (There's enough to worry about now).

Several of Medicare's problems are fixable but are so far not being addressed, such as rampant fraud estimated at 20% of its payout. Claims are submitted for nonexistent or bogus services. One of many examples is the pay out of millions of dollars for wheelchairs, canes and prescription drugs prescribed by dead doctors.

Another 20% of Medicare overpayment are to those with political connections. Congress is lobbied to enact legislation mandating Medicare to pay inflated prices for certain products and services that can be obtained for a fraction of the price in the open market. Just one example: the biggest overcharge is for prescription drugs. Under the Medicare Prescription Drug Act, Medicare is required by law to pay full retail drug

prices. See 8/07 Life Extension magazine for the "sordid details.")

The generic drug fiasco is another fixable expense. Take finasteride (proscar). It came off patent in 2006 and at the end of 2008 chain pharmacies were charging about \$3 a pill, or 8 times higher than the free market price, which includes independent assays of the ingredients quality, potency and tablet absorption, plus a reasonable profit margin. The high price of generic drugs is due to FDA over regulation. Congress needs to change this to allow lower-cost generics to be sold in the U.S. Log on to [www.lef.org/lac](http://www.lef.org/lac) to protest the fleecing of consumers, private insurance and Medicare by pharma interests.

The biggest reason Medicare is facing insolvency is that too many of our aging are getting sick. Many diseases of aging are preventable, but we're not putting our heads together to effectively address this issue.

A follow-up article will look at some solutions to the problems of waste and insensitivity inhibiting better health. **Partial source: Life Extension 9/09.**

**Mike Kulla, Co-Facilitator Poughkeepsie M2M**

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### **Hormonal Therapy for Prostate Cancer Increases Risk of Death**

Researchers at Brigham and Women's Hospital and Dana-Farber Institute in Boston have found that hormonal therapy is associated with an increased risk of death when used to treat prostate cancer in men who have a history of coronary artery disease leading to heart failure or a heart attack. These results are published in the *Journal of the American Medical Association*.

source

**Coping With Cancer Magazine  
September/October issue page 21**

# **FINAL** **NOTICE**

Due to rising cost of printing, distribution and the ease of e-mailing our newsletter, be advised that as of the year 2010, hard copies, of the Poughkeepsie M2M newsletter will no longer be mailed. So please send us your e-mail address **& if you are local or out of town,** if you are not already receiving our "E" newsletter. For those of you who do not have access to the internet, you can go to your local library, or a relative, or a local "E" coffee shop, or a neighbor and access the newsletter and print it out.

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**Send your e mail address to**  
**<IGGY41@AOL.COM>** and put in the subject box **e-news**. Lets get this done **ASAP, WE Will NOT EXTEND OUR DEADLINE!** We also have a web site that has all our back issues of M2M Poughkeepsie.

**Go To**  
**WWW.BOODROW.COM**

## Meeting Dates for 2010

- Jan-7
- Feb-4
- March-4
- April-TBA CHANGE OF LOCATION Not at CH
- May-6
- June-3
- July-8
- August-NO MEETING
- Sept-2
- Oct-7
- Nov-4
- Dec-9

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### <Other PCa Programs in our area>

#### **Support Program Meets in Kingston NY**

#### **Meetings for Prostate Cancer 101**

Meetings held on the First Tuesday of every month at 4:30 PM at the Hurley Reformed Church 17, Main Street, Hurley. For further information call Diane & Walt Sutkowski at (845) 331-7241, Arlene & Bill Ryan (845)- 338-9222

**MERRY  
CHRISTMAS  
HAPPY  
HANUKKAH**

**HAPPY  
KWANZA**

**A HAPPY & VERY  
HEALTHY NEW YEAR**

## A SPECIAL THANKS

We would like to wish you all a very Happy Holiday season and of course a Happy and especially Healthy New Year. In **July, 2010 M2M and SXS** will be in existence **17 years (YIKES)** What a journey we all have been on. Without your continued attendance and support at our meetings newly diagnosed men and their families would not have received the necessary information to make an informed educated decision how to best treat or not treat their PCa. Keep up the great work!!!!!! God Bless.

A special thanks to all the staff who help us out at the meetings (you know who you are); also to the staff at **ACS Syracuse** mailing room. We would like to thank ACS, Poughkeepsie, Kingston and ACS Eastern Division for their continued Invaluable support these 17 yrs.

**Merry Christmas & Happy New Year to all our facilitators.**

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### It's Winter time again in NY!!!!!!

#### **ATT: M2M Meeting weather cancellations**

In the future we will base our decisions whether to cancel M2M & Side by Side meetings dependent on what the school systems in our area do. When the authorities either delay or close the schools in our area, we will probably cancel. Call the ACS at 1-800-ACS-2345 to reach the operator or answering machine. Listen to the local radio stations; they will also announce cancellations of M2M meetings. You can also call our own hotline 473-9827 and listen to the message.