

AWAIIENESS

The "PCCN-Toronto" and "Side B"

**PCC & PCCN-TORONTO
CELEBRATING 25 YEARS**

DO IT FOR DADS WALK RUN

FATHER'S DAY - SUNDAY JUNE 16, 2019

2019



What are you doing this Father's Day, dads? Getting together with your family and celebrating *you*? That's terrific - have a great time!

However, *before* you do all that, how about getting together with many men and their families from your prostate cancer support group - **PCCN-Toronto** - down on the beautiful Toronto waterfront at **Ashbridges Bay Park** in the morning and going for a Walk together?

It's time for our annual **Father's Day Walk Run**, where we all celebrate the culmination of having spent a few months raising money for **Prostate Cancer Canada and our support group!**

This event will be over by noon, leaving you and your family more than enough time to celebrate "dad" together! And you will have spent the morning with many other people who raised much-needed money for research!

You can help us in two ways. The first is to join our PCCN-Toronto team and help us raise these funds by asking your relatives, friends, and business associates to support your efforts in this highly important cause!

Instructions how to do this are provided later in this article.

If you cannot become part of our team, we ask that you make a personal donation to one of our team members or directly to our

"team" in general. You will still be helping us reach our team goal!

Simply go to: doitfordads.com

Once there, click on "**FIND A PARTICPANT/TEAM**"; then click on "**Team Search**" and you'll see **PCCN-Toronto** listed there. Click on our team, and then you'll have a choice to a) **DONATE NOW**, or b) **JOIN THE TEAM**.

Whichever you choose to do, please follow the instructions to either complete your donation or join our team. If you were on our team previously, your personal information is still active, and you need to complete your **USERNAME** and **PASSWORD**. If you cannot recall what you used before, you might have to click **CREATE NEW ACCOUNT**, and, again, follow the instructions.

If you have any questions, you can contact me at 416-414-4961 or email aaronbacher@rogers.com

Prostate Cancer Canada and Prostate Cancer Canada Network-Toronto are both celebrating their 25th anniversaries this year!

In honour of these two major milestones, let's have our largest team *ever* to help us all raise our largest amount since becoming involved in this Walk Run.

It's easy to do that! All we need is your participation; so join our team or donate to our common cause - stamping out prostate cancer! We look forward to receiving your support. Thank you all!

MARCH

PCCN-Toronto Prostate Cancer Support Group

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"Raising prostate cancer awareness" - pccntoronto.ca

PCCN-Toronto & Side by Side

invite you to attend our

**Awareness
Night Meeting**

at the
**Toronto Botanical Garden
In The Garden Hall**
777 Lawrence Ave. East at Leslie Street

on Wednesday
May 29, 2019

at 7:30 p.m.

featuring

Claudia Aronowitz
MPH, CPCC, ACC
Coaching and Mediation

topic:

**"Change starts from within:
Live a life that matters."**

*A question period will follow.
All family members, partners & friends
are most welcome!*

FREE parking!

If you have any questions, please call us at
416-932-8820

Doors open at 7 p.m.

**2019 Meetings Benefit
North York Harvest Food Bank**

Please bring some non-perishable food with you to our Awareness Night Meetings, which PCCN-Toronto donates to the *North York Harvest Food Bank*.

Here is a list of their much-needed items. Please note that all expiration dates must be valid and canned goods cannot be damaged (dented). Thank you very much.

- | | |
|---|--------------------------|
| √ Canned fish & meat | √ Flour |
| √ Canned vegetables | √ Brown pasta |
| √ Canned fruit | √ Powdered milk |
| √ Cooking oil - canola or olive oil | √ Canned or dried beans |
| √ Cereals - high fiber | √ Rice - white & brown |
| √ Peanut/almond butter | √ Baby formula & diapers |
| √ Cookies (arrowroot, digestive, oatmeal) | √ Baby food & cereals |
| | √ Fruit juice - 100% |



www.northyorkharvestfoodbank.com

All our *PCCN-Toronto Man to Man Peer Support Group* meetings at Valleyview Residence are being supported by a grant from Janssen Pharmaceuticals.

We thank Stacey Silverberg and all the people at Janssen.

Our Awareness Night meetings at Edwards Gardens are sponsored by Astellas Pharma Canada, and we thank Karen Frantzke and everyone at Astellas.



The Board of PCCN-Toronto.

PCCN-TORONTO CELEBRATING 25TH YEAR!

Their names and faces have changed over the years, but they've all been bound together by one common thread: they were and are all prostate cancer survivors who willingly donated their valuable time to our support group.

First, it was to the Toronto Man to Man Prostate Cancer Support Group, and then to the Prostate Cancer Canada Network—Toronto (PCCN-Toronto) Support Group.

Some of the names from 1994 when we were founded, right up to today in 2019 (although we know that these are only *some* of the men) like Wally Hamilton, Ron Evason, Moe Wagman, Sol Dennis, Ray St-Sauveur, Jim Moran, Ron Nicholson, Norm Roth, Dick Arai, Ray Turner, Dick Sprenger, Lou Silver, Richard Lorie, Carm Griffin, Jim Norton, Bernie Shoub, David Lunt, Ray Kosan, Winston Klass, Aaron Bacher, Ron Benson, Stan Mednick, Jerry Garshon, Phil Segal, John Roth, Allan Lappin, Denis Farbstein, Keith Braganza, Ari Katz, and Darryl Radstake.

The ladies who were very active in Side by Side during this time were Roz Wagman, Ruth Sprenger, Aki Arai, Linda Garshon, Ronnie Bacher, and Barbara Mednick.

We have only had two "homes" in our first 25 years: 20 Holly Street and our current location at Valleyview Residence.

We are thankful to the many prostate cancer specialists who continue to support all our efforts, not only from the three hospitals where we volunteer, but from the entire Greater Toronto Area. We truly could not do everything we do without their ongoing encouragement and co-operation.

A quarter of a century! That's quite an accomplishment for our support group, and we would never have had such success without the amazing involvement of the many dedicated volunteers who have passed through our doors on their own personal journeys.

Thank you all very much!

PCC CELEBRATING 25 YEARS IN 2019!

This year is Prostate Cancer Canada's 25th anniversary. During these years, we've created hope and delivered on our promise. We plan to do more, much more.

In 1996, Prostate Cancer Canada awarded its first research grant to Dr. Laurence Klotz of Sunnybrook Health Sciences Centre. He used it to hire an additional staff member to create and manage a patient database. This step was crucial to the team's development of active surveillance, an approach that monitors low risk prostate cancer and only offers treatment to patients when they progress or are re-classified as being at higher risk.

Fast forward to today. This approach is now the world-wide standard of treatment for early stage low risk cancer. Together, we funded Canadian research that means millions of men around the world avoid the side effects of unnecessary therapy. We are rightly proud of that achievement.

Dr. Klotz, now an internationally recognized leader in prostate cancer research sums up our impact: *"There are many examples across the country of researchers who've received support and have gone on to make extremely important contributions, including the development of 3-D ultrasound, fusion targeting ultrasound MRI systems, biomarkers, and new drugs. As a result of the support of Prostate Cancer Canada, we now have an incredibly robust and dynamic prostate cancer research community. Canada punches way above its weight. I don't think there's any other country of comparable size that has achieved such stature in prostate cancer research."*

We made a difference. We continue to make a difference. Funding research is the largest and most visible part of what we do – but by no means the only thing we do. Prostate Cancer Canada is uniquely placed to support the varied needs of Canadians affected by prostate cancer now and in the future.

The Do it For Dads Walk Run is now PCC's longest standing event.

Marla MacLeod,
Manager, Corporate and Community Engagement

If you would rather receive this newsletter electronically, please email info@pccntoronto.ca and we'll remove you from our regular mailing list and add your name to our email list. Thank you.

PCCN - TORONTO / MAN TO MAN PROSTATE CANCER SUPPORT GROUP CELEBRATES 25 YEARS OF AWARENESS & SUPPORT

The late Wally Hamilton founded the Man to Man Prostate Cancer Support Group in 1994, with the tremendous help and foresight of Dr. John Trachtenberg of the Princess Margaret Cancer Centre.

The Canadian Cancer Society offered their office space at 20 Holly Street to us at no charge, and we hosted bi-monthly Peer Support Group meetings mainly for newly-diagnosed men there for years, until they closed their offices.

We also saw the development of another support group for the partners/spouses of the men who were diagnosed with prostate cancer. Women deal with this kind of medical crises differently, and this group became known as Side by Side.

They also met twice-a-month, in the same building at 20 Holly Street, but on a different floor than the men's meetings.

Aside from these peer-to-peer meetings, six annual Awareness Night Meetings were also organized and hosted by Man to Man volunteers at the Toronto Botanical Garden. Here, medical experts, such as urologists and radiation oncologists, were invited to give presentations on a variety of subjects all related to their specialty of prostate cancer.

When we moved from Holly Street, we were very fortunate to find meeting space available at Valleyview Residence, 541 Finch Avenue W., just west of Bathurst Street. That's where we currently hold our Tuesday night peer support meetings.

On April 1st, 2010, we joined Prostate Cancer Canada (PCC) and their network of prostate cancer support groups across Canada. Our new name became Prostate Cancer Canada Network—Toronto (PCCN-Toronto) as all the participating groups were renamed PCCN, followed by the names of their cities, such as PCCN-Brampton, PCCN-Newmarket, etc.

Founding member *Wally Hamilton became to first chairman of the group, followed by *Moe Wagman, *Ron Nicholson, Aaron Bacher (who served the longest, for eight and a half

years), Ron Benson, Winston Klass, and our current chairman Phil Segal.

We are still the only support group in Canada volunteering at local hospitals. We continue working with the staffs of the Princess Margaret Cancer Centre, Sunnybrook's Odette Cancer Centre, and the Gale and Graham Wright prostate cancer clinic at North York General's Branson site.

We counsel newly-diagnosed men (and their families) at these clinics, as well as follow-up with other men who are still on their personal journeys dealing with their prostate cancer diagnoses.

For the past twenty-five years, we have been blessed by having countless volunteers who have given of their valuable time to work with us in our various endeavors to help other men. We are forever in their debt and, as we continue moving forward with the "special work" we do, we are constantly in need of additional men to help us maintain the needs of our support group. *(Please see article on page 4.)*

The volunteers we require would counsel men in the hospital clinics, and, those who have had surgery could visit other patients who have had a radical prostatectomy. We ask that you attend our peer support meetings to familiarize yourself with our meetings and what happens there before you go out and represent our support group to others.

Over the years, although the names and faces are constantly changing, many men diagnosed with prostate cancer throughout the GTA attend our meetings. They are in need of counselling by men who have already been where they are headed, and that's where you can come in.

Unfortunately, we still cannot close our doors because a cure has not yet been found; therefore please join us and help us help others who truly need the assistance and support of the men from PCCN-Toronto!

***Deceased**

ASK THE HEALTH CARE TEAM

Prostate cancer and prostate enlargement (BPH) - what's the connection?

By Dr. Sharon Sharir MD, MPH, FRCSC

*Division of Urology, Humber River Regional Hospital
Assistant Professor, Department of Surgery, University of Toronto.*

There are several different problems that can affect the prostate gland in men. The three main ones are *prostate cancer*, *prostatitis*, and *prostate enlargement*, which is also known as *BPH* (Benign Prostatic Hyperplasia/Hypertrophy).

If you are reading this newsletter, then you likely already know something about prostate cancer. Prostate cancer may be managed in different ways, depending upon how aggressive or non-aggressive the cancer is, and whether or not it has spread. Prostatitis means inflammation of the prostate gland. This could be due to an infection of the prostate, although it is also possible to have inflammation without infection. BPH means significant enlargement of the prostate gland. Growth of the prostate occurs naturally during the lifetime of every male. In some men, the prostate might grow to a point where it is very large, and this enlargement may cause problems with urination; this is what is meant by the term BPH. This article will focus mainly on BPH and prostate cancer and not as much on prostatitis, though prostatitis will be mentioned briefly as appropriate.

BPH and prostate cancer may exist on their own, but they can also coexist in the same individual. They can also both run in the family. Prostatitis can coexist together with BPH, prostate cancer, or both.

Testosterone and related male hormones play a role in the development of both BPH and prostate cancer. Because these hormones appear to cause prostate cells to multiply, they result in an increase in the size of the prostate gland as a man ages, which can mean development of BPH in later years of life; their presence is also involved in driving the

development of prostate cancer. Removal of the effect of male hormones, usually with pills or injections, is one of the treatments for prostate cancer that has spread, and can also be used during radiation treatment of prostate cancer. This type of hormonal therapy would also have the side effect of decreasing BPH in the prostate as well. When a man does not have prostate cancer but does have BPH, these sorts of hormone treatments are not used, but there are other less potent hormonally-based medications that are sometimes used. The class of drugs known as 5-alpha reductase inhibitors (e.g. Proscar, Avodart) can decrease the size of the prostate in order to reduce problems from BPH, such as difficulty with voiding.

Another connection between prostate cancer and BPH occurs when a physician is trying to determine if a man might have prostate cancer. A high PSA value can be an indicator of a higher risk of having prostate cancer. However, PSA can also be elevated due to BPH or prostatitis, as well. In general, prostatitis can cause a very significant rise in a short period of time, which then eventually declines back to baseline levels. BPH tends to cause a slow increase over time as the prostate gland enlarges. Prostate cancer often causes a faster increase in the PSA. These different patterns of increasing PSA are considered when a man's PSA is high, and if the pattern appears to be most consistent with prostate cancer, this can be a reason to proceed with a biopsy in order to clarify if the rise in PSA is due to cancer rather than BPH or prostatitis.

Another area where there can be confusion between BPH and prostate cancer is in the development of urinary symptoms. Men are often surprised to learn that if they have problems with voiding, such as frequent urination or a slow urinary stream, these symptoms are unlikely to be due to prostate cancer, and more likely to be the result of BPH.

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ASK THE HEALTH CARE TEAM

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With BPH, the enlarged prostate squeezes the urethra (the urinary channel that leads from the bladder to the outside), thereby blocking the flow of urine out of the bladder, and sometimes causing voiding difficulties.

This type of problem can also occur when the prostate is inflamed from prostatitis. However, prostate cancer usually causes no symptoms early on; unless the cancer is in a later stage it is not likely to squeeze the urethra and be the cause of urinary symptoms.

Yet another source of potential confusion between BPH and prostate cancer is in the area of surgical treatment. One of the treatment options for prostate cancer that has not spread is surgery, which is called a *radical prostatectomy*. In this operation, the prostate is completely removed, and the bladder and urethra are sewn back together. If someone has BPH rather than cancer, this procedure is not used, because if there is no cancer it is not necessary to remove all the prostate tissue - it is sufficient to remove just enough to enlarge the voiding channel. By doing a different kind of operation to treat BPH, urologists avoid some of the potential side effects of prostate cancer surgery, such as incontinence or erectile function problems.

The most common surgery that is done for BPH is a *TURP* (TransUrethral Resection of the Prostate), or one of several other related techniques. In this procedure, a urologist goes in through the urethra and removes prostate tissue from the inside, thereby enlarging the urinary passageway, and allowing the patient to void more easily. If the prostate is too large for a TURP, a similar surgery can be done to remove excess prostate tissue, but instead of going through the urethra, there is an incision made on the abdomen, like is done with a radical prostatectomy for cancer. However, this operation, called a simple

prostatectomy, is still quite a different operation from a radical prostatectomy, because in this form of a TURP, the urologist cuts into the prostate and removes some of the prostate tissue, as opposed to the radical prostatectomy where the removed prostate is kept intact.

To make things even more confusing, there are situations where urologists do a TURP in a patient with prostate cancer. An example of this would be a patient who has locally advanced prostate cancer and is having difficulty voiding because of the cancer. In this case, a TURP might be performed, but the goal of this surgery would not be to cure the cancer, but rather to enlarge the urinary channel in order to improve voiding, in a similar way that would be done in a patient with BPH.

It can be complicated at times to sort out if a man has prostate cancer or just BPH. There is some overlap in issues related to symptoms, diagnosis, and even treatment to some degree. This is why it's important to see a medical professional, who can help to sort out these issues.

Is this where we are all heading?



Are you interested in becoming a PCCN-Toronto volunteer?

**Please call our support line - 416-932-8820
or email us at info@pccntoronto.ca**

"Awareness" newsletter - written and edited by Aaron Bacher unless otherwise noted.

Our on-going projects for 2019

AWARENESS NIGHT MEETINGS

These meetings are held at the **Toronto Botanical Garden (in the *Floral* or *Garden Hall*)**, at the corner of Lawrence Avenue East and Leslie Street, from 7:30 - 9:30 p.m. Leading medical professionals speak on a range of topics related to prostate cancer and then, following a refreshment break, answer your questions. Family members and friends are welcome to attend. If you are on our mailing list, a notice of each meeting will be sent to you. **PARKING IS FREE.**

Please bring some non-perishable food with you for the North York Harvest Food Bank. (See page 3) ???

<u>DATE</u>	<u>RM</u>	<u>SPEAKER</u>	<u>TOPIC</u>
Mar 27	G	Justin Lorentz, MSc <i>Sunnybrook Health Science Centre</i>	Cancer genetics and its impact on prostate cancer and potential treatments.
May 29	G	Claudia Aronowitz MPH, CPCC, ACC	"Change starts from within: Live a life that matters!"
Jul 31	G	Dr. Christopher Lim <i>Sunnybrook Health Science Centre</i>	PET scans, MRIs, CT and Bone Scans and imaging in general.
Sep 25	F	Dr. Neil Fleshner <i>Princess Margaret Cancer Centre</i>	Prostate cancer and the genes you were born with.
Nov 26	G	Dr. Danny Vesprini <i>Sunnybrook Health Science Centre</i>	Active Surveillance: the decision of when to treat.

*** Please note this meeting will take place on TUESDAY November 26th.**

Man to Man Peer Support Meetings - 7 p.m. to 9 p.m.

These meetings take place on the **FIRST** and **THIRD** Tuesday evenings of each month at the **Valleyview Residence**, 541 Finch Avenue West (just west of Bathurst Street on the Branson Hospital site) in the All-Purpose Room. They provide an opportunity for men to talk in a safe and comfortable setting about dealing with their diagnosis of prostate cancer.

Side by Side Peer Support Meetings

This program has undergone some recent changes. Our ladies' support group, although still active, now provides advice by appointment only. Please visit our website for more information.

Information

Trained volunteers, all prostate cancer survivors, will talk to you/your family in your home, by telephone or in the hospital. Each week our volunteers visit surgical patients at **Toronto General Hospital** (Thursday & Saturday) and **Sunnybrook Hospital** (Thursday), bringing them messages of hope and support.

Counseling

Our volunteers counsel men (and their families) in prostate cancer clinics at the **Princess Margaret Cancer Centre** (Monday through Friday), the **Odette Cancer Centre** (on Thursday), and **The Gale & Graham Wright Prostate Centre at North York General's Branson site** (on Tuesday afternoon).

PCCN - Toronto Board of Directors

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**Someone asked an old man: "Even after 70 years, you still call your wife 'darling, honey, or luv'. What's your secret?"
The old man replied: "I forgot her name a while ago, and I'm afraid to ask her!"**