



The knowledge gained at meetings and social activities helps to allay men's fears that arise during initial diagnosis and subsequent treatments and to dispel depression. We also consider other age related issues confronting men and their partners. The Support Group welcomes partners of men as active participants since the disease has an effect on families.

Group News

IMPORTANT NOTE

We now meet at the same time (6pm) but on the 2ND THURSDAY of each month.

THURSDAY, 11th November at 6pm **POST TREATMENT REHABILITATION** **Lorelle Silveira (Hear and Say)**

With over 20 years' experience working in the communications industry both in Australia and internationally, Lorelle decided to use her experience exclusively to the development of sustainable communications strategy. Lorelle is passionate about applying analytical and critical thinking to explore and develop innovative programs where people of all ages need access to world class audiology and hearing technology.

WHERE WE MEET

The group meets at 6pm on the 1st floor of the Mango Hill Community Centre (The Y) at 22 Linear Drive, Mango Hill on the 2nd **THURSDAY** of the month. It's the tallest building in Mango Hill. Entry is from the car park.

Refreshments are provided from 6pm.

LAST MONTH'S MEETING

Even if you've known about men's health issues for some time, you could certainly feel that you gained further knowledge from Peter Fairgray of Men's Health Down Under. Although he's a Pharmacist, his team provides most of the expertise that you previously thought you could only get from Doctors. And you don't have to wait for an appointment. Give Peter a call on 0450 995 907, whether it be for any incontinence or erection issues.

DID YOU KNOW?

Elvis was originally blonde. He started coloring his hair black for an edgier look. Sometimes, he would touch it up himself using shoe polish.

It took the creator of the Rubik's Cube, Erno Rubik, one month to solve the cube after creating it; as of June 2018, the world record is 4.22 seconds.

SOCIAL ACTIVITY

PUT THESE IN YOUR DIARIES NOW

Morning Teas-10am at Xander Café, Joyner Circuit, North Lakes

- Ladies on 25th November
- Men on 27th November

Thursday, 11th November lunch- noon at Basil & Vine restaurant, Burpengary. **RSVP 8th November**

Sunday, 12th December Christmas Picnic - 10am, Jamiesen Park, Scarborough. **RSVP 10th December.**

Watch for news of our end of year general meeting on 9th December which will be a social event.

DON'T FORGET THE RSVPs

Social Event Leader Joy is available for RSVPs on 3886 5511 or 0408 795 248 or petejoyham53@bigpond.com

**GET INVOLVED.
AND PUT HEALTH WORRIES ASIDE**

PHASE II CLINICAL TRIAL

While Australian prostate cancer survival rates are at an all-time high, more than 3,000 men in our community will still die from the disease each year, and we are yet to discover how to stop the disease from spreading.

Metastatic castration-resistant prostate cancer (mCRPC) is the name given to advanced prostate cancer when it stops responding to conventional treatments, such as hormone therapy.

Participants: Men with mCRPC who have progressed on novel anti-androgens +/- docetaxel (either in castration sensitive or resistant setting) and have significant PSMA-traceable disease will be recruited to the study in a 2:1 randomisation (67 patients in 177Lu-PSMA and ipilimumab/nivolumab and 33 patients in 177Lu-PSMA alone arm).

Exclusions: Men with prior autoimmune disease will be excluded.

Method: Men allocated to the 177Lu-PSMA alone arm

Despite our best efforts to treat mCRPC, median survival time is still unacceptably low, at just 12 to 35 months.

The PCFA ANZUP EVOLUTION Phase II Clinical Trial will study the effectiveness of a new type of treatment, combining Lu-PSMA with immunotherapy, to try and beat mCRPC.

The world-first randomised clinical trial will involve Australia's leading cancer centres and is expected to involve at least 100 patients from around the country.

will receive up to six doses of 177Lu-PSMA given every six weeks. Men allocated to the 177Lu-PSMA and ipilimumab/nivolumab arm will receive up to six doses of 177Lu-PSMA given every six weeks, in conjunction with four cycles of ipilimumab and nivolumab, followed by maintenance nivolumab alone, for a total of 24 months of treatment.

Measures: 12 months PSA progression free survival.

Participating sites: Cancer centres in Melbourne, Sydney, Brisbane, Perth, and Adelaide

DETAILS

Full-title: A randomised phase II trial of Radionuclide 177Lu-PSMA Therapy versus 177Lu-PSMA in Combination with ipilimumab and nivolumab for Men with Metastatic Castration Resistant Prostate Cancer (mCRPC).

Aim: To compare outcomes from 177Lu-PSMA given as a single agent with 177Lu-PSMA provided in conjunction with ipilimumab and nivolumab.

are expected to take part, with the possibility that additional centres may join the trial at a later stage.

Recruitment for the trial is expected to commence later this year.

You can stay updated via our monthly e-news and social media pages.

Email enquiries@pcfa.org.au



The clinical treatment of prostate cancer in Australia has significantly improved in recent years, proving the value of ongoing research and new standards of care.

For the first time, the report found that transperineal biopsies were performed more frequently than other forms of biopsy, which is an important step towards minimising the risks of harm from invasive procedures.

Every time I cry they stick a boob in my mouth



PCFA has highlighted unacceptable gaps in the current guidelines, which may be contributing to late diagnosis and increased risks of death.

“Our research shows around 75% of Australians do not know the guidelines, 70% of men don’t know the symptoms of prostate cancer, and 87% of us don’t understand prostate cancer stages at diagnosis,” says PCFA’s CEO, Professor Jeff Dunn AO.

“This is an alarmingly high level of unawareness that delays early detection and diminishes population-wide survival prospects.”

Lack of community and individual awareness can make it harder for newly diagnosed men to fully understand their treatment options, resulting in poorer quality of life and survivorship outcomes:

Australia has one of the highest incidence rates of prostate cancer internationally, with one in every six Australian men likely to be diagnosed during their lifetime.

“Worryingly, only 36% of Australian men are diagnosed at Stage 1 of the disease, when it is easier to beat, and the mortality rate in regional areas is 24% higher than the Australian average.”

New research set to improve the lives of prostate cancer survivors

Australian men and families impacted by prostate cancer are set to benefit from a world-first trial of a new survivorship care model, to be led by PCFA CEO Professor Jeff Dunn AO.

“Prostate cancer is the most common cancer diagnosed in Australian men, with more than 230,000 men alive today after a diagnosis,” Professor Dunn said.

“While survival rates have never been better, we now have more men diagnosed with prostate cancer living much longer, therefore the focus on survivorship care after treatment has never been more important.”

Hormone therapy is widely used in the treatment of prostate cancer, with between 30-50 per cent of all men diagnosed with the disease undergoing the treatment.

Although it slows disease progression and increases survival, hormone therapy can cause loss of muscle mass and bone density, sexual dysfunction, and other chronic health conditions including cardiovascular disease and diabetes.

“In addition to the substantial physical side effects, the supportive care needs of men on hormone therapy are not adequately addressed or treated right now, with many men experiencing unmet informational, psychological, and sexual help needs,” Professor Dunn said.

“Of concern, compared to men with prostate cancer who are not on hormone therapy, these men are more likely to develop mental health issues, such as depression and anxiety, and are at a higher risk of suicide.

“The project will vastly improve our understanding of how specialised support can improve quality of life and survivorship outcomes for men on hormone therapy, who have had their needs ignored for too long.”

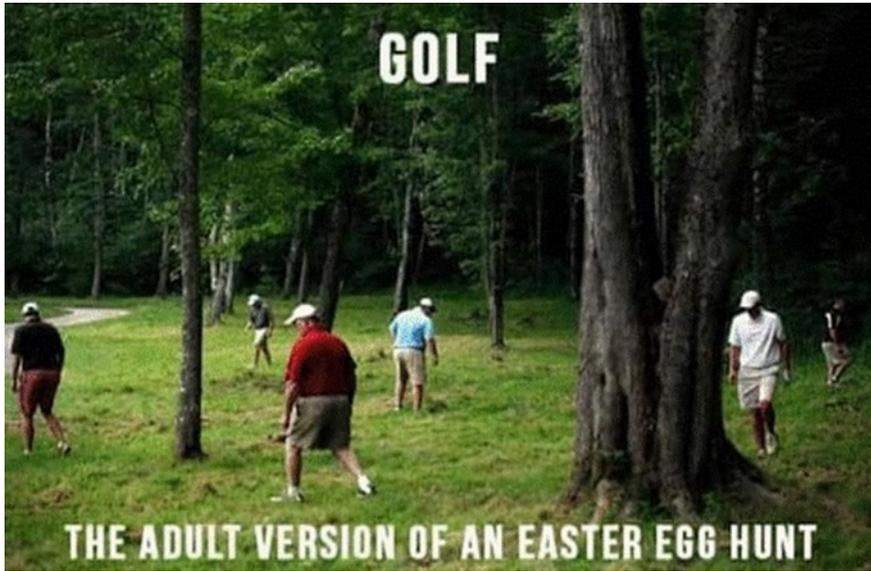
Here’s another phrase most people will be able to relate to. If you’re feeling a strong desire to lie down or stay in bed, you’re having a case of Clinomania. This word emerged in psychiatric papers of the late 19th century, with an 1890 article defining it as “the passion of staying in bed.” So, the next time you feel like sleeping in on the weekend, you have an official (and diagnosable) excuse.

1. What did Aesop write?
2. What is the longest bone in the human body?
3. What is to cats as canine is to dogs?
4. In which 1940 film does Mickey Mouse play the apprentice of a sorcerer?



5. What city in Italy was once ruled by the Medicis?
6. What name is shared by a church receptacle and a typeset of one particular style?
7. What name is given to a young horse, typically under a year old?
8. Name a well-known Italian sports car manufacturer.
9. What is Japan’s most famous mountain?
10. What name is given to a long, narrow inlet of the sea between cliffs, typically in Norway?
11. Which British journalist was famous for a series of 1977 interviews with Richard Nixon?
12. What is the nickname of Prince Andrew’s ex-wife?
13. To which species does Tinker Bell belong?
14. What wading bird is famous for its pink plumage?

1. Fabrice 2. Ferrut 3. Felino 4. Fantasia
5. Florence 6. Font 7. Fool 8. Ferrant
9. Fuji 10. Ford 11. Frost (David)
12. Fergie 13. Fairies 14. Flamingo



Hugh Hefner became a multi millionaire staying home in his jammies...
I'm not having the same result

Irish Craic and Humour
What did our parents do when they were bored with no Internet?
 Irish Craic and Humour
I asked my 18 brothers and sisters, and they didn't know either.
 irishcraicandhumour.com

Did you know that Doctor's sloppy handwriting kills more than 7000 people every year

Don't overdo it with stories of how it was when you were **young**.
 Young people have already "deleted" the previous century.

MY WIFE SAID THAT IF I DON'T GET OFF MY COMPUTER AND HELP WITH THE DISHES, SHE'LL SLAM MY HEAD ON THE KEYBOARD, BUT I THINK SHE'S JOKINDSG67SGHI3DHGJ RE7490DNDWHK3-2J4H37SHDUDKJI SD877HR8SKO20A3Y3H3J3UHU338JE SU83J8R

- GROUP MANAGEMENT**
- Group Leaders-** Fred Travis & Peter Ham
 - Treasurer:** Peter Ham
 - Social Events** – Joy Ham-at petejoyham53@bigpond.com or 3886 5511
 - Membership Officer**—Mark Broughton
 - Speaker Acquisition**—Tim McNickle
 - Welfare Officers**—Mark Broughton
 - Induction Officers (Men)**- Brian Stegman, Garry Dingley & Lindley Deslandes
 - Induction Officers (Ladies)**-Penny Millard & Joy Ham
 - Mailing Officer**-Brian Stegman
 - Expo Officer** – Larry Hamilton
 - Shirt Acquisition**—Joan Penman
 - Minute Officer**—Jenny Gehrke
 - Group Telephone:** 0435 119 628
 - Group email:** mbrpcsg@gmail.com
 - Group Website:** www.prostatesupportgroup.org



- THIS MONTH'S QUOTES**
- Be careful about reading health books. You might die of a misprint— Mark Twain
 - Diplomacy is the art of telling people to go to hell in such a way that they ask for directions – Churchill
 - It's impossible to get anything made or accomplished without stepping on some toes. Enemies are inevitable when one is a doer – Norma Shearer