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Winter 2024

AWARENESS

Prostate Cancer Support Toronto

FROM THE HEALTH CARE PROFESSIONALS

I'm pleased to welcome this feature back to our PCS Toronto newsletter. The inclusion of submissions from the medical professionals helps to keep us, the readers, up to date in our information base and our understanding of current prostate cancer treatments and technologies. For this issue, we welcome Dr. Danny Vesprini, MD, MSc, FRCPC, a radiation oncologist at the Sunnybrook Odette Cancer Centre and a faculty member in the Department of Radiation Oncology at the University of Toronto. As you read about his chosen topic, you'll discover, as I did, that today's "technological explosion" in radiation therapy provides great promise for the future of prostate cancer treatment. Enjoy the read!

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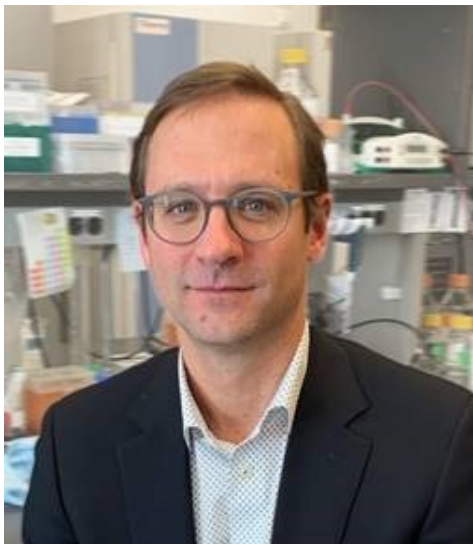
For more information,
go to:
<https://pcstoronto.ca>

TECHNOLOGICAL ADVANCES IN RADIATION THERAPY - A BRIEF HISTORY

By Dr. Danny Vesprini

Technology advances so quickly now that we have become immune to the wonder that it should instill inside of us.

Take the mobile phone as an example. It wasn't that long ago (at least for most people reading this newsletter) that the mobile phone was essentially a box the size of a small suitcase that weighed over 10 kilograms. It took a decade for that to evolve into a small handheld unit (the flip-phone of the mid-1990s) and then another decade until the first real "smart phones," such as the iPhone, arrived.



Dr. Danny Vesprini

Now it is expected that essentially every year a new version of your preferred smart phone is released with significant improvements in the technology, speed and functionality – and we don't even bat an eyelash at the incredible speed at which this technology advances. Radiation therapy has experienced a similar technological explosion. From what was once thought to be "cutting edge" radiotherapy using the element Cobalt 60 as the radiation source, to the development of linear accelerators where an electron is accelerated through oscillating electric fields to produce high energy X-rays, the hardware of radiation therapy has dramatically evolved.

Computer systems and software have also advanced, allowing more precise ways to deliver treatment. Today, sophisticated computer algorithms can "inversely plan" radiation treatment, taking the doctor's ideal radiation plan and finding a way to get to it by changing each small part of the radiation beam one beamlet at a time.

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TECHNOLOGICAL ADVANCES IN RADIATION THERAPY - A BRIEF HISTORY (continued)

We also have the widespread use of Intensity Modulated Radiation Therapy (IMRT) and Volumetric Modulated Arc Therapy (VMAT). These combined hardware and software advances have resulted in today's incredibly precise delivery of radiation through Stereotactic Ablative Body Radiotherapy (SABR a.k.a SBRT), which has revolutionized prostate cancer treatment, bringing about higher cure rates with very low long-term side-effects compared to previous technological advancements.

Just like the iPhone, we've seen incredible leaps in radiation treatment technology in much shorter time frames.

We are now entering the MRI-guided adaptive radiation therapy era – with treatment planned and adapted daily using novel technology such as an MRI-Linear accelerator (MR-Linac for short), which allows us to deliver radiation while the patient is inside an MRI machine so we can image simultaneously during treatment. This ability to see the cancer while we are treating it with radiation dramatically increases our precision and ability to adapt treatment to avoid normal organs in the area and decrease side-effects in real time.

If you had told me 15 years ago when I started as a young oncologist that a MR-Linac was possible, I would have laughed in your face. Not to get all “physics-y” (yes, I know that is not a real word), but the idea that one could predict the path and distribution of a negatively charged particle (the electron, the basic energy of radiotherapy) in the magnetic field of an MRI machine was hard to believe possible. However, thankfully, there are a lot of incredibly brilliant physicists and engineers in this world. They made that impossible idea possible, and the MR-Linac is now treating cancer patients around the world.

TECHNOLOGICAL ADVANCES IN RADIATION THERAPY - A BRIEF HISTORY (continued)

The MR-Linac will allow us to further improve cancer radiotherapy – and prostate cancer is centre stage.

The majority of people today who are diagnosed with prostate cancer at an early stage are cured – whether they choose surgery, brachytherapy or external beam radiation – so the emphasis on research should be on improving the quality of life of those who are treated. Technology such as the MR-Linac will help us dramatically improve our precision and decrease side-effects.

An ongoing trial at Sunnybrook is attempting to do just that. DESTINATION-MRL is an innovative trial that uses the MR-Linac to increase radiation dosages targeting the prostate cancer to ensure (if not improve) cancer control. By simultaneously viewing the procedure on the MRI, however, doctors can also de-escalate the radiation dose to the rest of the gland to decrease side-effects related to the bladder, rectum and sexual function. Such an approach may completely change how we treat prostate cancer in the future.

Although we may think we have reached the pinnacle of technological progress, I am sure it will continue to improve. What's next? Undoubtedly the integration of artificial intelligence (AI) is high on the list. AI might improve the identification of those who need to be treated, what treatment is best for which patients and, in radiotherapy, could help improve how we personalize treatment and adapt to accommodate the response (or not) of the tumour – ultimately allowing for maximal cure rates while minimizing side-effects.

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TECHNOLOGICAL ADVANCES IN RADIATION THERAPY - A BRIEF HISTORY (continued)

And certainly, AI will help make possible advances in other technologies that currently seem impossible and will open up possibilities that we haven't even thought of yet.

There is much to look forward to and, if we use the example of how the technology of phones has logarithmically advanced, it is probably just around the corner.

Dr. Vesprini is a radiation oncologist at Sunnybrook Health Sciences Centre in Toronto, an assistant professor in the Department of Radiation Oncology at the University of Toronto, and a medical advisor to PCS Toronto. His clinical interests are in the treatment of prostate and testicular cancer. In his research, he focuses on prostate cancer prevention, the screening and treatment of BRCA1/BRCA2 mutation carriers, and the identification of genetic biomarkers that predict aggressiveness and progression of prostate cancer in men being followed on an active surveillance protocol.

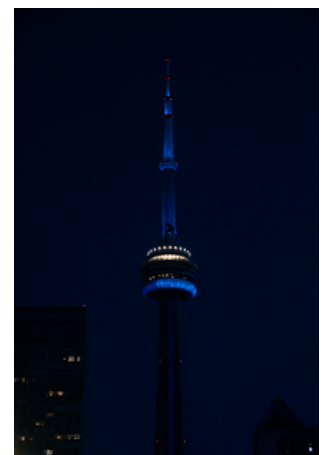
PROSTATE CANCER AWARENESS MONTH - SEPTEMBER 2023

On September 1, 2023, the City of Toronto assisted Prostate Cancer Support – Toronto, to start the Prostate Cancer Awareness Month, which takes place every September.

Several PCS-Toronto members and spouses met at the Toronto City Hall, where staff of the Protocol Office were of great assistance in preparing the flag raising event.

Councillor James Pasternak welcomed the group with a moving speech and assisted with the raising of the Prostate Cancer Support - Toronto flag.

A number of landmarks in the City were lit up in blue that evening, including the “TORONTO” sign at Nathan Phillips Square, the CN Tower and Casa Loma.



CELEBRATING 30 YEARS, SPECIAL LIVES AND OUR ANNUAL FATHER'S DAY WALK-RUN

On May 26 of this year, Prostate Cancer Support (PCS) Toronto will mark exactly 30 years since its original founders gathered in the old board room of the Toronto Hospital to discuss forming a support group for men newly diagnosed or living with prostate cancer.

This year, the PCS Toronto board hopes to celebrate this momentous milestone with a special event. Stay tuned for details.

Originally known as Man to Man, the group took its name from a U.S. prostate cancer support group that was established in 1990. According to a short history from that time discovered by board member Ron Benson, the founder of the U.S. group assisted the Toronto organizers with advice, written materials and “hard-earned knowledge, which saved a lot of time in getting our support group started.”

The group also received great support from surgical oncologist Dr. John Trachtenberg from Princess Margaret Hospital, the Ontario Division of the Canadian Cancer Society and Metropolitan Toronto Region.

The original board members were chairman Wally Hamilton, vice-chairman Peter Gow, vice-chairman Al Philbrook, secretary-treasurer Joe Feldman, and directors Tom Keys, Morris Wagman and Sol Dennis. Honorary advisors were Patrick Vernon and Bill Mandel.

Over the years, the group has gone through two name changes. In 2011, it became PCCN (Prostate Cancer Canada Network) Toronto, when it joined forces with the now defunct charity Prostate Cancer Canada (PCC). In 2020, PCC merged with the Canadian Cancer Society and the group was forced to drop its name and logo.

CELEBRATING 30 YEARS, SPECIAL LIVES AND OUR ANNUAL FATHER'S DAY WALK-RUN (continued)

Prostate Cancer Foundation British Columbia (PCFBC), which was an umbrella group for the B.C. support groups, welcomed the PCCN groups and later formed Prostate Cancer Support (PCS) Canada. In turn, our group adopted its new name, PCS Toronto.

For many years, the organization also included a separate support group for caregivers known as Side By Side. It continues to offer a support group for men with advanced prostate cancer and their caregivers known as The Warriors.

Ever since the PCC years, the annual Father's Day Walk-Run has been the group's largest annual fundraiser. The event has been smaller since the pandemic, but will be held again this year on Sunday, June 16. Fundraising will begin in the spring. Please stay tuned for details and consider getting involved or donating.

In the spirit of our special anniversary, PCS Toronto has set up an In Memoriam page on its website, www.pcstoronto.ca, to honour those who have passed on who made a significant contribution to the organization over the years. Most did not die of prostate cancer. If you notice a name missing that should be there, please let us know.

If you notice a name missing that should be there, please let us know. For now, in great appreciation, we pay tribute to the following individuals:

- Wally Hamilton (founder and chairman)
- Moe Wagman (chair)
- Roz Wagman (Side By Side member)
- Bill Gow
- Al Philbrook
- Joe Feldman
- Ossie Roberts
- Rolf Kroger

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CELEBRATING 30 YEARS, SPECIAL LIVES AND OUR ANNUAL FATHER'S DAY WALK-RUN (continued)

- Tom Keys
- Sol Dennis (vice-chair)
- Patrick Vernon
- Bill Mandel (early member and hospital volunteer)
- Ron Nicholson (chair)
- Stan Mednick (board member)
- Aaron Bacher (chair)
- Ray Kosan (regular attendee)
- Bill Sceviour (board member)
- Rudy Phillips
- Maurice (Maury) Budin (regular attendee)
- Jim Moran (board member)
- Lise Moran (Side by Side leader)
- Bill Hofstetter
- Harry Lockwood (regular attendee and facilitator)
- Tino Cotaras (regular attendee)
- Dick Arai (board member)
- Leo Spindel (regular attendee and facilitator)
- Norm Roth
- Ray St-Sauveur (board member)
- Richard Lorie (board member and treasurer)
- Jerry Stevens (regular attendee)
- Ray Turner (board member and treasurer)
- David Lunt (regular attendee)
- John Dell (regular attendee)
- Ken Hunter (regular attendee)
- Bill Lifchus (board member)
- Glen Tolhurst (regular attendee and facilitator)
- David Fine
- Gordon Burchill

PCS - TORONTO CO-CHAIR RECOGNIZED FOR VOLUNTEER SERVICE

By Denis Farbstein

On Tuesday, Nov. 7, 2023, 101 recipients and their families were present to receive Ontario Volunteer Service Awards at a ceremony held at The Symes, a banquet hall in The Junction area of Toronto. The recipients were honoured for volunteer service in increments of five years up to 50 years.

I was honoured, excited and humbled to be recognized for my 10 years of volunteer service at the Odette Cancer Centre at Sunnybrook Health Sciences Centre. I try to be a positive role model when peer mentoring men and their families so that they can make an informed family decision in treating prostate cancer.

I am very fortunate that I am treated as a valued team member at Sunnybrook, working with oncologists and providing patients with emotional support, good information and the opportunity to speak with other PCS Toronto members through Zoom, in-person meetings and/or our telephone support line.



THE WORD IS OUT!

PCS Toronto pamphlets are now in nine hospitals in the GTA.

With the new addition of Credit Valley Hospital in Mississauga, PCS Toronto is continuing to reach out past the city limits.

Our literature is also available just north of the Toronto border at Cortellucci Vaughan Hospital and Mackenzie Richmond Hill Hospital. In suburban Toronto, add to the list Humber River, Michael Garron, Sunnybrook Health Sciences Centre and North York General, with the latter two also having PCS Toronto volunteers who peer mentor men and their families. To round out the list are Toronto General and the Princess Margaret Cancer Centre.

We thank each and every one of these hospitals for allowing us entry to share good information so that men, alongside their families, can make the treatment choice that's right for them.

AWARENESS NIGHT ADDRESSES SEXUAL RECOVERY AFTER PROSTATE CANCER

If Venus was the goddess of love, then VENIS could well improve the love lives of many prostate cancer survivors, Alberta Health Services nurse practitioner Reanne Booker told a large Awareness Night audience during a very engaging and encouraging Zoom session in November.



VENIS stands for very erotic, non-insertive sex, and the techniques and toys associated with it can potentially open a whole new world of mind-blowing sensual pleasure that doesn't involve intercourse, said the sexual health expert.

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AWARENESS NIGHT ADDRESSES SEXUAL RECOVERY AFTER PROSTATE CANCER (continued)

In a perennially popular topic for Awareness Nights, Booker's message was wonderful news for survivors who struggle with erectile issues as a result of their treatment.

"There are so many things you can do that don't involve an erection," she said. "If something isn't working, try something else. There's a lot that can be done."

It was one of many suggestions in a presentation packed with helpful advice. Couples who are really struggling with sexual frustrations in their relationship post-treatment may find counselling helpful, said Booker. As always, good communication between partners is key. But other remedies for sexual dysfunction may be worth trying.

PDE5 inhibitors like Viagra and Cialis are often the first line of recourse, she noted, but they often don't work if there has been erectile nerve damage.

For ED, she noted, some men have found success with devices like The Elator or good quality vacuum pumps, which can be 90- to 100-per-cent effective.

So-called penile vibratory stimulation (PVS) to improve blood flow can also improve erectile functioning, she said. Suitable vibrators include the Hot Octopuss brand of devices, and other products found on websites such as we-vibe.com, lelo.com and ohmibod.com.

Looking ahead to this year, PCS Toronto's Awareness Night committee is busy finalizing it's lineup of interesting speakers for 2024. Stay tuned to the PCS Toronto website (pcstoronto.ca) for a full list, which will be posted soon.

PSA TESTING IN ONTARIO: LET'S CONTINUE THE CAMPAIGN AND SAVE LIVES

By Doug Pritchard

As many readers will know, there is no general PSA testing in Ontario – and the \$30 charge can be a barrier for some men who might want screening.

This restrictive policy was last reviewed by Health Quality Ontario's Health Technology Assessment branch in 2015 but is now outdated as big research trials have been completed and the incidence of metastatic prostate cancer is rising. Anyone can ask for a new assessment using an easy-to-use form.

If Health Quality Ontario takes up the request for a new assessment, it can take a couple of years for them to complete a review and make recommendations to the Ministry of Health. Still, it seems worthwhile and I have submitted a request.

To find the relevant reports, go to the Health Quality Ontario website (hqontario.ca) and search for "Prostate Specific Antigen-Based Population Screening for Prostate Cancer."

The recommendation document is a few pages and is the most readable. The supporting documents are the full reports and are mostly too technical for non-medical people. But if you're more conversant than the average person, you could give it a go. It's from May 2015, so they may be open to doing a follow-up review – especially if there's new evidence.

You can find the suggestion form at this URL: <https://hqontario.ca/Evidence-to-Improve-Care/Health-Technology-Assessment/Submit-a-Suggestion-for-a-Health-Technology-Assessment-Topic>. It's supposed to be simple enough for anyone to use.

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PSA TESTING IN ONTARIO: LET'S CONTINUE THE CAMPAIGN AND SAVE LIVES (continued)



On the suggestion form that I filled out, I argued the case for a return to general PSA testing in Ontario under the following headings: metastases, a reduction in over-diagnosis of PCa patients, quality-of-life issues, increasing life expectancy in Ontario, racism and sexism.

I invite and encourage you to also fill in a suggestion form to build momentum for Health Quality Ontario to do another review. It really is a matter of life and death.

A REPORT FROM THE 2023 SUPPORT HUB CONFERENCE

By Denis Farbstein

On Oct. 28, 2023, Prostate Cancer Foundation Canada (PCFC) hosted a 2 ½ hour conference via Zoom. Support groups from nine provinces and one territory were represented.

PCFC Executive Director Leah Lariviere began the conference by sharing some introductory remarks about the status of PCFC in Canada. Support Services Manager Richelle Green then divided the audience into four breakout sessions that focused on five discussion topics: the assessment of products and services, the impact of Zoom meetings, strengthening the network of support groups, improving communication and collaboration, and delivering core products and services.

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A REPORT FROM THE 2023 SUPPORT HUB CONFERENCE (continued)

Later, group leaders from these sessions were given seven minutes to discuss the main points from each breakout session with their groups. At a later date, each group received summaries of the main points discussed during each session.

Next, Jo-Anne Phillips, who runs Prostate Cancer Moncton along with her husband, was joined by motivational speaker and author Glenda Standeven, a cancer survivor and amputee with two Olympic silver medals, to speak about how they support their own communities. There was much valuable discussion after this presentation.

Lastly, Peter Fairey, chair of the PCFC board of directors, introduced the members of the executive.

This conference was a very successful event. Like myself, there were many first-time attendees present. In conclusion, after having attended this conference, I believe I have gained a better understanding of the difficulties that some of our fellow support groups encounter. PCS Toronto is very fortunate that we have a solid support base with attendees who meet on both Zoom and in person.

In total, 23 people attended the conference, including four first-timers and four women. I would like to extend a personal thank you to Richelle Green for providing me a script to emcee this event.