



POUGHKEEPSIE MAN TO MAN



Prostate Cancer Education & Information Support Program since July 1993

April 7, 2005 Issue 4 (Meetings to date # 155)

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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.

PROGRAM FOR APRIL 7, 2005

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A 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 April 7, 2005 in the Vassar Brothers Medical Center (VBMC) Tower, Auditorium-6, In Poughkeepsie, NY. There were 85 attending.

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>**

Douglas Menelly's Talk "Take Control of Your Destiny" & Dr. Ken Chu Chief Physicist at VBMC, Dyson Cancer Center, spoke on History of Radiation Therapy and IMRT

We would like to thank Doug and his Mom, Ruth Menelly for driving such a long distance to tell us about the late Mario Menelly's battle with PCa.

Dr. Ken Chu's talk cleared up much of the mystique on IMRT and was very informative and candid.

You can view some of Doug's powerpoint presentations at the end of our newsletter. Also Check out the flyer Doug left. Doug will climb a mountain for PCa research. Send a donation or, better yet, volunteer to join him and others to make the climb. Dr. Ken Chu's presentation will be published next month.

PIZZA PARTY

Our Pizza Party was a grand slam! Thanks to Anthony Fischetti, VBMC chef and his staff for feeding and serving us. Thanks also to Debbie Panetta and Ken Chu for making all of the arrangements; Sandi Cassese for her continued support of our M2M & SXS programs, and to all the staff at VBMC who helped make our meeting a success.

SUMMARY OF RECENT SURVEY RESULTS

Part 1

Seventy-eight of you answered the survey. Results are presented in two different articles as there is too much to absorb in one presentation.

The first question asked to rank your preference as to the programming you would like at M2M meetings. Thirteen topics were up for grabs. You ranked a first choice for the following topics in order of preference: Tests (markers) to monitor your condition (46), Recent treatments (44), Supplements, diets and exercise (44), Recent advances in hormone treatment (41) and Immune system and PCa (41).

Second choice preferences were Understanding blood work (21), Recent advances in radiation treatment (19) and Gearing treatment to diagnosis (19).

All 13 topics had their advocates. It was just that some were more popular than others. There was a flaw in the survey in that not everyone was required to rate each topic. It would have been preferable to ask for preferences from 1 to 13 (There were 13 topics) instead of for 1st, 2nd and 3rd choices. It probably least effected the top preferences, but it didn't tell us clearly where the less popular topics stood.

What about the meeting time? Forty-nine had no objections as to when the meetings begin. Six said it started too early and 4 felt it began too late. One man said he couldn't drive at night. As to the length of the meetings, 44 said it was OK, 15 thought it was too long and no one found it too short. Conclusion: Meetings sometimes go on too long.

Are the meetings too technical? Forty-five said no in reference to the facilitators and 48 said no as to the speakers. But 10 felt that the facilitators got too technical, while 7 thought that the speakers talked too scientifically. Conclusion: All presenters should try to be "audience friendly."

As to the book and video library, 39 said it was adequate. One or two said it needed improvement.

Comments were plentiful and I will report most of them here. There were some excellent topic ideas for meetings: Prevention <> Treating reoccurrence <> Alternative and natural remedies <> Incontinence <> Recent advances for stopping to respond to hormone therapy <> Options for metastasized PCa <> Dealing with rising PSA after treatment <> Medical oncologist Vs urologist as a primary MD and Meditation and yoga to assist in PCa care.

The library should be indexed by topic (staging, RP, radiation, hormone Rx, retreating, diet, etc.).

Several responders advocated breaking up into small groups of those who had been similarly treated for a "discussion of results, where each person is, what their doctor is saying, plans..." etc. One group could be for the undecided on a primary approach. Another way of dividing the small groups was suggested as to subject of interest. This responder misses "the days when the group was smaller and we had a chance to get to know each other. This could give us a chance to connect a name to a face and learn a lot at the same time." I like this one.

There was a diversity of general comments: An 85 year old was interested in continued and "complete" recovery <> There's no need to attend meetings because the newsletter is "too informative" <> We need a Think Tank to better inform the community <> Speakers should be limited to a half hour with 15 minutes for questions <> A member asked for a personal response (He might contact one of the facilitators or bring it up as 101.) <> A glossary would be helpful for a person not familiar with a lot of the terms <> Time before the speaker should have more audience participation and less facilitator presence <> The "grilling" of new members has to stop <> A member reported a 0 PSA at a meeting and was told "0 for now." He asked "what kind of support is

that?" <> M2M is doing a great job; keep up the good work <> If it wasn't for the meetings he would think he was the only one with incontinence.

Some men gave insights into additional possible causes of attendance loss. "The new members each month are not enough to offset losses due to death, moving away, transportation problems, health issues, night driving..." Another writer calls this normal attrition. He notes that new attendees more often come out of curiosity than remain regulars at meetings. He also observes that there is a lack of any "break through" approaches to PCa and that PSA and DRE haven't changed appreciably in 5 years, resulting in less incentive to come to meetings. Also, "most met are willing to accept their MDs treatment option, complete the treatment and consider themselves cured. American Cancer Society should try to contact some of these men, someone suggested.

Next article will focus on the remainder of the survey results.

Mike Kulla Poughkeepsie M2M

(During the coming year we will address the concerns of our members and implement the necessary changes ed.)

SUGAR AND CANCER

Part 1

The overwhelming consensus among discerning health researchers and practitioners is that there is entirely too much sugar in most peoples' diet. Sugar appears in almost everything we eat and drink, making it very difficult to avoid it. Carbohydrates, which converts into sugar, and sugar will be considered simultaneously.

It is a proven fact that sugar increases insulin levels which can lead to high blood pressure, high cholesterol, heart disease, diabetes, weight gain, premature aging and other health problems. Nearly all of us are addicted to sugar, and

according to Dr. Joseph Mercola "There is not one single food item that is generally more damaging to health."

The Journal of the National Cancer Institute (2/4/04) finally recognized what the Nobel Prize winner found 70 years ago, that sugar feeds cancer. Normalizing our Insulin levels is one of the best actions we can take to improve our health and lower our risk of cancer.

All humans have Insulin. Without it we would go into hyperglycemic coma and die. But many of us have Insulin levels that are too high. The pancreas releases Insulin after we eat carbs. This causes a rise in blood sugar in our cells which is necessary for life. If we eat too much carbs, the increased Insulin tells our body to store carbs as fat and not to release this stored fat. This makes it impossible to use our stored fat for energy. So the excess carbs in our diet not only makes us fat; they make sure we stay fat. And as stated before, high levels of Insulin can cause significant problems in our body. As Mercola sees it, Insulin is the key to the vast majority of chronic illness.

In a special issue of Scientific American the conclusion is drawn that excess glucose may accelerate aging, and conversely by blocking the ability of cells to use excess glucose aging may be slowed. The quest is not to illuminate sugar or carbs but to control blood-glucose within a narrow range to help starve the cancer and bolster immune function. A discussion of the difference between simple carbs (the bad guys) and complex carbs (the good guys) is beyond the scope of this article.

As to individual foods, the lower their blood-glucose levels, the more gradual is the infusion of sugar into the bloodstream, as its digestion and absorption is slower. Conversely, if blood-glucose levels are increased quickly, the pancreas is stimulated to secrete Insulin to drop blood-sugar levels which places stress on the body.

Research is confirmative. A four-year study at the National Institute of Public Health and Environmental Protection in the Netherlands found that cancer risk associated with the intake of sugar more than doubled for cancer patients.

An epidemiological study in 21 countries that kept track of morbidity and mortality (US, Europe, Japan and others) revealed that sugar is a strong factor that contributes to higher breast cancer rates, particularly in older women. The Journal of the National Cancer Institute, previously referred to, found that of 38,451 women followed for almost eight years, those who ate the most high-glucose foods were three times more likely to develop colon cancer.

How can the "simple concept" that sugar feeds cancer be so dramatically overlooked as part of a comprehensive treatment plan, The Alternative Research Foundation asks? Of the four million cancer patients being treated in America today, they observe, hardly any are offered any scientifically guided nutritional treatment beyond being told to "just eat good food."

This article will be continued with an emphasis on sugar substitutes.

Mike Kulla, Poughkeepsie M2M

Cancer Survivors Day Event

Vassar Brothers Medical Center (VBMC) will sponsor and host the 10th annual Cancer Survivors Day Event on **June 12, 2005-12 NOON to 3:30 PM**. M2M has been a part of these events since the first event took place and has been on the planning committee along with VBMC personnel. Meetings take place in early January and continue right up until a week prior to the event. A tremendous amount of planning and brainstorming for new ideas takes place during the meetings. Employees of VBMC give up their lunch time to attend the meetings.

This year's events will include food, entertainment, lots of giveaways, a raffle, art exhibits, music, puppies, a lama, goat and pony for the petting zoo, face painting and other stuff. This is a free fun day for us survivors and our families.

Guest Speaker is Michael Korda, 10 year survivor, who spoke at the first event.

**Please call to register for the event
483-6355**

Thanks to the VBMC and the staff.

PCRI ANNOUNCES 2005 NATIONAL MEETING

**Omni-Sheraton Hotel
Washington, D.C.**

Thursday, June 16 - Sunday, June 19, 2005

Partial List of Speakers/ Topics

Jon McDermod	- PSA and Blood Markers
David Bostwick	- Pathology
"Snuffy" Myers	- PC 101
Bahn/Lee	-Color Doppler Ultrasound
Bruce Sodee	-ProstaScint w/ CT, MRI
Steve Strum	-PC Staging
M. Harisinghani	-New Lymph Node Staging
A. Tewari	- Robotic Prostatectomy
Bahn/Lee	- Cryotherapy
Dattoli	- IMRT/Brachytherapy
"Snuffy" Myers	- Androgen Deprivation Therapy
Mark Scholz	- Ketoconazole
"Snuffy" Myers	- Leukine
Don Coffey	- Pathways to Treatment
Steve Strum	- Nutrition and PC
and many others!	

The entire meeting will be recorded on DVDs which will be purchased by M2M. These talks can be shown at regular meetings or borrowed for individual viewing.

Paul Totta, Cofacilitator, Poughkeepsie M2M

Joke Du Jour

During Church services, there was a loud whistle from one of the children in the back pew. The mother of the child was horrified. She nudged the child into silence, and after church, asked the child, "whatever made you do such a thing?" The child answered soberly: I asked God to teach me to whistle...and he just then did."

Unknown Author

AHCC/GCP Seminar & Symposium New York City, Thursday May 12, 2005

Free & open to the public

The seminar will take place in a meeting room of Le Parker Meridien Hotel, 118 West 57th Street, NYC (the same block as Carnegie Hall). It will start at 2:30 PM sponsored by the AHCC/GCP Research Association. There will be a presentation by Dr. Fred Pescatore, MD speaking about scientific research behind Active Hexose Correlated Compound (AHCC) and other natural therapies and their use in his practice as a clinician with patients with various diseases such as cancer, hepatitis, HIV, autoimmune disorders and others.

Dr. Aaron Katz, MD, Director of the Center of Holistic Urology, Columbia Presbyterian Medical Center, NYC, will also make a presentation on the scientific research behind Genistein Combined Polysaccharide (GCP) and other natural therapies and their use in his practice with prostate cancer patients.

Dr. Debra L. Bemis, PhD will also make a presentation on the scientific research behind GCP and its use with bladder cancer.

There will be free product samples for all atten-

dees, Complimentary refreshments and a drawing for a valuable door prize.

The **seminar** will be followed by a **symposium** at 4:30 PM in a smaller meeting room, primarily for doctors and healthcare professionals where Mr. Kosuna, President of Amino UP Company in Sapporo, Japan, will make some welcoming remarks. Ten doctors will give 15 minute presentations. Also presenting will be Dennis O'Hara, founder & facilitator emeritus of Man to Man Poughkeepsie, NY. Mr. O'Hara is a 13 year prostate cancer survivor who hosted a prostate cancer Testimonial Trial with AHCC/GCP for one year with 25 men. There will again be complimentary refreshments.

Please call Quality of Life Lab's to register
1-877-YES-AHCC - 1-877-937-2422

TO ALL RECIPIENTS OF OUR NEWSLETTER.

If you are experiencing any problems with receiving the newsletter, possibly your name, address or zip code are wrong. If you are receiving duplicate or triplicate issues or if you know of any other members who are experiencing mailing problems, contact Peter & Teresa Hardin, phone: 845-897-9667, e-mail: <hardin.pt@verizon.net>, or regular ground mail: Peter Hardin, 12 Penn Street, Fishkill, NY 12524

***Meetings/speakers for the
rest of 2005***

- May 5-Regular Meeting.
- June 2- RalphButtyan: Ph.D,
Columbia Presbyterian Hosp.
“Promising Experimental
Developments.”
- July 7-Regular meeting.
- August 4-Regular meeting.
- September 1- Dr. Gerald
Sonnenfeld,V.P. Research.
Proffessor of Biological
Sciences, Binghamton Univ.
“Our Immune System”
- October 6-Maarten Bosland,
PhD. “The Soy Controversy &
Pca.”
- November 3-Dr. Matthew
Milowsky, Cornell Weill
“Clinical Trials with
Monoclonal Antibodies.”
- December 8-TBA Change of
Date.

Attention:
We always meet the first
THURSDAY OF THE MONTH
UNLESS
OTHERWISE SPECIFIED
Next meeting Thurs,
May 5, 2005 - 6:30 pm held
at
Central Hudson Auditorium
Rt 9 in Poughkeepsie--
SXS Joins us For
Directions Call 452-2932
press 3 and then 10 to
reach local receptionist

Volunteer drivers are
always needed by the
American Cancer Society to
transport patients for treat-
ment. This is a good cause.
As little as an hour a week
will make a huge difference
in someone’s life. Contact
our local ACS office at **452-**
2932 press #3 and then
#10 mention M2M. Side by
Sider’s are welcome to vol-
unteer.