

# UPDATES

The Newsletter of PCaSO Prostate Cancer Support Organisation  
Dorset • Hampshire • Sussex • and surrounding areas



Issue No. 71

**Spring/Summer**  
**2021**

Corfe Castle, Dorset  
(Photograph by Lance Allen)

**Patient Story**  
**Healthy eating to**  
**combat cancer**  
**Dorset fund**  
**treatment chair**



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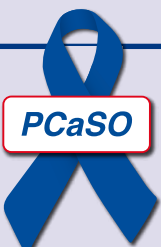
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**Prostate Cancer  
Support Organisation**

## Content for Updates

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The opinions expressed in this newsletter are not necessarily those of PCaSO Prostate Cancer Support Organisation.

All men and all cases are different and you should always discuss any changes to your treatments with your doctor and in the light of your own personal circumstances.

## Dorset Branch Committee

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## From the Editor

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I am personally saddened by the loss of Viv Miles, PCaSO's former Treasurer and Sussex Branch Treasurer, see page 4. I first met Viv on a Penny Brohn prostate cancer course in Chichester in 2014, Viv was a really nice person, impressive in his commitment to helping others deal with prostate cancer. He believed strongly in Early Detection, hence his tireless work supporting PSA testing events in Sussex. The loss of Viv not only impacts at the personal level to PCaSO members who knew him, but his passing leaves a hole in the PCaSO team. David Hurst and Barry Taylor have done sterling work since last year bridging the Treasurer gap, and Brenda Pearson-Woodd has joined Sussex Branch as their branch treasurer.

Many thanks to Ron Linkins (Eastbourne Group) for sharing his patient story, see page 3. A collection of previous Patient Stories can be found on the PCaSO website.

From page 5 is an article on Healthy Eating, this follows the previous Physical Activity and Exercise article in our 'Healthy Living for Prostate Cancer Patients and Survivors' series. On a similar healthy eating topic you can view (see 'Videos' on the PCaSO website), an excellent talk by Nicky Robinson of Penny Brohn UK, organised by the Mid-Sussex Prostate Cancer Support Group.

Tony Ball

# My Journey to Mount Vernon

## A patient's story by Ron Linkins – Eastbourne group.

You may be thinking that this is a story of a mountain trek but I am referring to Mount Vernon Cancer Centre in Northwood, North West London.

In early 2012 my wife Jenny persuaded me to see my doctor to find the reason for my increased frequency of visits to the toilet. My PSA test was 97 and following scans and a TRUS biopsy I was diagnosed with locally advanced prostate cancer, Gleason score 4+5, T3b N1 M0. I was prescribed a hormone injection (Prostap) every 12 weeks. Surgery was not considered an option for me.

My wife persuaded me to join the Eastbourne PCaSO group. I was pleasantly surprised as it was much more interesting than I had anticipated, with some very interesting speakers at meetings. My wife and I are now responsible for sending out hard copies of Updates and Prostate Matters.

In March 2013 I commenced 37 sessions of external beam radiotherapy at Brighton. In early 2015 with my PSA at 0.08 it was decided that I could cease my Prostap injections. After 6 months my PSA had increased to 1.15. I had a Choline PET scan at Falmer near Brighton which revealed the presence of cancer within the prostate. In August 2016 I recommenced Hormone injections (Zoladex) but my PSA has always wanted to increase. Short interventions of Bicalutamide and more recently Dexamethasone have temporarily reduced my PSA.

In August 2020 my consultant Dr Soultati referred me to a colleague Professor Peter Hoskin at Mount Vernon Cancer Centre to discuss my suitability for salvage options. I had a telephone consultation with him where he advised that, in theory, he could perform a template biopsy followed by high dose brachytherapy. He stressed that he could not guarantee complete success and I risked suffering side effects that could impact on my quality of life.

Prior the template biopsy I was required to have an MRI scan, a Covid 19 swab test and pre-med tests at Mount Vernon. As the journey to the hospital involved a 210-mile round trip we found a nearby hotel where we could stay to avoid making return trips. The MRI scan took place on 15 September and the other tests the next day. On Sunday 20 September I booked into the private BMI Bishops Wood Hospital in the grounds of Mount Vernon that the NHS were using for my accommodation. Early the next morning preparations commenced for the local anaesthetic under which the template biopsy took place. I stayed overnight and the next morning after the removal of the catheter and final checks I was discharged. I was quite tender for a few days afterwards and the bruising lasted for a fortnight.

In October Professor Hoskin contacted me with the biopsy results which showed cancer with a Gleason score of predominately 4+4 with some elements of 5+5. Despite further discussions regarding the risks involved I decided to go ahead with the treatment. Prior to the treatment I had a PSA test which was 3.9.

On Sunday 29 November 2020 I again booked into the Bishops Wood Hospital. With strict infection rules at the hospital my wife was not allowed to visit me for my 3-night stay. With lockdown restrictions in place permission was sought from our local MP that it was permissible for my wife to stay at the nearby hotel for medical appointments, so as not to break Covid 19 travel rules. Four days before we had driven to the hospital for the day where I had a Covid 19 swab test and a pre-med assessment.

On the Monday morning, under local anaesthetic, the applicators for the brachytherapy were inserted. With these in place I had to lay in



one position and avoid movement. The rest of the day involved being manually moved from bed to trolley, transported the short distance to the cancer treatment building, trolley to scanner, scanner to trolley then to the treatment room for the first session of brachytherapy treatment. I was to have a second session of treatment the following day. (26 Gy in 2 fractions).

The Monday night was quite challenging as with the applicators still in place I could not move my position. To avoid DVT, as well as wearing the tight socks I had inflatable bands round my ankles that inflated every few minutes. The following day, feeling extremely tired, I had another scan and then the second dose of treatment. It was a great relief to have the applicators removed that afternoon and I was able to spend a slightly more comfortable night. The following day I was discharged late that afternoon. By this time it was dark and raining and I was relieved that my wife only had to drive me for 10 minutes to the hotel.

On 5 February 2021 my consultant informed me that my latest PSA result had dropped to 0.34. I was able to report that I had recovered well from the treatment. I had not suffered from bleeding from my bowel or bladder and my urinary flow was back to normal.

Whether the treatment has completely eradicated the cancer remains to be seen. At the very least I hope that it has delayed the time before further treatment may be required. I am extremely fortunate that, despite the constraints of the current pandemic, I have been able to receive this treatment.

## Vivian Miles

Viv Miles, PCaSO's Honorary Treasurer, has died in Southampton Hospital shortly before Easter. He had gone into Brighton Hospital in July 2020 for an aneurism operation which had gone wrong giving him very severe complications. He was initially moved to St Richard's in Chichester and then on to Southampton where there is national expertise. Unfortunately it was in vain.

Viv Miles, 73, came to PCaSO around 2014 after, like so many of us, discovering more or less by accident that he had serious prostate cancer and going through the treatment journey. He said the whole process had made him re-evaluate his life and he decided 'to put something back' and joined PCaSO.

You can read about Viv's prostate treatment in Information Patient Stories on the PCaSO website [www.pcaso.org](http://www.pcaso.org). Look for Updates 58 dated Feb 2017.



As a qualified accountant who had recently retired from a large industrial company he was a shoe-in for the Honorary Treasurer's job as Andrew Bloxham, the then treasurer, was needing to step back. He also took on the job of branch treasurer for Sussex branch and, when Ian Graham-Jones retired to Devon, Viv took on running the Chichester group meeting in the Baptist church.

Three days before going into hospital Viv had bought a new car and shortly before then had, with partner Janette, moved into a new-build house.

Chairman Roger Bacon said "I feel for Janette and Viv's family, like all of us they must have been hoping he would pull through what has been a truly awful experience. PCaSO has lost someone who was fully supportive of our aims and committed to helping others. He was a great help to me at all the PSA test events we held and I feel the loss of a true friend."

## Brighter Outlook

### A talk on Zoom by Rosie Sadler 14 January 2021

Brighter Outlook is an initiative by Brighton & Hove Albion Football Club's 'Albion in the Community' providing a variety of cancer support activities in Sussex. They offer advice and exercise training, mostly free of charge. Rosie Sadler is Brighter Outlook's Cancer Activity Project Co-ordinator, with expertise in helping cancer patients to maintain or improve their fitness levels, all the better to increase resilience against the disease, and help recovery from treatment.



The benefits of physical exercise extend to reduced incidence of cardiovascular disease, dementia, type 2 diabetes, depression,

osteoporosis and more - in fact exercise is a 'wonder drug!', essential for the wellbeing, vitality and quality of life for all of us.

For those diagnosed with prostate cancer, exercise helps against the muscle/ bone loss through hormone therapy, reduces fatigue and strengthens the pelvic muscles. 'Pre-habilitation' exercise is beneficial in preparedness for planned treatment or surgery, particularly when combined with healthy dietary choices.

Patients living in Sussex can be referred to Brighter Outlook by their GP, or can self-refer, see [www.albioninthecommunity.org.uk](http://www.albioninthecommunity.org.uk) or phone 01273 668591.

This very useful Zoom session was recorded (56 minutes) and is available to view on PCaSO's website [www.pcaso.org](http://www.pcaso.org). Our thanks to Rosie and the team at Brighter Outlook.

## Treasurer

You will have seen the sad news of the death of Viv Miles in the article above. PCaSO needs a treasurer. We have been lucky to find Brenda Pearson-Woodd to take over the job of treasurer for the Sussex branch joining Barry Taylor who looks after Dorset and Peter Johnson who is the Hampshire treasurer. But we still need to find someone who can take on the job of overseeing all the charity's finances, prepare the annual accounts to go to the Charity Commission and provide financial advice to the trustees. See [www.pcaso.org](http://www.pcaso.org) for more detail. If you can't do it then do you know someone who will? Please ask your friends and colleagues. We have to put the word out as widely as possible. Call David Hurst or any trustee for an informal chat. Contact details on the inside front cover.



# 'Healthy eating can help your body combat cancer'

**What, how, and when we eat and drink, can either help, or hinder, our bodies in combatting cancer and its effects. We necessarily rely on medical experts for diagnosis and treatments for prostate cancer, but there is also much we can do ourselves to support our mind and body and give ourselves a better chance.**

## Lifestyle

Eating more healthily is a major part of a healthy lifestyle, as are maintaining a healthy weight, reducing stress, sleeping well, keeping physically active and taking regular exercise. Plus, if a smoker, seeking help to give up! A healthy lifestyle can improve our life-chances against heart disease, obesity, type-2 diabetes and strokes, as well as prostate and other cancers. It can help our bodies and metabolisms fight cancer, whilst seeing a lower incidence of side-effects from chemotherapy, radiotherapy or hormone therapy. On the other hand, an unhealthy lifestyle puts us at risk.

PCaSO have studied information about healthy eating and prepared this article to help fellow prostate cancer patients/survivors. It has not been prepared by 'experts', nor is it a prescription. We hope it will make you think about what you usually eat and drink and what you might change, so enabling your good health, vitality and robustness. We have not mentioned environmental implications or animal welfare aspects, as although they are important, the topic of healthy eating for a healthy body is complex enough. You may however wish to include them in your personal choices.

## Unhealthy eating and drinking

*"Consuming a 'Western type' diet (characterised by a high amount of free sugar, meat and fat) is a cause of weight gain, overweight*

*and obesity. greater body fatness is a cause of many cancers"*  
*World Cancer Research Fund.*

There are some foods and drinks we should avoid most of the time, and some we should limit, or moderate.

### Foods and drink to avoid or limit

Consuming a high level of carbohydrates, from a variety of foods and drinks, is a key problem. Unless we are burning off those 'empty calories' quickly, the build-up simply converts to fats, including 'visceral fat' [toxic abdominal fat stored around internal organs]. This is hard to shake off, and may lead to a hormonal condition known as IGF (Insulin-like Growth Factor) that can stimulate the cancer to grow.

Foods to avoid are listed below, but if we can't totally cut out these then we should at least make a significant reduction in the frequency and amount that is consumed:-

### Avoid processed meats

such as sausages, ham, bacon (but Parma ham / Prosciutto are ok as prepared in a healthier way)

### Avoid highly processed foods

such as most ready meals.  
*[where nutrients have been lost in processing and additives included, often shown as a long list of ingredients on the packet!]*

### Avoid refined foods

[e.g. those using grains where processing has removed the healthy bran and kernel] such as

white bread, white rice and white pasta.

### Avoid sugary foods

such as sweets, milk chocolate and chocolate confectionary, sugary breakfast cereals, biscuits. High sugar consumption can lead to a number of serious health issues, not just bad teeth! As well as links with diabetes and obesity, sugar leads to overproduction of IGF ('Insulin-like Growth Factor) that can cause cancer cells to increase rapidly and potentially become more resistant to treatment. The best way to reduce IGF is by regular exercise - and by cutting sugar consumption

### Avoid foods cooked at high temperatures and charred foods

should also be avoided as the overcooking produces acrylamides which are carcinogenic, e.g. potato chips and crisps, vegetable crisps, burnt toast. If meat is to be barbecued, firstly marinate it with herbs, part-cook before it is barbecued, then cut off any burnt bits before eating.

### Avoid or limit tropical fruits

such as mango and pineapple. these are high in sugar, so best avoided or limited.

### Avoid sugary drinks

-exclude any drinks containing sugar, especially the myriad of 'processed drinks' with their heavily sugared contents (a can of Cola contains approx. 9 teaspoons of sugar). Glucose is a favourite food of a cancer cell.

### Avoid or strictly limit alcohol

best avoided, due to sugar content and 'empty calories' (particularly beer, which is high in carbs), but if you really cannot say 'no' to alcohol then have 1 or 2 small (125ml) glasses of red wine. Red grapes have a natural coating of resveratrol (a polyphenol) which

research suggests can help fight cancer.

### Moderate milk intake

drinking lots of milk may lead to hormonal (IGF) imbalance, so we should consider moderating our dairy milk intake. Try introducing non-dairy alternatives, such as soya, oat, almond or coconut milk. When we buy cow's milk, it is best to choose a lower-fat organic one.

**Hormonal balance** - our bodies have a number of hormones that regulate our health. If we have unhealthy eating or drinking habits these can disrupt the hormonal balances within our bodies, with adverse consequences for our health.

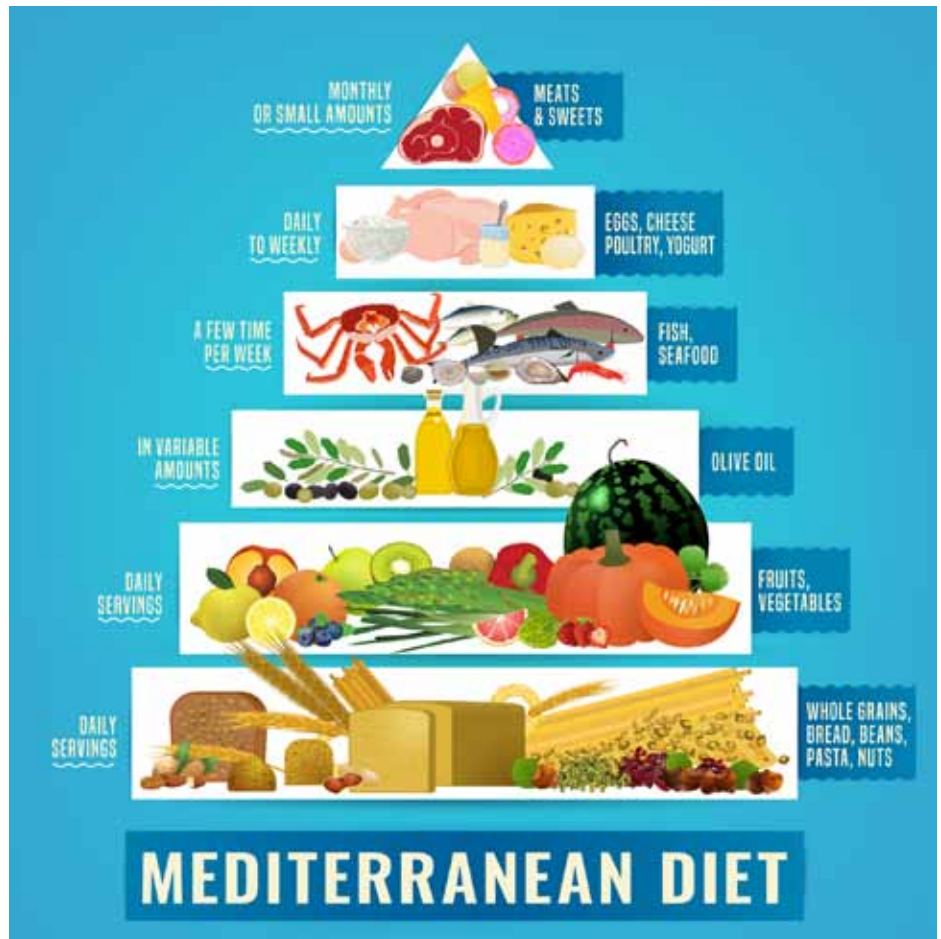
Some **processed products**, such as found in supermarkets, can be labelled 'healthy', but may have considerable added sugar, saturated fat, salt and additives, etc., as well as beneficial content. Food manufacturers may use marketing 'spin', promoting some products that are not going to benefit our health, such as some breakfast cereals.

### Healthy eating

We can be markedly different from each other in how our bodies and digestive systems respond to particular food and nutrients, so we have to experiment to find out what works best for each of us. Any unhealthy habits can be difficult to kick, but even small changes to eating patterns can be beneficial and add-up over time. Most of us will still need the occasional 'treat', which will only be unhealthy if we do it too often!

It is best to eat whole foods [*in their natural state, such as from farms, garden or allotment*] or minimally processed foods. [*where a simple process such as milling or grinding has still retained most of the nutrients in the food*]

Whole food is higher in nutrient



A typical Mediterranean Diet 'food pyramid' © Anna Bocharova/Dreamstime.com

density and fibre than highly processed food. Preferably these whole foods should be fresh and locally sourced, as transport time can reduce freshness and nutrient value. Some whole foods can still be quite nutritious if you buy them frozen, or tinned. For example, frozen berries can be as good as fresh berries, but some fresh vegetables may have more nutrients than frozen ones.

### Healthy eating plans

One such plan that comes well recommended is the **Mediterranean Diet**, which is not a 'slimming diet' but a healthy way of eating based on the traditional cuisine of countries such as Italy and Greece. Typically, the main components include:

#### Daily

vegetables, fruits, herbs, nuts, seeds, whole grains and healthy fats

#### Weekly

intake of fish (including oily fish), seafood, poultry, beans and eggs

Only moderate amounts of dairy products

Limited intake of red meat (only small amounts, once or twice per week)

Healthy fats, particularly olive oil, are a mainstay of the Mediterranean diet. Avocados, nuts and seeds also contain healthy monounsaturated fat.

#### 'Flexitarian' diets

are becoming popular ways of cutting down on meat, poultry and dairy without going full vegetarian or vegan. For example, eating fish or chicken at weekends, with very occasional red meat, otherwise eating mostly plant-based foods during the week.

If you can afford it, buy organic quality grass pasture-fed meat and poultry products rather than the cheapest, they can have

healthier nutrients and be lower in pesticides and antibiotics.

## The digestive system and the 'gut microbiome'

An important element of digestion are the micro bacteria in the gut (also known as the 'gut microbiome') that help break down food so it can be more easily absorbed by the intestines. The gut can contain both 'good' and 'bad' bacteria, each person will have their own unique set. The simplest way to ensure good bacteria is by regular consumption of plain natural pro-biotic ('live') yoghurts, whether dairy-based or dairy-free. Prebiotics are foods these bacteria love to thrive upon and also contain beneficial bacteria for your gut - garlic is especially good in this regard

It is too easy to repeatedly shop for and eat the same foods each week. So, experiment and try some variety, it can be better for your digestive system to have a broad range of good bacteria, and it can provide a wider range of nutrients for your body. Eat a 'rainbow' of brightly-coloured vegetables, the diversity of colours can mean different nutrients. Fermented foods [*Where yeast and bacteria break down whole food components, such as sugars, into fermented foods, containing probiotics and prebiotics, beneficial for health and the gut*] can also be very important for improving gut health.

## Foods for health – can be eaten in abundance

### Cruciferous green vegetables:

mainly broccoli, cabbage, kale, cauliflower, Brussels sprouts and watercress. There is a saying "cancer hates cabbage", and for good reason. Studies have indicated vegetables from the cabbage family help to significantly reduce the risk

of prostate cancer, and inhibit the further growth of cancer cells. This occurs by complex 'phytochemicals' which reduce inflammation, promote anti-oxidant enzymes and even repair damaged DNA cells.

### Chilli peppers:

contain a natural compound called Capsaicin, which can actually help encourage prostate cancer cells to die away, without affecting healthy cells. Capsaicin also helps to balance cholesterol and blood sugar.

### Grains & seeds:

including quinoa, beans and lentils. As unrefined whole grains, these can reduce the risk of prostate cancer and help protect against future relapse. They contain lignin polyphenol compounds, which control 'oestrogen receptors', help healthy cells to repair, post-radiotherapy, and are beneficial for maintaining bone density.

### Nuts:

almonds, hazelnuts, peanuts, pecans, cashews. Where un-roasted, these have anti-inflammatory properties, and will help protect against environmental carcinogens. They are linked to a reduced risk of prostate cancer. Nuts are also a source of beneficial Omega-3.

### Olive Oil:

the only oil that has known anti-cancer activity. Cold-pressed virgin olive oil contains compounds that help prevent 'angiogenesis', i.e. the ability of the cancer to create its own blood vessels. Olive oil is also a good source of omega-3, the 'good' fatty acid.

### Fermented Foods:

**bio/live yoghurt** - (contains lactobacillus to fight bad bacteria)

**sourdough bread** - (made with fermented dough with naturally occurring lactobacilli/yeast)

**miso** - (a paste made from fermented soybeans – a good source of copper)

**tempeh** - (fermented soybeans - good probiotics and high in protein)

**kimchi** - (fermented spiced vegetables e.g. cabbage – high in vitamins A, B, C and lactobacilli)

**sauerkraut** - (fermented cabbage - source of probiotics, fibre and iron)

**pickled vegetables** - (contain probiotics, fibre and vitamins A and K)

### Onions & garlic:

including spring onions, leeks, shallots and chives. These are known to help cleanse the system of potentially carcinogenic compounds, and inhibit the enzymes that can activate those carcinogens. Garlic particularly has phytochemical properties that help prevent damage to DNA that could otherwise cause healthy cells to become cancerous.

### Tomatoes:

when cooked, tomatoes release a natural chemical called Lycopene, which is noted for helping to inhibit prostate cancer cell growth. Also found in tomato paste, but probably not so good in sugary ketchup. Cooking tomatoes in olive oil is the most effective way to gain benefit.

### Soya:

soya (edamame) beans and products such as tofu can inhibit the growth of prostate cancer cells, because they contain 'isoflavones' that control the hormones, particularly oestrogen, that cancer cells enjoy. Soya also contains Omega-3 healthy fat.

### Herbs and Spices:

great for adding flavour, but beneficial for health as well. Examples are parsley, rosemary, mint, thyme, chives, black pepper, chilli, ginger, turmeric, cinnamon.



### Berries:

strawberry, raspberry, cranberry, blackcurrant and others contain ellagic acid, that is known to interfere with prostate cancer cell development. Blueberries are also excellent.

### Pomegranate:

known to be effective against prostate cancer by helping to slow the progression of the disease. Used for thousands of years as a general health remedy, but note the benefit is in their seeds and pulp, not in their juice.

### Citrus fruits:

mainly oranges, grapefruit, lemons and mandarins, etc. Citrus fruits are another good source of phytochemicals (see Cruciferous green veg) as well as a good natural source of a variety of vitamins.

### Peaches and nectarines:

possess anti-cancer properties and have been known for thousands of years as beneficial for health.

## Foods to limit for moderate consumption

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### Dairy

eating or drinking lots of dairy products such as milk, yoghurt or cheese, might increase your risk of prostate cancer. More research is needed, but dairy products including cheese and eggs, contain growth hormone, which is a natural compound. However, the growth hormone, also known as Insulin-like Growth Factor (IGF), might encourage cancers cells to develop, so a moderate dairy intake would be prudent until more evidence becomes available.

Dairy products are a common source of calcium and vitamin B12. Any deficiency is however countered where non-dairy equivalents contain these naturally, or are fortified.

### Starchy carbohydrates

limit portion sizes – e.g. potatoes (skins on)

**Red meat, beef, lamb, pork** – limit to 1-2 small lean portions per week, preferably organic pasture-fed

**Poultry** (eat without skin) chicken, turkey

**Home-cooked cakes or biscuits**, make these with less sugar, healthy fats and lower temperature

**Dark chocolate** preferably 70% + chocolate, from 20g to 45g per day

## When and how to eat and to cook?

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It's probably best to avoid eating a full meal later in the evening. The old saying is "Breakfast like a king, Lunch like a prince, Dine like a pauper". Some experts do question this, but if a meal is eaten shortly before bedtime, the energy has nowhere to go apart from building fat. It doesn't just sit quietly in the stomach waiting for tomorrow! Also see 'Fasting' below.

Limiting portion sizes at mealtimes is important unless you want to put on weight! Try using a smallish plate and stop eating before you are completely full. If you use marmalade at breakfast (or jam) on your bread or toast, then use a reduced sugar one and spread it thinly, avoid piling it high!

Golden rule in the kitchen - don't overcook the vegetables! Overcooking can destroy the natural vitamins and minerals, reducing the value of that food to your system. It is recommended to grill rather than fry; steam or stir-fry instead of boiling. The most stable fats to use for cooking are butter and coconut oil. Extra virgin olive oil and avocado oil, which are high in healthy monounsaturated fats, can be used for dressings and in cooking, but should not be heated to high temperatures. However some

blended olive oils can be suitable – see labels.

When you can, relax at mealtimes and enjoy your food. If you eat slowly and chew your food well it should aid digestion.

### Fasting

Fasting can help with weight loss, maintaining a healthy weight and resting your digestive system. A powerful but simple option is an 'overnight fasting' routine which gives your digestive system and microbiome 14 hours of rest between meals (or at least 13 hours, if you cannot manage 14). Choose your own time slots but, for example, if you finish your dinner at 7pm, refrain from eating anything again until breakfast at 9am the next day, you then have **a 10-hour window for eating**. Restrict drinks in the overnight fasting period to water, green or black tea, black coffee. After overnight fasting, exercise or a walk before breakfast can help burn stored body fat.

Or, you might wish to follow a 5:2, or even a 6:1 fasting plan. 5:2 is a weight reducing plan with 5 days normal eating per week and 2 days with lower calorie intake (600 or 800 calories). Whereas 6:1 has only one day a week of lower calorie intake and is more suitable if you just want to maintain a healthy weight.

## Drinks and smoothies

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Water - normal tap water may contain many chemicals that filtration by the water company is unable to extract, however it can also include healthy additions and, if you live in a 'hard water' area, beneficial calcium for bone health too. You could invest in a mains-fed water-purifier, but a portable charcoal filter (e.g. Brita) is less expensive.

### Juices

juices made at home (fresh carrot, cabbage, apple, celery, pomegranate, etc.) are a way of delivering anti-cancer agents into one's body. To avoid too much



sugar, even from freshly squeezed fruit, mix vegetables and fruit to make the juice. It is best to generally avoid drinking fruit juices purchased from supermarkets, but if you do, drink those that state 'not from concentrate' and limit the amount.

### Smoothies

can be healthy and are easy to make at home in a blender. As with juices, best made with veg and fruit together, e.g., use kale or spinach, blueberries and natural yoghurt.

### Probiotic and prebiotic drinks

excellent for the gut and immune system and offer a 'treat' during the day. **Probiotics** are one or more strains of beneficial bacteria, proven in research to being efficiently delivered to the relevant point in your gut (the 'microbiome') to do their job. Several probiotics come as sweet drinks, yoghurt, or kefir, a fermented 'fizzy' milk drink – rich in probiotic bacteria and a good source of calcium.

### Green tea

an excellent source of healthy polyphenols, but one has to drink several cups a day of green tea to get the full benefit. Black tea also has a beneficial effect, but not as powerful as green tea. Polyphenols are powerful antioxidants which protect against heart disease, lower 'bad' fat LDL (cholesterol) levels and stop arterial plaque building.

### Coffee

recent findings support the health benefits, particularly against aggressive prostate cancer, of drinking a moderate amount of coffee each day, e.g., 2 cups. Caffeine can stay in the body for 6 hours or so, therefore (unless de-caffeinated) coffee/tea is best avoided after mid-afternoon to avoid the risk of impact on sleep.

Do remember to avoid dehydration. Water, herbal teas, fresh vegetable juices, etc can contribute to our fluid intake. We should be drinking 2 litres (3.5 pints) of liquid a day, more on hot days.

## Vitamins, minerals and supplements

*"Do not use supplements for cancer prevention – aim to meet nutritional needs through diet alone" World Cancer Research Fund*

PCaSO member Mark Giddings writes: *"I found in the early days after diagnosis, I was taking some 20 different 'recommended' pills daily. It became all too much and too expensive. Upon detailed research I found that by eating good organic produce, I could give my body the goodness it needed. If you have a healthy, balanced nutritional diet, most vitamins and nutrients your body needs will be delivered by nature. Note however, research now states that your "5-a-day" should now be a minimum of "7-a-day" of which vegetables to fruit should ideally be in ratio of 5:2. Follow this guide and your body will be given the vast majority of nutrients to assist in combatting your cancer".*

### Vitamins for Bone and Joint Health:

After cancer and its treatments, the rate and magnitude of bone and joint problems significantly accelerates. Loss of bone density will lead to osteoporosis and risk of fractures.

**Calcium supplements** can help, though there is now conflicting information regarding their benefit. Evidence now suggests that they should only be taken if someone lacks calcium in their diet or to support bisphosphonate therapies (drugs that strengthen bones). Dietary calcium of around 700mg is recommended every day for adults, especially if you follow a dairy free diet. Conversely, its best to avoid foods and drinks which can reduce calcium, including caffeine, red meat, salt and fizzy drinks.

**Vitamin D** is essential for everyone, but vitamin D absorption declines with age, so more is needed for the elderly. It helps bones absorb calcium, and is particularly important for men on those hormone

treatments that risk bone density loss. Small amounts of vitamin D are found in foods including eggs, oily fish, sun-dried mushrooms, vegetables and nuts. However, the major source of vitamin D is sunlight. At our northern latitude this can be a challenge, and many UK residents are at risk of vitamin D deficiency, even in summer. It has

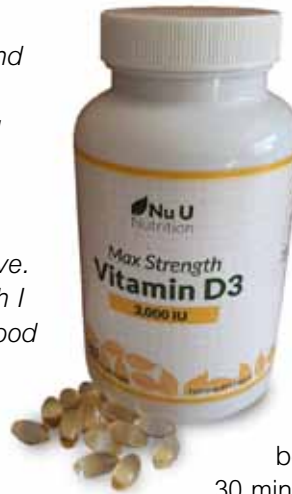
been estimated that at least 30 minutes of 'shirt-off' midday sun would be needed (but not so much as to burn and be at risk from skin cancer). Maintaining a sufficient level of Vitamin D may provide some protection against prostate cancer mortality. In UK we probably need a daily higher-strength Vitamin D3 supplement through the winter months (Oct-March) and possibly a lower dose one through the rest of the year. You could ask your doctor for a check of your level to ascertain if you need supplementation.

**Vitamin K (K1 and K2)** has been found to be important for bone health too. Dietary sources, e.g. leafy dark green vegetables, plus fermented foods and blue-veined cheeses, are nature's way of accessing this vitamin.

### Vitamins for Joint Pain:

After cancer treatment, osteoarthritis remains the most common form of arthritis, causing pain, stiffness and inflammation within a joint. Studies show that over 50% of patients report joint pains as one of the most troublesome symptoms after cancer.

**Turmeric;** a root emanating from Asia and a member of the ginger family, has been found to profoundly inhibit joint inflammation, often outpacing ibuprofen in its effectiveness. As well as its use in



curries, one can mix raw, powdered Turmeric (active ingredient Curcumin) into things like tea, porridge, sauces, etc., or take in pill form. Note that if the raw powder is mixed with a little olive oil and black ground pepper, its effectiveness increases many-fold

**Pomi-T;** a whole food 'Polyphenol rich' nutritional supplement usually taken as a capsule containing pomegranate, green tea, turmeric and broccoli. In exhaustive medical trials, it is claimed this supplement has proven qualities in reducing PSA, and that in nearly half of all men with prostate cancer, their cancers had stopped growing or even regressed. Many prostate cancer 'patients/survivors' have taken Pomi-T.



- poultry (skinless) e.g. chicken, turkey
- home-cooked cakes, biscuits, etc. (with less sugar, healthy fats and lower temperature)
- good quality dark chocolate (an occasional few small squares)

#### **Foods to EAT without restriction:**

- seafood, crab, prawns, mussels
- white fish, dark-meat fish and oily fish
- a variety of fresh fruit and vegetables, preferably organic
- nuts, seeds, flaxseed, quinoa, beans, lentils, peas, mushrooms
- herbs -parsley, rosemary, mint, thyme, chives
- spicy foods, and spices -chilli, ginger, turmeric, cinnamon
- sourdough, wholemeal and whole grain breads. Whole wild rice.

#### **Hints and Tips:**

- Vary what you eat to provide diversity of nutrients. Eat a 'rainbow' of plant-based foods
- Eat at least 5, preferably 7, portions of vegetables and fruit per day (more veg than fruit)
- Look after the digestive system (gut microbiome) with probiotics and fermented foods
- Watch your portion sizes. Match calorie intake to activity, if you do less, eat less
- Try overnight fasting of 14 hours without eating (early dinner + late breakfast)
- Exercise before breakfast, if you fasted overnight it can burn stored fat
- If you must snack between meals, try nuts or raw vegetables, e.g. carrots, celery
- Limit alcohol to 1-2 small glasses of red wine

- Avoid sugary drinks and colas, refined sugar, honey and syrups
- Only moderate amounts of dairy (milk, butter, cheese and eggs)
- Green Tea has health benefits. Coffee or black tea (without sugar) in moderation
- Caffeine may cause dehydration. Avoid caffeine 6-7 hours before sleep
- Drink plenty of water. One needs about 2 litres of fluids per day, more on hot days

**Note:** *some people will have food intolerances or allergies that over-ride any information presented in this article. Also, if you are under treatment for prostate cancer or other conditions, you may wish to advise your doctor or specialist nurse of any significant dietary or nutritional changes you plan to make.*

#### **Further reading suggestions:**

- Professor Robert Thomas – *How to Live.*
- Penny Brohn UK (a cancer charity) - *Healthy Eating Guidelines* - see <https://www.pennybrohn.org.uk/wp-content/uploads/2018/08/Healthy-Eating-Guidelines-July-2018-Final.pdf>
- University of California San Francisco – *Living with Prostate Cancer – Diet recommendations.* See [https://urology.ucsf.edu/sites/urology.ucsf.edu/files/uploaded-files/attachments/p8-ii-diet\\_guide\\_web.pdf](https://urology.ucsf.edu/sites/urology.ucsf.edu/files/uploaded-files/attachments/p8-ii-diet_guide_web.pdf)
- Professor Richard Beliveau and Dr Denis Gingras - *Foods to Fight Cancer*
- Chris Woollhams – *The Rainbow Diet and how it can help you beat Cancer*
- The Association of UK Dietitians – fermented foods
- See <https://www.bda.uk.com/resource/fermented-foods.html>

#### **Summary**

Choose and follow a Healthy Eating Plan, e.g., the Mediterranean Diet, that meets your needs.

#### **Foods to AVOID, as much as possible:**

- highly processed food, food cooked in fat, ready meals containing sugar, etc
- processed meats
- charred food, crisps
- shop-bought cakes/muffins, biscuits, sweets and chocolates
- white bread, white rice and white pasta; sugary cereals.

#### **Foods to LIMIT to only moderate amounts:**

- potatoes (preferably new potatoes, rather than roast or mashed)
- red meat (1-2 times per week), preferably organic, grass pasture-fed



**DORSET:**

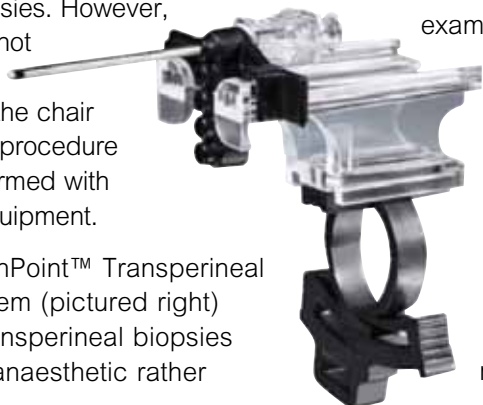
**Following in Hampshire's Footsteps**

Previously the Hampshire branch donated a Schmitz-Soehne Medi-matic urology examination and treatment chair to the urology department at the Southampton General Hospital. (See 'State of the Art biopsies' in issue 70 of Updates). This year it's the turn of the Dorset Branch to donate a similar chair to the Royal Bournemouth Hospital.

In October 2020, during a (Dorset Branch) conversation with Mr Andrew Wedderburn, Consultant Urological Surgeon and Chair Urology NSSG at the Royal Bournemouth Hospital, it was mentioned that the Urological Department were about to start raising funds to purchase a Schmitz-Soehne Medi-matic urology examination & treatment chair. A lightbulb moment!

Mr Wedderburn explained why the chair was needed and how it would be used. Currently when a man is referred to him for prostate cancer diagnosis, he and his team perform a bpMRI (biparametricMRI) to determine the possible presence and position of tumours in the prostate, then a Template Perineal Biopsy under general anaesthetic to confirm the presence of prostate cancer. However, they are about to move towards a new technique called the 'Precision Point' Transperineal Access System for performing prostate biopsies. However, the NHS will not fund the purchase of the chair because the procedure can be performed with 'standard' equipment.

The PrecisionPoint™ Transperineal Access System (pictured right) facilitates transperineal biopsies under local anaesthetic rather



**Donations**

PCaSO does not receive any Government funds and is dependent on Membership subscriptions, donations and sponsorship.

To make a donation please send a cheque to:

The Treasurer, PCaSO, PO Box 66, Emsworth, PO10 7ZP.

Or pay into the PCaSO account (Sort Code 40-23-20 Account No. 61303856)

Or download and fill in our Standing order form at [www.pcaso.org/donate](http://www.pcaso.org/donate) or, click on the donate button at the top right of most pages on the website.

than general anaesthetic, thereby transforming the standard of care for prostate biopsy practice in the NHS and streamlining the pathway for all. It enables transperineal biopsies to be carried out in outpatients, avoiding the need for general anaesthetic lists and reducing waiting times; delivering safer and more effective prostate biopsies in a timely fashion optimising cancer diagnostic resources."

Mr Wedderburn went on to explain that although the procedure would be undertaken using traditional hospital equipment, the process could be greatly facilitated if it were performed using a type of chair called the Schmitz-Soehne Medi-matic urology examination & treatment chair.

Not a very elegant posture but obviously very practical for the job in hand!

Realising the greatly enhanced experience this chair would provide for the patient and the medical team, it was an easy decision for PCaSO Dorset Branch to

follow the Hampshire Branch example and offer to pay for the provision of a similar one for the urology department at the Royal Bournemouth Hospital. We will work with them to manage the introduction of this new facility.

**HAMPSHIRE:**

Looking ahead - the first "actual" Hampshire branch meeting, Covid-willing, will be at Otterbourne Village Hall on Tuesday 7th Sept. at 7.30pm. Our guest speaker will be Mr Andrew Gabriel on Surviving Hormone Therapy. It will be a open and frank session on the side effects of hormone therapy, what you can do to minimise them, and preserving your physical/sexual/mental health, with some humour too. It also has relevance for prostatectomy patients. Andrew is a prostate cancer patient himself and provides 1-2-1 support of prostate cancer helplines including PCUK and Tackle. The presentation was originally a half-day session at Mount Vernon Cancer Centre.

**SUSSEX:**

Western Sussex Hospitals have joined Brighton and Sussex University Hospitals to form a new NHS Foundation Trust: University Hospitals Sussex NHS Foundation Trust. This is now one of the largest acute Trusts in the UK and provides a wide range of clinical services to people in West Sussex, Brighton & Hove and parts of East Sussex.

The Trust, which formed on 1st April this year, will provide more than 1.5 million outpatient appointments, A&E visits and surgery cases every year and employ nearly 20,000 staff across seven hospitals - Royal Sussex County Hospital (Brighton), Royal Alexandra Children's Hospital (Brighton), Sussex Eye Hospital (Brighton), St Richards Hospital (Chichester), Princess Royal Hospital (Haywards Heath), Southlands Hospital (Shoreham) and Worthing Hospital.

# Marketing ideas for PCaSO from the University of Brighton business students

Now we can hope there is some light at the end of the Covid-19 tunnel, PCaSO is preparing to restart paused activities and remind the world we still exist. Through one of our members, Mark Giddings, we had an introduction to a marketing module (a mini course) for business degree students at the University of Brighton. Every year the students on the module have to prepare a marketing pitch and we were delighted that they agreed that the 2021 'client' would be PCaSO.

The 59 students were split into 11 separate groups to each

work on a separate pitch. Roger Bacon, Debbie Hatfield and David Hurst prepared a brief for them and, directed them to the PCaSO Twitter and Facebook sites and our main website, with access to the literature, videos and other information. We then had a five-hour Zoom meeting (with two much-needed breaks!) where each group presented in turn and we asked them questions. As Updates goes to press we are waiting for the last of the presentation information to be sent to us so we can contrast and compare the work. Then we can decide who has the best ideas to help PCaSO promote its purpose,

improve its 'branding' and recruit new members to help run the groups.

It was plain from the day that the module had some very talented business students who would be of great value to any future employer. We hope to show you some of the ideas in a future issue of Updates.

*David Hurst*

## New videos on PCaSO website!



There are four more videos now on our website to add to the list, namely:

- Brighter Outlook - Keeping Active through and beyond Prostate Cancer (56 mins)
- Healthy Living – Exercise (1 hour 30 mins)
- Chaloner Chute - Prostate Cancer, one man's journey (58 mins)
- A talk by Nicky Robinson, Nutrition Lead at Penny Brohn UK –Eating Well with Prostate Cancer – Exploring the Role of Diet and Nutrition (2hrs 3mins)

To view these and other videos on prostate cancer subjects, see PCaSO's website [www.pcaso.org/videos](http://www.pcaso.org/videos)

## PCaSO introduces 'NEWS' items to our website 'Home' page

UPDATES is normally published three times per annum, about four months between issues. Sometimes however, items of prostate cancer news arrive or are discovered between issues that could be published straight away, or are time sensitive (request for surveys, etc), so we now have, and will be using, a 'News' section on the website that will be updated more frequently. 'News' can be found on the 'Home' page of [www.pcaso.org](http://www.pcaso.org).

'Events & Meetings' can also be found on the website 'Home' page. UPDATES itself will continue to be issued, more for the 'longer read'.

### PCaSO Zoom Events:

Check our website [www.pcaso.org](http://www.pcaso.org) for the latest details

Details of meetings will be sent by email. If you are not on PCaSO's email list but wish to be included please email [info@pcaso.org](mailto:info@pcaso.org)

<b>May</b>	<b>19th</b>	All PCaSO	Wednesday 7pm	<b>Zoom:</b> Dr Edd James, Professor in Immunology at Southampton University Research Centre. The topic is 'Developments in Immunotherapy for Prostate Cancer Patients'. (Edd last spoke to PCaSO members about Immunology on 31st May 2018, following our AGM that evening).
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