

Somerset Prostate Support Association



tackle
prostate cancer

**WE ARE
MACMILLAN.
CANCER SUPPORT**

**PROSTATE
CANCER UK**

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FUTURE EVENTS

Annual General Meeting

The Annual General Meeting will be held on Saturday, 13th November, 2021 at 10.00am.

Venue, Wellsprings Leisure Centre, Cheddon Road, Taunton TA2 7QP

Portishead Lions awareness day postponed. The PSA screening will take place on Saturday, 26th March, 2022 at Somerset Hall, Portishead.

Wells Lions PSA screening planned for Spring 2022

Radstock & Midsomer Norton Lions PSA screening planned for Spring 2022

BRIDGWATER PLOUGHING MATCH SUPPORTS SOMERSET PROSTATE SUPPORT ASSOCIATION



On Saturday 18th September, 118 ploughmen competed in the annual Bridgwater Ploughing Match. The many visitors enjoyed the spectacle of tractors throughout the ages, together with magnificent horse teams, ploughing land at Chedzoy, kindly provided by the Gillard family. Richard Curtis, President, nominated Prostate Cancer support as his chosen charity for the event and over £500 was generously donated for this worthy cause.

The photo shows Richard presenting a cheque to Tim Lewis who is the treasurer for the Somerset Prostate Support Association. Tim explained how Prostate Cancer affects many men and the donation will be put to good use in promoting screening for this disease. Also in the picture, and the real stars of the show, are Sam and Tilly (with the shiny brasses!) Mick Puxty, local ploughman, sandwiched between the gentle giants, and from left to right Richard Curtis, Tim Lewis and Clive Bethell, Chairman of the Bridgwater Ploughing Match.

New Prostate Cancer drug approved with discount for NHS

Thousands of prostate cancer patients will be eligible for an “effective and valuable” treatment after it was recommended for use to the NHS.

Some 8,000 people in England with hormone-sensitive or hormone relapsed prostate cancer will be eligible for treatment with apalutamide.

The National Institute for Health and Care Excellence (Nice), which recommends which drugs the NHS should provide, said a confidential discount had been agreed with Janssen, the manufacturer. A pack of 112 tablets normally costs £2,735.

Apalutamide, also called Erleada, works by blocking the effect of testosterone on prostate cancer cells. Nice recommends it for use in people with hormone-relapsed cancer at a high risk of spreading and for people with hormone-sensitive metastatic prostate cancer but in the latter case only if docetaxel – a chemotherapy drug – is not suitable.

Meindert Boyson, Nice’s deputy chief executive and director of the centre for health technology evaluation, said: “We are

very pleased that Janssen has been able to work with us to address the uncertainties in the evidence identified by the committee in the previous draft guidance.

“This means that we are able to produce final draft guidance recommending apalutamide as an effective and valuable additional treatment option.”

There are 48,500 new prostate cancer cases in the UK every year according to Cancer Research UK. It is the most common cancer in men, accounting for more than a quarter of all cases.

Recently it was reported that the drug, talazoparib, could stop the progression of advanced prostate cancer by targeting specific weaknesses in tumours. It can be taken as a daily pill, is already proven to be effective in women with advanced breast cancer.

The results of a trial of the drug led by the Institute of Cancer Research in London showed it halted the progression of advanced prostate cancer by an average of 5.6 months.

Source: The Times

Personalised drug stops spread of prostate cancer

Thousands of men with prostate cancer could benefit from a revolutionary drug after it was shown to stop the disease from progressing.

In a landmark global study, talazoparib – one of a new wave of precision treatments that target specific weaknesses in tumours – was demonstrated to freeze the progression of advanced prostate cancer.

Experts believe the drug, which is taken as a daily pill and is already proven to be effective in women with advanced breast cancer, could benefit thousands of British men every year.

They said the discovery was an “important step forward” for men with prostate cancer who would otherwise have “run out of options”.

The results of the first “phase two” trial of the drug, led by the Institute of Cancer Research and the Royal Marsden NHS Foundation Trust, showed it halted the progression of advanced prostate cancer by an average of 5.6 months – about twice as long with existing treatments.

The treatment was particularly effective for men who are genetically predisposed to develop prostate cancer due to a mutated BRCA gene.

Using the drug delayed the disease progression by an average of 11.2 months in prostate cancer patients who had the faulty BRCA genes.

However, the treatment also worked for men with ten other DNA mutations. In some cases, the treatment stopped tumour growth completely.

The phase two trial is the first to demonstrate the safety and

effectiveness of the drug for prostate cancer. It was so successful that a phase three trial is under way.

Despite rapid advances in the treatment for other cancer types, the number of men who die from prostate cancer is rising. In Britain, the toll is rising and is circa 32 every day. Personalised medicine breakthroughs have changed breast and ovarian cancer treatment and experts hope prostate cancer sufferers can benefit from the same revolution. This is the second personalised or precision medicine to be proven to work for prostate cancer, after similarly extraordinary results for olaparib.

Both drugs enable doctors to target cancer according to the patient’s genetic makeup, rather than the “one size fits all” approach of chemotherapy and hormone therapy. The new wave of drugs, called PARP inhibitors, exploit a weakness in cancer cells’ defence to kill a tumour without harming healthy tissue.

Matthew Hobbs, director of research at Prostate Cancer UK, said: “Talazoparib is now among a handful of precision medicines that have been shown to be safe and effective at controlling advanced prostate cancer. We need to drive progress in this area as quickly as possible”.

The results were published in The Lancet Oncology journal. The study’s leader, Professor Johann de Bono, said: “These results are yet another demonstration that PARP inhibitors work well in some men with prostate cancer – delaying the spread of the disease and extending their lives”.

Source: Health editor, The Time

Prostate cancer death rate could be cut in half by hormone therapy

The survival rate for thousands of men with aggressive prostate cancer could improve after it was found that adding a hormone therapy to their treatment halved deaths, Abiaterone, which is used in men whose prostate cancer has spread, can also help some with localised disease, researchers found.

The results of the Stampede trial, recently presented to cancer specialists, are likely to change the standard of care worldwide, experts said.

The chief investigator of the trial, Professor Nick James, of the Institute of Cancer Research in London and Royal Marsden Hospital said: "Today's results are the first study of intensified hormone therapy in this group.

"The results show that all men with high-risk prostate cancer that has not spread to other parts of the body benefit substantially from abiraterone treatment for two years," About 6,000 men a year would meet the criteria for using the drug. James said that his team was in "active discussions" with NHS England about how to implement the findings.

In the trial, 2,000 men were given either normal treatment, consisting of hormone therapy with or without chemotherapy, or normal treatment plus abiraterone. Half of those in the abiraterone trial also received another drug called enzalutamide.

After six years, 15 per cent of those given standard care had died from prostate cancer compared with 7 per cent who also received abiraterone. The cancer had not spread after six years in 82 per cent of the patients who were given abiraterone compared with 69 per cent in the standard care group.

Abiraterone was discovered at the Institute of Cancer Research, It is available for men in England with advanced prostate cancer

who have stopped responding to other types of hormone therapy. In July the National Institute for Health and Care Excellence (Nice) rejected its use as a first-line treatment for men diagnosed with high-risk prostate cancer.

Professor Gerhardt Attard, of University College London, another study author, said: "Based on these results, all men with high-risk non-metastatic prostate cancer should be considered for two years of abiraterone. This will involve more hospital visits during this period to manage administration of the drug but by reducing subsequent relapse may reduce the overall burden for both patients and health services."

Dr. Matthew Hobbs, director or research at Prostate Cancer UK, which has funded parts of this trial said: "We now hope to see abiraterone made available on the NHS for this group of men and look forward to seeing more research published by this impressive study. That's why Prostate Cancer UK is providing £2.5million in funding to help the researchers target prostate cancer treatments to work out which men will benefit most."

A separate trial known as Peace-1, the results of which were also presented at the European Society for Medical Oncology's annual conference, showed that giving docetaxel chemotherapy and abiraterone together at the same time as standard therapy could extend men's lives by up to 18 months.

All three drugs in the "triple treatment" will be generic by 2022, meaning their price is likely to fall significantly.

Dr. Maria De Santis, of Charité Medical University in Berlin said: "The findings have the potential to be implemented in our practice right away as we do not have to wait for the approval of a new drug,"

Source: The Times

SPSA GUIDANCE & CONTACTS

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JUST LOOKING – If you have picked up this newsletter and then feel you want to know more, telephone one of the committee or try our website.

JUST DIAGNOSED – If you have just been diagnosed you will probably have a host of questions to ask. You may well have chatted with the excellent urology nurses we have in our Somerset Hospitals and our support group will give you further options to help you become more knowledgeable about the disease. Please contact us if you wish to receive a copy of our newsletter.

WEBSITES - www.somersetprostatecancer.org.uk • Please try to access our website as we feel it will help you whatever your prostate problem.

FREE QUARTERLY NEWSLETTERS - with news of what is happening locally, nationally and internationally in the prostate world. Many men who join us, just like to keep in touch by receiving these newsletters.

MEETINGS - with speakers, where you can ask questions of the experts & other men

CONTACTS - Email: support@somersetprostatecancer.org.uk,

DONATIONS: TIM LEWIS,
Treasurer, Mulberry House, Bridgwater Rd, Winscombe, N Somerset, BS25 1NH.

UROLOGY NURSES: Musgrove Park Hospital Taunton
Wendy Enticott, Amie Perry, Amy Holman, Sharron Ayerst and Milly Canton
Tel: 01823 344 628 • Nita Beecham Tel 01823 343 288
Yeovil District Hospital - Tel: 01935 384 394
Debbie Cole, Kirsten Abery and Claire Lynch.

TACKLE (Prostate Cancer Support Federation) - HELP LINE 0800 035 5302 (available 24/7)

PROSTATE CANCER UK, 4th floor, The Counting House, 53 Tooley Street, London SE1 2Q

NURSE HELPLINE - 0800 074 8383 (Mon - Fri 10am - 4pm)

General Disclaimer SPSA is a charity providing news, information, personal memoir and opinion about prostate cancer via newsletters, meetings and its website. The group also reports, quotes and cites published medical views and research findings about prostate problems. Anyone who wishes to embark on any dietary, drug, exercise or other lifestyle change intended to prevent or treat a specific disease or condition, should first consult with and seek clearance from a qualified health care professional.

www.somersetprostatecancer.org.uk

