

## **North Texas Prostate Cancer Coalition**

## **Annual Meeting, October 30, 2010**



Together For Good Health





- Opening Remarks
  - The Coalition
- Administrative
  - Minutes
  - Election, Directors
  - Financial Reports, 2009, 2010 (Current)
  - 2010 Budget
- Program Review
  - Awareness Programs
  - Survivor Programs
- Concluding Comments
- Break
- Report on NASPCC Meeting
- Screening Support, Volunteers
- Health Fairs
- Risk Assessments
- Tyler Programs
- Open Discussion

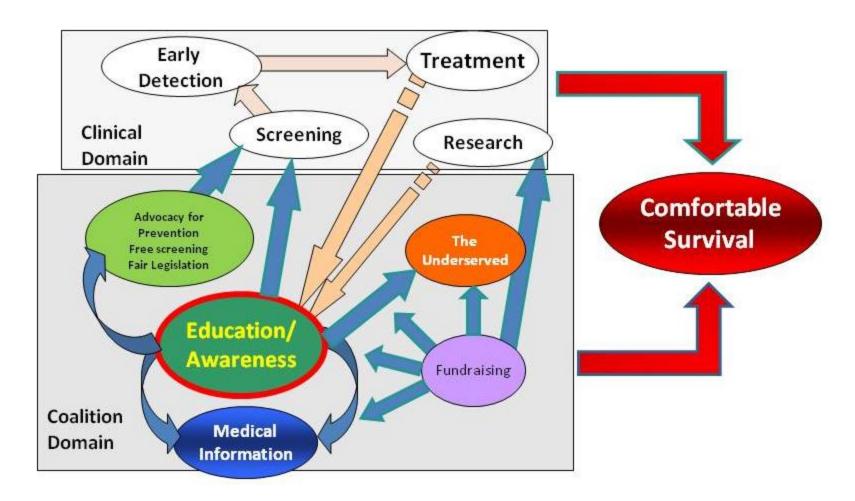


# **NTXPCC** History

- Started with a website for a local Support Group in Fort Worth, 2008
- Found another survivor interested in awareness programs
- Added Six Support Groups within the DFW Area
- Formed a Coalition, Spring 2009
- Elected Directors & Officers, Fall 2009
- Applied for Non-Profit Status for Texas approved
- Applied for 501 (c)(3) status with IRS approved
- Expanded to include Tyler PCAP, June 2010













# **NTXPCC Organization**



**Officers** 

**Members** 

Medical Advisors

Board of Directors

Terrence Ates
Wolfram Blattner
Tom Dillon
Bruce Stahl
Terry Theiss

Pete LaNasa, MD Trey Moore, MD Matt Shuford, MD

**Bob Williams** 

Man-To-Man, FW (ACS Office)

Man-To-Man, Plano (Med. City, Plano)

Tyler Prostate Cancer Awareness Program (PCAP)

Us TOO Baylor, Dallas

Us TOO Baylor, Plano

Us TOO Medical City, Dallas

Us TOO Mid-Cities (at TH HEB, Bedford)

Us TOO TH Presbyterian, Dallas



## **Coalition Status**

## Non-Profit

- Registered Non-Profit Corporation in Texas
- Received 501(c)(3) approval from IRS, Feb. 2010
- Exempt from Franchise Taxes





## **Area Interest Groups**

Some local prostate cancer groups not members of NTXPCC

## **Statewide Interest Groups**

- Identified some of them
- Statewide plans TBD

#### **NTXPCC**

NTXPCC will stay as North Texas Coalition





#### **Current Directors:**

Terrence Ates

Wolfram Blattner (3 years)

Tom Dillon (3 years)

**Bruce Stahl** 

**Terry Theiss** 





Donations	Income \$425.68	Expenses	6
Organizational Expense Checking Account Certificate		\$ 22.20	IRS, 501(c)(3) Compass Bank State of Texas
<u>Total</u>	<u>\$425.68</u>	<u>\$347.88</u>	
Cash on hand, Dec. 31, 2009		\$ 77.80	

Bruce Stahl Treasurer, NTXPCC bstahl@prodigy.net

# Financial Statement Jan. 1, 2010 thru Sept. 30, 2010



Cash on hand, Jan. 1, 2010

Cash on hand, Sep. 30, 2010

\$ 77.80

\$ 7,068.04

Donations	Income \$8,762.73	Expenses
Brochure, art work		\$ 340.00
Brochure, 5000 cps		\$ 1,100.00
Models		\$ 60.99
T-Shirts		\$ 271.50
<u>Total</u>	\$8,762.73	\$ 1,772.49

Bruce Stahl Treasurer, NTXPCC bstahl@prodigy.net

More details available On request

## Budget, 2010

(BoD approved)



\$ 8,500.00 **DONATIONS AND GRANTS** 



EXPENSES		
HEALTH FAIRS AND SCREENING EVE	NTS	
PCa Model		\$ 60.00
Other Support		\$ 300.00
New Health Fair Brochure		\$ 2,000.00
	Total	\$ 2,360.00
AWARENESS PROGRAM (Brochure)		
Artwork		\$ 350.00
T-Shirt, Volunteers		\$ 360.00
Brochure Printing		\$ 1,500.00
_	Total	\$ 2,210.00
SPEAKERS BUREAU		•
Printing, CDs		\$ 200.00
G.	Total	\$ 200.00
OFFICE EXPENSES		•
Printing		\$ 300.00
Postage		\$ 100.00
Awards		\$ 200.00
Contingency Funds		\$ 500.00
Website		\$ 100.00
Misc		\$ 60.00
50	Total	\$ 1,260.00
	10101	÷ 1,200.00



North Texas Prostate Cancer

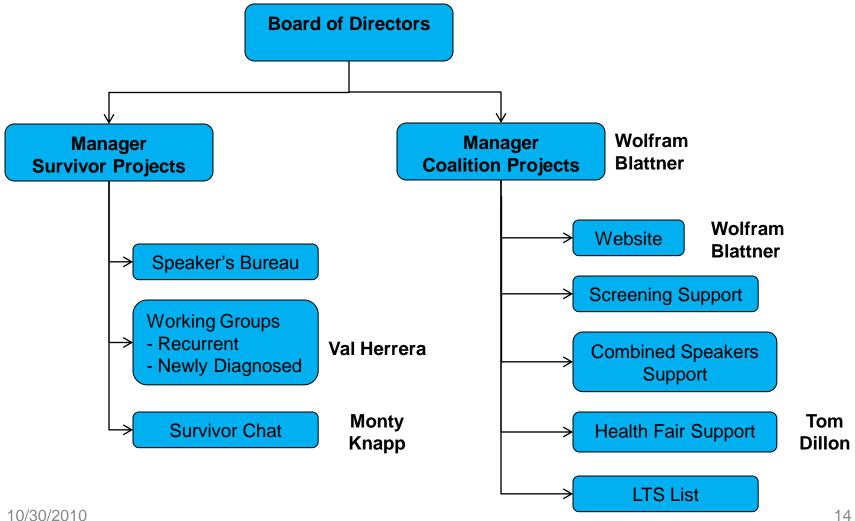


# **NTXPCC**

Program Review, 2010

# **NTXPCC Programs**







## **2010 Progress**

- 501 (c)(3) approved
- Added organization: Tyler PCAP
- Concentrated on Awareness Programs
  - Added Survivor Chat
  - Added Health Fair Support
  - Created Awareness Brochure
- Received Funding (2 grants and one major donation)



- Speakers' Bureau
- Health Events Support
- Posters/Brochures

## **Survivor Programs**

- Support Group Meetings
- Long Term Survivor (LTS) List
- NDX Program
- Workshop for recurring survivors
- Let's Talk on Tuesday ...
- **STEPS**
- Combined Speakers

## Website

## **Fundraising**



# Speakers' Bureau



### **Early Detection Presentation**

- Baylor/Plano Screening (2)
- Tyler PHIGS Conference
- Medical City, Screening (3)
- Baylor/Dallas Screening (Continuous Slide Show)

#### **Verbal Presentation**

Fort Worth Church

#### Other

Community Involvement Presentation (PHIGS)

## **Health Fair Support**



#### **Typical Setup**

- Stand-Up Poster
- PCa Model
- Handouts (mainly high risk Us TOO brochure)
- Area Screening List
- UT Risk assessment chart

#### **Optional**

- Online risk assessment (requires wifi)
   Note: not used at screenings
- Early Detection presentation



Note: We have too many handouts at some events May be confusing!

# Awareness Events, Support (May – July, 2010)



May 15; Word of Life Ministries, Mesquite, Health Fair

May 15; Omicron Mu Omega Foundation, DeSoto, Health Fair

June 12; DadFest, Richardson; Health Fair

June 19; "It's a Guy Thing", Baylor/Dallas; Health Fair

June 19; "It's a Guy Thing", Baylor/Plano; Health Fair and Screening

June 24; Texas Health Presbyterian/UREF, follow-up screening

July 17; 50 Hoops Basketball Tournament - Prostate Cancer program

July 27; <u>Health Fair, Texas DoT</u>, Fort Worth

# Awareness Events, Support (August – September, 2010)



- Aug. 21; "Hotter Than Hell", Harley Davidson party (with Baylor/Dallas)
- Aug. 27; Health Fair Station in connection with ManPower Conference
- Aug 28; Health Fair, Destiny Church, Fort Worth
- Sep. 4; Screening, Urology Res. & Ed. Foundation at Mt. Hebron Missionary Church
- Sep. 7; Survivor Celebration, Baylor/Dallas
- Sep. 11; Screening at The Medical Center of Plano
- Sep. 17; PHIGS Conference , Tyler; 2 presentations
- Sep. 18; "Cruisin' for a Cure" car show and screening (with Texas Health Harris, FW)
- Sep. 24; <u>Dinner Lecture</u> (50 Hoops)
- Sep. 25; Screening at Baylor/Dallas
- Sep. 25; Screening Day Medical City/Dallas
- Sep. 27; Golf Tournament Urology Research and Education Foundation

(20 Events during 2010)





June 19; "It's a Guy Thing" - Baylor SW (FW), Baylor (Grapevine)

July 23; Golf Tournament "Know Your Score" (not accepted, also cancelled)

July 28; Health Fair, Craig Resource Center, Pleasant Grove (missed)

Sep. 18; Health Fair/Screening, Lancaster (Church) (Methodist Dallas)

Sep. 25; Screening at Texas Health Harris HEB/Bedford (HEB declined)

Sep. 25; Screening at Texas Health Presbyterian/Plano (not requested)

## Screening Data, 2010



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#### Events

- DadFest; THR Presbyterian/Dallas Risk Assessment & follow-up screening
- Men's Health Day, Baylor/Plano (No DRE)
- Cruisin' for a Cure Carshow (TH Harris Methodist/Fort Worth; USMD)
- Free PC Screening, The Medical Center of Plano
- Free Male Health Screening, Medical City/Dallas
- Free PC Screening, Baylor/Dallas
- UREF at Mt. Hebron Church, Plano
- TH Harris HEB/Bedford (September, did not participate!)

## Requirements

- PSA & DRE
- Some hospitals lowered minimum age requirements to 35 or 40

#### Numbers

10% less than last year (DadFest; bad weather during Baylor/Dallas and Medical City Dallas screenings)

## Screening – The Next Step #1?



### NBA Opportunity?

- 2009 Screening at Chicago Cubs NBA interest
- Presbyterian connected with Mavericks

## NFL Screening

– NFL/AUA Screening Super Bowl week; who's participating?

## Zero has contract with Washington Capitals

- Zero is visiting Philadelphia Flyers
- Screening possibility with Stars?

#### • FC Dallas?

Presbyterian, Wolfram have connections

#### • Rangers?

– Where are Tom Grieve, Scott Murray?

## Screening – The Next Step #2?



## New Screening Program?

- Small screening events (churches, clubs, etc.)
- Some hospitals have policies against "outside screening"
- Urology association or hospital identifies physicians/nurses for possible screening day
- Request will be honored if a minimum number of men are signed up before the fair (deals with small numbers)
- Screening times will be adjusted to number of men signed up

UREF screening at Mt. Hebron Church, Plano

## **Brochure**

Early Detection is the Key to Successful Treatment.

GET SCREENED!

North Tellas Prostate Cancer Coalition

New guidelines by the American Urology Association (AUA) recommend prostate cancer screening for men aged 40 or older, stating that an above average PSA score at age 40 is a strong predictor of developing the disease later in life.

In addition, AUA recommends that men who wish to be screened have a digital rectal exam as well as PSA testing.

Risk factors for Prostate Cancer are AGE FAMILY HISTORY and RACE

Are you well informed? Are you aware of your risks? Do you know your PSA?

Get Educated About Prostate Cancer!

#### Support and Member Groups

Man To Man, Fort Worth (at ACS Office) Contact: Gayle Wilkins, 817-820-4868

Man To Man, Plano (at Plano Medical Center)

Contact: Gene Hogan, 214-473-7697

Tyler Prostate Cancer Awareness Program
Contact: Terrence Ates, 903-565-5926

Us TOO, Baylor Medical Center, Dallas Contact: Polly Candela, 214-820-3595

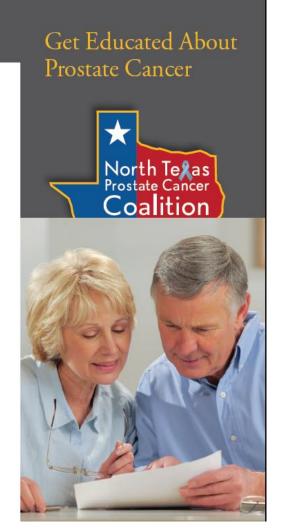
Us TOO, Baylor Regional Medical Center, Plano Contacts: Emily Gentry, 469-814-6753 Tom Dillon, 972-998-5221

Us TOO, Mid-Cities
(at Texas Health Harris Methodist HEB, Bedford)
Contact: Jaren Smith. 214-536-0254

Us TOO, Medical City Dallas Hospital Contacts: Jan Tichenor, 972-566-5793 Justin Sucato, 214-405-5460

Us TOO, Texas Health Presbyterian, Dallas Contact: Angie Clark, 214-345-5030

Check our supporters on our Website www.ntxpcacoalition.org



## **Brochures**

## **Education Brochure**

- Intent to distribute to physicians
- Where are you on this?

## Awareness brochure (screening)

- Planning stage
- Similar to Us TOO brochure
- Possibly combined with Us TOO



# Dadfest / Prostate Cancer Awareness Night at the Dallas Mavericks Wednesday, March 3, 2010 7:30 p.m.

The Dallas Mavericks will be hosting the Dadfest / Prostate Cancer Awareness Night, Wednesday, March 3rd. We will be handing out Dadfest brochures, prostate cancer education brochures, and a free giveaway (TBD) at the doors as the fans enter the American Airlines Center.

Urology Research & Education Foundation will have a booth in the foyer where we will be conducting prostate cancer risk assessments. Urologists will be available to answer questions. We will also be taking registrations for Dadfest. Announcements will be made during the game about Dadfest, the prostate cancer information table and recognition of the prostate cancer survivors.

If you are interested in attending the game and would like to sit with the prostate cancer group and receive a turquoise Dadfest t-shirt please email Angela Clark at aclark@airmail.net or call her at 214-345-5030. The cost for tickets is \$15 for the upper level or \$69 for the lower level. Angela will purchase the tickets and you can reimburse her prior to attending the game. The deadline for requesting Mavericks tickets is **February 19th.** 

This is our opportunity to promote prostate cancer awareness in a large venue. Lets have a good showing of support by having a big group in attendance.







# **Increasing Awareness**

# **Support Group Meetings**



- Seven Support groups
- Two with regular "high" attendance
- Need more physicians' support (Brochure ...)

Lack of Speakers



## **Long Term Survivor List**



NTXPCC LTS volunteer members will talk about own experience only

#### LTS List

Surgery

Radiation

Other Treatment/Multiple Initial Treatment

**Incontinence** 

**Multiple Treatments (Recurrence)** 

**Spousal Support** 

#### **Patient Visits**

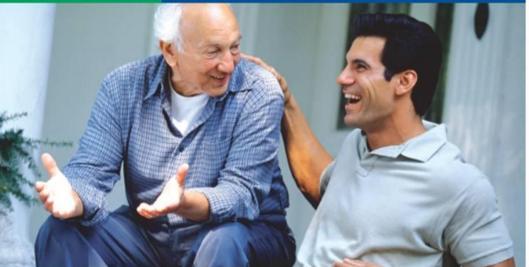
Baylor/Dallas

**USMD** 

# Workshops

- Low attendance
- NDX
  - Currently on hold
  - Monthly meetings may not be attractive for newly diagnosed
- Recurrence
- Combine?
- Need more support from physicians





#### Sponsored by the Prostate Cancer Resource Center and The North Texas Prostate Cancer Coalition

Prostate Cancer Survivors are waiting to talk with you ...

- Informal chat sessions with survivors
- Learn about treatment options and questions to ask your doctor.
- Provide reassurance and support you may need to face treatments.
- Learn about support groups and educational classes offered free!

#### Tuesdays - from 10:00 am - 2:00 pm

Cancer Resource Center - Klabzuba Tower Ground Floor 1300 W. Terrell Avenue, Fort Worth. Texas 76104

For more information – contact Gayle Wilkins, MSN, RN, OCN Prostate Cancer Resource Center - 817-820-4868



Doctors on the medical staff practice independently and are not employees or agents of the hospital.





## **Survivor Chat**

- Slow start, but picked up
- Some great sessions
- Time used to prepare for other events on slow days
- Need more physicians' support

# STEPs To Surviving Prostate Cancer



6 week series, coordinated by the Prostate Cancer Resource Center at Texas Health Harris, Fort Worth

Program run in spring and fall

Attendance declined compared to previous years Need increased physicians' support

# **Combined Speakers Support**

#### 2009

1st Annual Prostate Cancer Survivors' Celebration (Baylor/Dallas)

**Local speaker: Scott Murray** 

Attendance ~ 150

**Recognition Award** 

#### 2010

2<sup>nd</sup> Annual Survivor Celebration (Baylor/Dallas)

**Baylor CEO addressed issues with New Healthcare** 

**System Recognition Award** 

Attendance ~ 200

Unable to secure Dr. Ian Thompson

# **Combined Speakers**



#### **2011 Plan**

- Seems that Baylor/Dallas will continue the Annual Survivor
   Celebration event
  - Possible speaker identified
- National Speaker
  - Possible National Speaker (Dr. Partin), April 2
  - Can't concentrate on single speaker
  - Anybody volunteering for 2012?
  - Should be separate from September Survivor Celebration event
- Please notify us in time if you are planning to bring in other speakers

We will support

## Website



- Plenty of Information
  - Up-to-date
- Try to stay away from controversial information
  - Three medical advisors
- All events are posted
  - Chapter leaders are responsible for correctness of information regarding their respective chapter
  - Related events are posted as well
- Added page for sponsors/supporters
- Love to have input / suggestions
  - Major or minor





## Area Hits, 2009/2010

2009 2010(Oct15)

Total Hits: 1,527 1,474

Average: 4.2/day 5.0/day

#Countries 11 24

**#US Cities: 203 291** 

**#US States:** 41 45

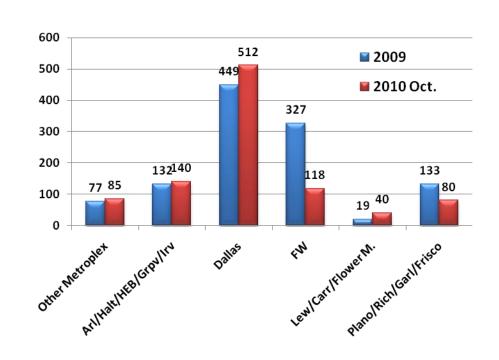
- Includes DC

**Texas:** 84%

NTX: 79 %

Metroplex: 76%

Increase of 19%





## **New Effort**

### **Outreach to Underserved**

- Working with 50 Hoops and Potter House
- Trying to create Support Group in South Dallas (large minority population)

10/30/2010



# Member Response

- Good working relationship with and between members
- Specific actions
  - Request for registration of screenings (AUA Website, early 2010)
  - Survivor Celebration
  - Request for petition ("Help Football Fans See Blue")
  - Research survey
  - Super Bowl Screening
  - Brochure distribution
- Please increase communication

# North Texas Prostate Cancer Coalition

# Challenges

- Need program managers
- Manpower shortage
- Physicians' Support
  - "I trust the Coalition, but not all Support Groups"
  - "I think a recurrence group poorly reflects on my clinic"
- Hospital Support
  - We have financial support
  - We also need awareness support:
    - "Medical City Dallas Goes Pink"
  - How about: " ... Hospital and NTXPCC Go Blue?"

### **NASPCC**



(National Alliance of State Prostate Cancer Coalitions)

### Mission Statement

To provide support to existing state prostate cancer organizations; to facilitate the development of new state prostate cancer organizations; and to serve as a collective and collaborative voice to make prostate cancer a national health care priority.

### Currently 30 State Coalitions (plus DC)

- Including Texas (TPCC)
- Will add 2 or States by the end of the year
- Some of the "State Coalitions" are single groups

- Membership definitions within NASPCC will be re-defined



# NASPCC Meeting – Chicago (Oct 3-4)

- State Coalition Expectations
  - Support Early Detection
  - Participate in patient education
  - Develop statewide communication network
  - Participate in National/NASPCC activities, requests and task
- Main emphasis on assisting in strengthening State Coalitions
- Minutes mailed to NTXPCC leadership
- Guest Speaker
  - Alan Partin, MD (Johns Hopkins)

**Bio-Markers** 

## **Screening Support - Example**



### When helping at a screening event: (Car Show, FW)

Make sure men know what they are waiting in line for...

Explain there will be both a lab test and DRE – it is important to do both (assure them it's not too bad) and if they say they want to only test PSA – explain it's our policy to do both. If they don't want to do both, than they need to excuse themselves from the screening.

Ask the men if they are having any urinary problems (burning, pain, that type of thing.)

Screenings are for men with NO symptoms (BPH symptoms are okay).

Ask when they had their last screening. If it was anytime within this year (last 9 months) than ask them to wait for next screening.

This is NOT the place to be checking on previous elevated PSA's or double check someone else's results.

Make sure the men have not already been treated for cancer. (We always get a few wanting a follow up PSA)

Make sure they are old enough! At least 50 – if they are younger and want to be screened, ask them to talk to nurses first to determine if at high risk and appropriate to be screened.

Policies at different

screening events will be different

10/30/2010

## **Health Fair Support - Example**



# Job Descriptions for Survivors at Health Fairs (TH Harris Methodist - Modified)

Be friendly and engage men of screening age in conversation.

Ask men if they have been screened for prostate cancer in the last year.

It is okay to tell them that you are a survivor and encourage them to get tested.

Distribute pamphlets – but don't force them. If someone really doesn't want it – they'll just throw it away at the next trash can.

Answer questions the men have about how they do testing, what's it like, that type of thing.

Do not go into details about your personal experience with biopsy, or other specific medical details.

The emphasis here is to assure them it's not so bad and probably saved your life.

Refer specific medical type questions to the nurse with you at the event (if applicable).

Encourage men to get screened or see their Dr. – but do not push too hard....

There is still controversy about the benefit of PSA testing and its overall impact on prostate cancer survival. – OK to mention screening risks

Encourage women to take the information home to the "men in their lives" – it might be a husband, brother, father, son, uncle, boyfriend, etc...

### **Risk Assessment**

Cancer Risk: Washington University School of Medicine Siteman Cancer Center

http://www.yourdiseaserisk.wustl.edu/

Risk of Positive Biopsy: UT Health Science Center

http://deb.uthscsa.edu/URORiskCalc/Pages/calcs.jsp?

"Know your Stats": AUA Foundation (descriptive only)

http://www.knowyourstats.org/

Other risk assessment calculators probably not suitable for health fairs

- Require more specific data (free PSA, etc.), not available from most men
- Data input by survivors will be questioned

#### Notes:

- Neither tool is preferred
- This is not a push for risk assessment;
   this is merely a description of what is available

### Risk Assessment – Washington University **School of Medicine**

**Inputs** 

Sex Male

65 Age

Previous cancers?

(other than melanoma)

Family History, father or brother

Hispanic

Race

Height

Milk/yogurt/cheese

Animal fat (red meat, cheese)

Tomato based food

**Example** 

No

Don't Know

No

white

5'8"

1-2 servings/day

>5 servings/day

<5 servings/week

### Risk increases with

- Height
- High calcium intake
- High intake of animal fat
- Lack of lycopene

http://www.yourdiseaserisk.wustl.edu/hccpquiz.pl?lang=english&func=home& quiz=prostate 10/30/2010

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# Risk Assessment – Washington University School of Medicine

Cancer

Diabetes

Heart disease

Osteoporosis

Stroke

#### 8 ways to prevent disease

#### What is ...?

Prevention

Risk

A Screening Test

#### How to...

Estimate Risk

#### **Community Action**

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Glossary

#### Cancer—Prostate cancer

Results: Prostate cancer Compared to a typical man your age, your risk is above average

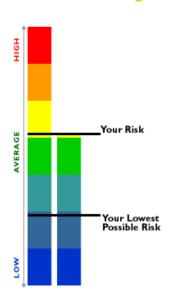
#### Screening Tip

Beginning at age 50, talk to a doctor about the risks and benefits of screening. More >>

Results, Using Example Data

Above average risk doesn't mean you'll definitely get cancer. It's just an estimate based on your risk factors, some of which you may not be able to change. If you have any concerns, talk to a doctor.

#### Your risk is above average



#### Watch Your Risk Drop

You have 2 things you can do to lower your risk. To see what your risk could be, click on a box and watch your risk drop:

- Eat less than 5 servings of foods that contain animal fat a day. [Tips]
- Eat 5 servings of tomato-based foods a week. [Tips]

Prostate cancer has few controllable risk factors. But it's still important to know your risk and how these factors relate to it. Choose a healthy lifestyle to protect against prostate cancer as well as other diseases. And don't forget to follow the screening recommendations.

#### Keep up the good work!

You're already doing these things to lower your risk:

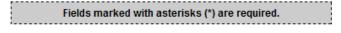
You don't get too much calcium. [More]

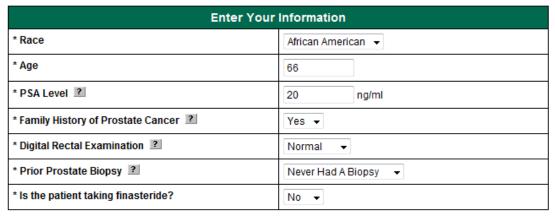
# UREF Experience with Know Your Risk 40% no match

Risk Assessment Results	Screening Results			
Above average	Normal 7			
Average	Normal 1			
Below average	Normal 8			
	Abnormal 3			
Low risk	Normal 1			
Much above average	Normal 5			

# Risk Assessment – UT Health Science Center

#### Risk of Biopsy-Detectable Prostate Cancer





- -Valid for age 55 and above
- <55? Risk will be greater
- No DRE? Assume normal
- No PSA? Assume typical

Calculate Cancer Risk					
BMI Adjusted Calculator	Risk Incorporating PCA3				
Figures	Disclaimer				

Based upon 5519 men in PCP trial Also available:

- BMI and PCA3 adjusted calculator

http://deb.uthscsa.edu/URORiskCalc/Pages/calcs.jsp?SubmitUseBMICalc=

# Risk Assessment – UT Health Science Center

#### Risk of Biopsy-Detectable Prostate Cancer

#### Results

Based on the data provided, the person's estimated risk of biopsy-detectable prostate cancer is 73.4%.

The 95% Confidence Interval for this prediction is 68.7% to 79.1%.

More information about the confidence interval

The person's estimated risk of biopsy-detectable high grade prostate cancer is 64.7%.

The 95% Confidence Interval for this prediction is 50.5% to 79.1%.

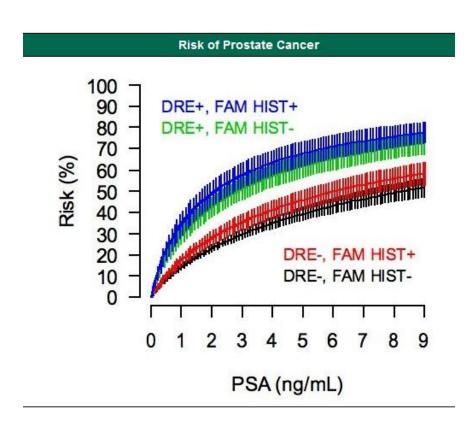
More information about the confidence interval

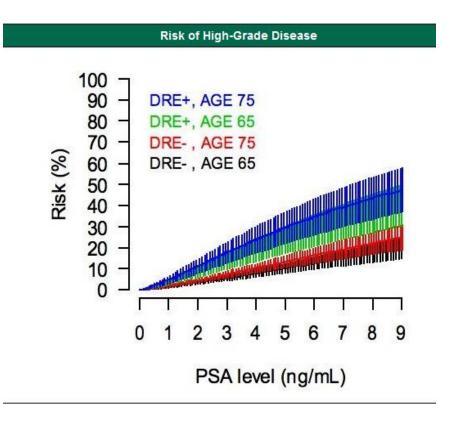
Your Information				
Race	African American			
Age	66			
PSA Level	20 ng/ml			
Family History of Prostate Cancer	Yes			
Digital Rectal Examination	Normal			
Prior Prostate Biopsy	Never Had A Biopsy			
Is the patient taking finasteride?	No			

Another Calculation

10/30/2010

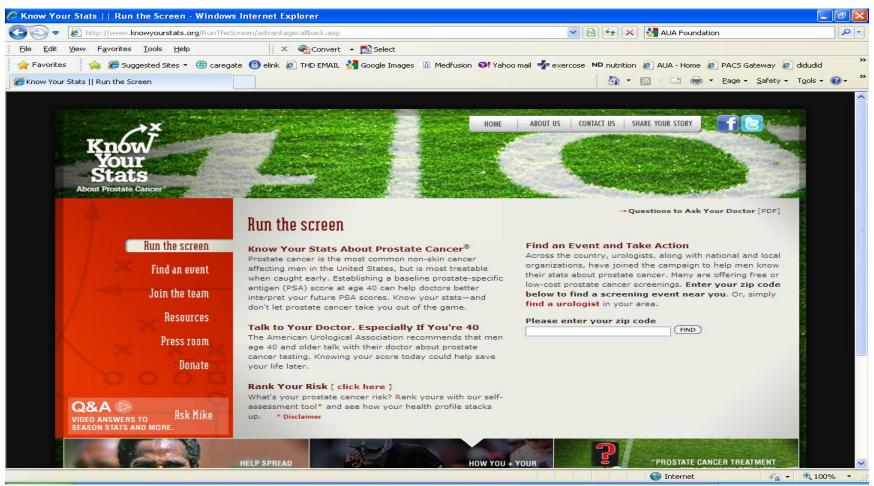
# Risk Assessment – UT Health Science Center

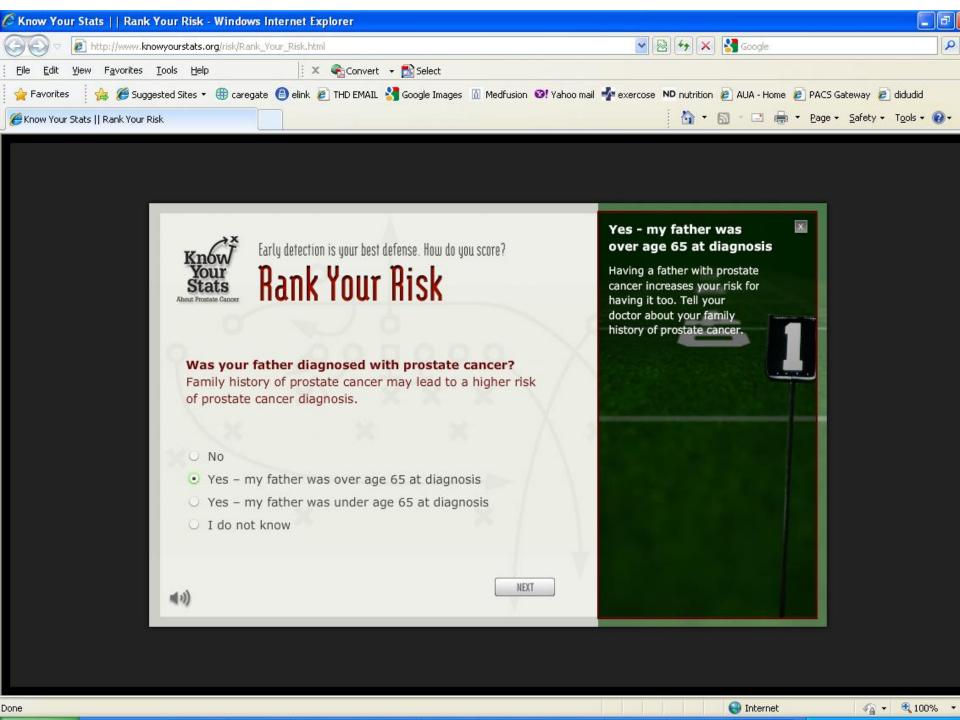




### **AUA Foundation**

## http://www.knowyourstats.org





# **Knowyourstats.org**

- Age group
- Ethnicity
- Family history: Father
- Family history: Brother
- Height & weight
- Diet: red meat, full fat dairy, fried foods
- How often 5 or more servings of vegetables a day
- Serve on active military duty
- Know your PSA number?
- Ever had a DRE?

# **Compared 3 Assessment Tools**

- 55 yr old
- African-American
- Ht 5'11, 180 lbs.
- FH of prostate cancer in father
- Good diet; low animal fat; high intake of veggies
- Know PSA value (2.5 ng/ml)

### **PCPT**

### Siteman

### Risk 32.1% (Avg man is 16%)

### Risk Above Avg

#### Results

Based on the data provided, the person's estimated risk of biopsy-detectable prostate cancer is 32.1%

The 95% Confidence Interval for this prediction is 29.1% to 36%. More information about the confidence interval

The person's estimated risk of biopsy-detectable high grade prostate cancer is 8.2%.

The 95% Confidence Interval for this prediction is 3.8% to 12.7%. More information about the confidence interval

Your Information				
Race	African American			
Age	55			
PSA Level	2.5 ng/ml			
Family History of Prostate Cancer	Yes			
Digital Rectal Examination	Normal			
Prior Prostate Biopsy	Never Had A Biopsy			
Is the patient taking finasteride?	No			

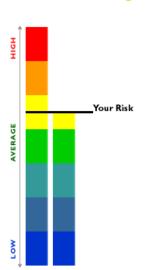
Results: Prostate cancer Compared to a typical man your age, your risk is above average

#### Screening Tip

Beginning at age 50, talk to a doctor about the risks and benefits of screening. More >>

Above average risk doesn't mean you'll definitely get cancer. It's just an estimate based on your risk factors, some of which you may not be able to change. If you have any concerns, talk to a doctor.

### Your risk is above average



Based on how you answered the questionnaire and what we know about prostate cancer, you're doing what you can to lower your risk.

Prostate cancer has few controllable risk factors. But it's still important to know your risk and how these factors relate to it. Choose a healthy lifestyle to protect against prostate cancer as well as other diseases. And don't forget to follow the screening recommendations.

#### Keep up the good work!

You're already doing these things to lower your risk:

- You don't eat 5 or more servings of food with animal fat a day. [More]
- You eat 5 or more servings of tomato-based foods a week. [More]
- . You don't get too much calcium. [More]



# No risk given

pat,

Age is an important risk factor for prostate cancer. The chance of having prostate cancer goes up as a man gets older. The American Urological Association recommends men who expect to live at least 10 years should discuss the risks and benefits of PSA screening with their doctor. Know your PSA score and pay attention to changes in that score over your lifetime. Talk to your doctor about prostate cancer screening.

African American men are at highest risk of prostate cancer—it tends to start at younger ages and grow faster than in men of other races. They have about a 60 percent higher incidence than White men. All men should be checked for prostate cancer, beginning at age 40. Your doctor will recommend a screening schedule for you.

Having a father with prostate cancer increases your risk for having it too. Tell your doctor about your family history of prostate cancer.

Even men who do not have a family history of prostate cancer can still get it.

Your BMI was 25. Having extra weight is not healthy overall. It could increase your risk of dying from prostate cancer. Take steps to get in shape now.

A high-fat intake increases a man's risk for advanced prostate cancer. Keep up the good work of not having too much of these foods in your diet.

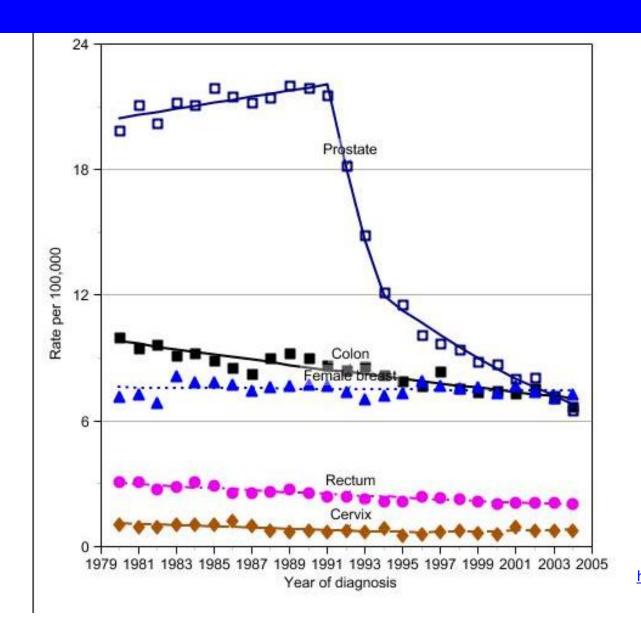
Many fruits and vegetables have vitamins and minerals that can help keep you healthy. Keep eating these healthy foods regularly.

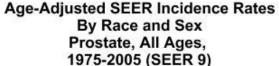
Even though you did not serve in the military, you may still be at risk for prostate cancer. Talk to your doctor about prostate cancer screening.

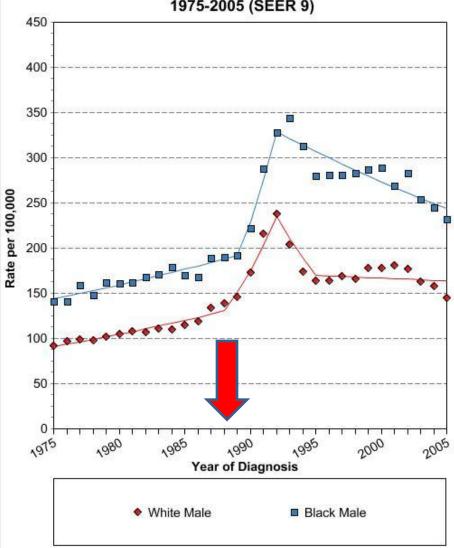
It's good to know your PSA score, that way you and your doctor can keep track of how it may change over time. If your PSA is high for your age or steadily rising, with or without an abnormal physical exam of your prostate with a DRE, a biopsy to look for signs of cancer may be recommended.

Way to go. An annual digital rectal exam (DRE) and PSA test combined are your best defense against prostate cancer. Keep up the good work and see you next season!

## **New Cases of Late Stage Disease '80-'04**



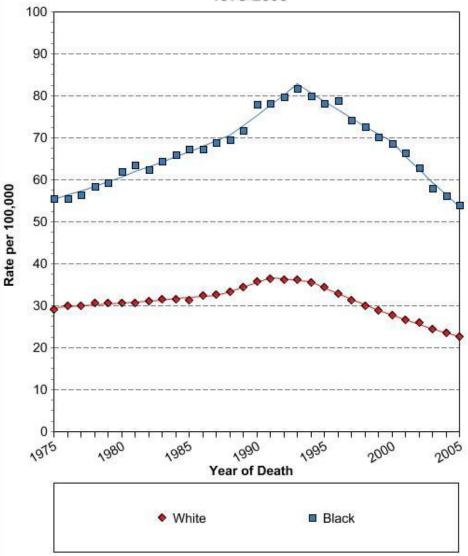




Cancer sites include invasive cases only unless otherwise noted.
Incidence source: SEER 9 areas (San Francisco, Connecticut, Detroit, Hawaii, Iowa, New Mex Seattle, Utah, and Atlanta).

Rates are per 100,000 and are age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130). Regression lines are calculated using the Joinpoint Regression Program Version 3.3, April 2008, National Cancer Institute.

Age-Adjusted U.S. Mortality Rates By Race/Ethnicity Prostate, All Ages, Male 1975-2005



Cancer sites include invasive cases only unless otherwise noted.

Mortality source: US Mortality Files, National Center for Health Statistics, CDC.

Rates are per 100,000 and are age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130). Regression lines are calculated using the Joinpoint Regression Program

# Trends in Five-year Relative Survival (%)\* Rates, US, 1975-2004

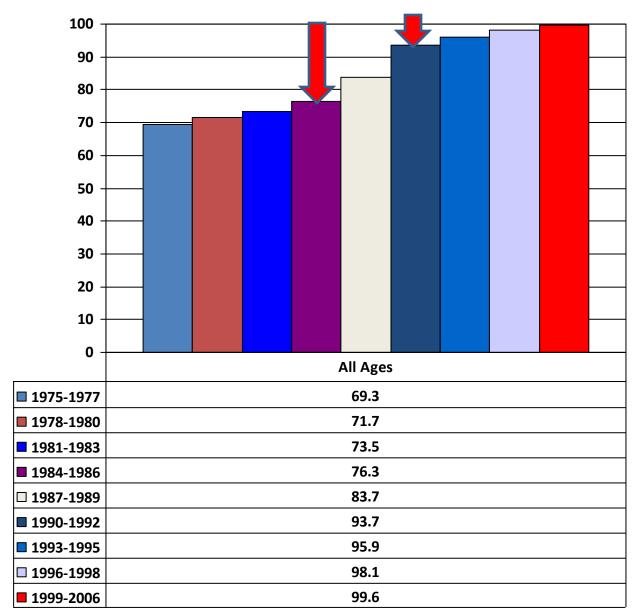
Site	1975-1977	1984-1986	1996-2004	
All sites	50	54	66	
Breast (female)	75	79	89	
Colon	52	59	65	
Leukemia	35	42	51	
Lung and bronchus	13	13	16	
Melanoma	82	87	92	
Non-Hodgkin lymphoma	48	53	65	
Ovary	37	40	46	
Pancreas	3	3	5	
Prostate	<b>69</b>	<b>76</b>	99	
Rectum	49	57	67	
Urinary bladder	74	78	81	

<sup>\*5-</sup>year relative survival rates based on follow up of patients through 2005. Source: Surveillance, Epidemiology, and End Results Program, 1975-2005, Division of Cancer Control and Population Sciences, National Cancer Institute, 2008.

### 5-Year Survival

		All Races			White		Black			
	Year of Dx	All Ages	Ages <65	Ages 65+	All Ages	Ages <65	Ages 65+	All Ages	Ages <65	Ages 65+
	1960-1963ª	-	-	-	50	-	-	35	-	-
	1970-1973ª	-	-	-	63	-	-	55	1	-
	1975-1977 <sup>b</sup>	69.3	73.6	67.7	70.2	75.4	68.4	61.4	62.1	61.1
	1978-1980 <sup>b</sup>	71.7	75.5	70.3	72.9	77.1	71.4	62.8	65.2	61.6
	1981-1983 <sup><u>b</u></sup>	73.5	76.3	72.5	74.6	77.9	73.5	63.7	65.4	62.9
	1984-1986 <sup>b</sup>	76.3	77.6	75.9	77.6	79.3	77.1	66.3	67.5	65.8
	1987-1989 <sup><u>b</u></sup>	83.7	83.3	83.9	85.3	84.8	85.5	<b>72.1</b>	72.7	71.9
	1990-1992 <sup>b</sup>	93.7	93.1	93.9	94.8	94.1	95.0	85.2	86.6	84.5
	1993-1995 <sup>b</sup>	95.9	95.9	95.9	96.6	96.5	96.6	92.2	93.1	91.7
	1996-1998 <sup>b</sup>	98.1	98.5	97.9	98.6	98.9	98.4	95.2	96.7	93.8
	1999-2006 <sup>b</sup>	99.6 <u>e</u>	99.3 <u>e</u>	99.8 <u>e</u>	99.9 <u>e</u>	99.5 <u>e</u>	99.8 <u>e</u>	97.3 <u>e</u>	98.6 <u>e</u>	96.0 <u>e</u>

### 5-Yr Survival Based on Yr of Dx All Races & Ages







# **Tyler Programs**



# **Open Discussion**

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10/30/2010



### **North Texas Prostate Cancer Coalition**



### TOGETHER FOR GOOD HEALTH