

# PHAROS

*A beacon of hope in the darkness*

*Newsletter of the Reading Prostate Cancer Support Group (RPCSG)*

*Issue 80: July 2018*

*Website: [www.rpcsg.org.uk](http://www.rpcsg.org.uk)*

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## THE JULY MEETING

The Chairman welcomed everyone to the meeting, including two new members. He then mentioned the next RPCSG walk, more detail of which can be seen later in this newsletter.

The speaker at the meeting was Dr Elias Pintus. He introduced himself, saying that he is a medical oncologist and so not focused on radiotherapy, but instead he has a main interest in drug therapy and clinical trials and research. He has carried out a lot of work in the Wexham Park and Ascot hospitals. He had an early interest in the causes of cancer and the role of DNA.

He returned to his home country of Sardinia to work in community oncology, and after five years in an oncology team, returned to England.

Dr Pintus then gave an update on advanced prostate cancer. He classified three groups of patients:

- Metastatic disease responsive to LHRH implants (reduced testosterone levels)
- Non-Metastatic disease responsive to LHRH implants
- Metastatic resistant to LHRH implants

In each of these cases, Dr Pintus listed the drug treatments that are available.

Great advances have been made recently, and in particular there has been the STAMPEDE (Systemic Therapy in Advancing or Metastatic Prostate cancer: Evaluation of Drug Efficacy) trial. This has led to a greater understanding of the effectiveness of drugs used both individually and collectively.

Another trial called TRITON is looking at the usage of a new drug Rucaparib.

For non-metastatic cases, the PROSPER study has looked at the cases where there is no spread beyond the prostate but the LHRH implants are not working. This quantified the effectiveness of Enzalutamide in these cases.

A study known as SPARTAN was conducted using the drug Apalutamide, with similar results.

The drugs in these two studies have not yet been approved in Europe but it is anticipated that they soon will be.

Dr Rogers at the RBH is running a study known as ARAMIS and results are expected soon.

Dr Pintus described the new approaches to clinical trials, in an attempt to accelerate the progress of the trials. The traditional approach to trials has been using phases:

Phase 1: A new drug trialled on a small number of patients, looking at establishing the dosage and any side effects.

Phase 2: Looks at the toxicity and efficacy in a broader number of patients - about 20 to 50.

Phase 3: Looks at all results so far, decides the best trial conditions, and conducts tests with a larger group of people with a control group taking a placebo.

A new model is now used in which phase 1 and phase 2 are combined and carried out using about 50 to 60 people and dividing the patients into groups dependent upon the type of cancer. Then the groups that benefit most from the treatment can be established.

Some drugs can be fast-tracked if the trials are proving very successful, and could be made available during the combined phase 1/2 trial. The first drug whose availability was fast-tracked is Pembrolizumab, a popular immunotherapy drug that was introduced on the results of phase 1/2, based on its ability to make DNA changes in a tumour.

A trial known as TOPARP was carried out a couple of years ago using the drug Olaparib. It was a small trial of about 50 patients and it was found that in the case of men with metastatic prostate cancer with specific DNA mutations, many more men were likely to respond to Olaparib than others in the trial. However this drug has not yet been approved in Europe or the UK.

In Wexham a trial called PATCH {Prostate Adenocarcinoma Trans Cutaneous Hormones} has been running for a few years using men who have been diagnosed with metastatic prostate cancer, looking at two different ways of reducing testosterone - patches, or Zoladex.

There has been a number of observational studies of the genetics of the prostate. It was established in 1993 involving 200 hospitals, with a target of recruiting 26,000 patients by 2022.

Two studies have looked at patient-reported outcomes. These are:

Aquarius: looking at prostate cancer patients treated with Abiraterone or Enzalutamide, assessing quality of life, pain, fatigue and cognitive problems.

Premise: looking at prostate cancer patients treated with Enzalutamide, assessing treatment effectiveness and outcomes.

Two new trials for prostate cancer are known as TRITON 2 and TRITON 3. The former uses Rucaparib in the treatment of metastatic prostate cancer with specific DNA defects resistant to Zoladex, Abiraterone and/or Enzalutamide and chemotherapy, whilst the latter uses Rucaparib and a choice of Abiraterone, Enzalutamide or Docetaxel in the treatment of metastatic prostate cancer with specific DNA defects resistant to Zoladex, Abiraterone or Enzalutamide.

Another trial that will start soon, will look at relapse without secondary deposits after surgery, radiotherapy or brachytherapy.

Dr Pintus said that new trials are quite demanding on resources because they need:

- More blood samples for biomarker tests
- More blood samples for Pharmacokinetics
- Extra biopsies
- Questionnaires
- CT/Bone scans every 8 weeks
- Independent radiology review

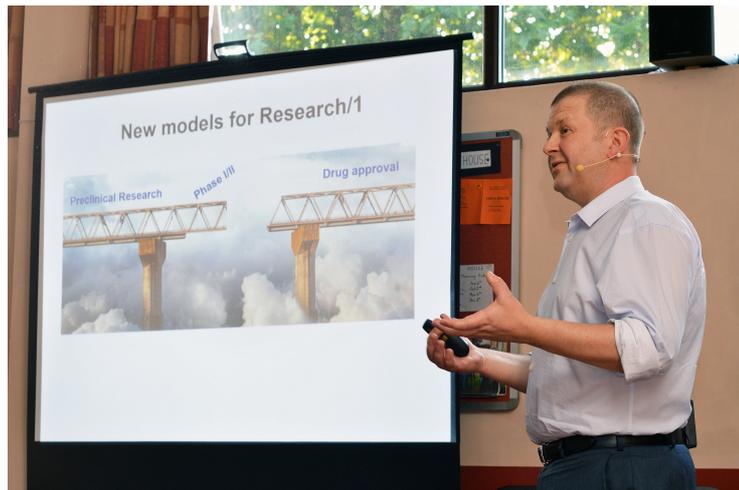
We were then told about patient referral to other centres for trials, of which Dr Pintus is very supportive. He described 14 patients that he has referred, and listed their treatments and responses.

Dr Pintus finished with a brief mention of Brexit, and the risks that it may have to international collaboration and research.

After answering a few questions from the audience, Dr Pintus was thanked for his very informative talk, and presented with a gift of appreciation.



*Dr. Elias Pintus  
(Image from RBH web site)*



*Dr Pintus during his talk to RPCSG*

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## **PAST EVENT - AWARENESS DAY 14TH JULY**

We held a prostate cancer awareness session in the middle of Broad Street, Reading, opposite to Waterstone's shop on Saturday 14th July. This was our most successful awareness day, with 301 people (252 men and 49 women) having been in discussions. We distributed more than 250 of our concertina-folder booklets. Many thanks to those members who volunteered and made this a very successful event.

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## **RPCSG WALKS**

The walk on the 2<sup>nd</sup> July from Pangbourne to Goring was most enjoyable. Six members took part in this very pleasant walk along the Thames. The weather was very hot, but much of the walk was on shaded paths so was not oppressive. On arriving in Goring, we found that the cafe that we intended to visit was closed each Monday, but there was another very accommodating cafe a little further down the road. Then there was a short train ride back to Pangbourne.

The next walk will be on **Tuesday 31st July** from Reading to Sonning. We decided to try Tuesday because some establishments close on Mondays, as we found in Goring. The walk will start from the same place as the walk that we held on 5th June. Drive on the A329M (A3290) towards Reading. Continue to the very end of the road, where there is a roundabout at which you turn right, and the Waterside car park is a few yards on the left. Parking here is free. If the car park is full, you can continue past the Waterside car park and can park on the road free between 10:30 a.m. and 4:30 p.m. (We will return well before 4:30 p.m.).

**The start time will be 10:40 a.m.** from the Waterside car park (the start time allows time for you to park on the road and walk back to the Waterside park). We will have a refreshment break in Sonning and the return journey will include a walk around the Oracle Nature Lake. The walk will be picturesque along the Thames, and will have a total distance of about four miles.

The walk is open to all members including wives and partners, and even to pet dogs. You are most welcome to participate - just arrive before the start time.



*The walkers on the trip to Goring*



## **SUMMER SOCIAL**

The summer social will be held as the August group meeting on the 3rd August 2018. It will be in St Andrews church hall from 6:30 p.m. and the caterers will be Mange Bien, who have provided us with excellent food and service at previous Christmas occasions. One complementary drink - choice of alcoholic or not - will be provided on arrival. The event will be 'Bring Your Own Drinks', alcoholic or otherwise, for your own consumption. The meal will be served from 7:30 p.m.

The cost of the Social is £17 per person. There is a limit to the number of places available and there is a **closing date** for enrolling for this event of the **26th July**, as this is the date by which we must finalise the numbers to the caterers. If you would like to reserve places please contact the Treasurer Roger Bennett as soon as possible by email to: [saroban@btinternet.com](mailto:saroban@btinternet.com) and make payment by cheque posted to Roger at the address below. Cheques should be made payable to "Reading PCSG":

52 Deanfield Road  
Henley-on-Thames  
RG9 1UU

If you prefer to pay by bank transfer please send an email to Roger for details at his email address above.

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## **A RESEARCH STUDY**

The University of Edinburgh School of Health in Social Science has sent an email to the group asking for us to distribute to our members some information about an on-line study that they are conducting. The study is concerned with mental well-being. If you have any queries on this study please contact Gareth on the telephone number or by email to him, as given at the end of this section.

Please note that the study will remain **open until Thursday 26th July**, so if you intend to participate in the study please do so before the end of Thursday 26th.

This is an extract from Gareth's email:

The University of Edinburgh School of Health in Social Sciences are currently conducting a research study to gain a better understanding of the ways that prostate cancer can impact an individual's mental wellbeing. This psychological aspect of receiving a cancer diagnosis often gets left by the wayside as people are worried about direct impacts to their physical wellbeing. We are hoping that this study can help us gain a better understanding of the psychological distress men who have prostate cancer experience and the types of support that might be put in place to alleviate this.

Participation is completely voluntary and is done by taking a short online survey which takes 10-15 minutes. I will copy in the link to the survey below. Any participation in the study is also completely anonymous, as no identifiable information is asked from any individual who participates. A number of ethical considerations have been taken into account when designing the study and it has received approval from the University of Edinburgh Ethics committee. The more diverse a range of people who get involved in the study the more valuable information we will be able to determine about the impacts

prostate cancer can have on a person's mental wellbeing. We have already had an excellent response from support groups who we have approached here in Scotland, and are hoping to get the same from a range of areas across England.

<https://edinburgh.onlinesurveys.ac.uk/psychology-prostate-cancer>

Yours faithfully,

Gareth McAteer

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*This newsletter may refer to named providers and their products or services, and such reference expresses no inference upon any aspect of any provider's business, services or products, and expresses no recommendation or preference for any such products or services.*

**DATES FOR YOUR DIARY.**

**3rd AUGUST 2018**

This is the date of the Summer Social, to be held from 6:30 p.m. in St Andrews church hall. Remember to reserve your places in time, and bring your own drinks for your own consumption.

**7th SEPTEMBER 2018**

September will be an Open Meeting

**5th OCTOBER 2018**

The guest speaker will be Fawaz Musa, who is a histopathologist at RBH.

**2nd NOVEMBER 2018**

The guest speaker will be Charlotte Robinson, radiologist at RBH.

**7th DECEMBER 2018**

The Christmas Social