

# PHAROS

*A beacon of hope in the darkness*

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

*Issue 120: December 2021 / January 2022*

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

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## THE DECEMBER 2021 MEETING

The meeting in December was the annual Christmas Social that was very well attended by 33 people. This attendance was somewhat lower than previous years presumably on account of the Covid virus, however it released some space for more social distancing. It was a very enjoyable occasion with a good buffet meal served by our caterer Mange Bien. There were many raffle prizes and a fiendishly challenging quiz.

## THE JANUARY 2022 MEETING

The January 2022 meeting was held by Zoom on account of the increasing cases of the Omicron variant. The Zoom attendance 19 RPCSG members and 3 people from other prostate cancer support groups.

The meeting was informal with no guest speaker and very quickly became a discussion on several topics of interest.

A question was raised about focal treatments. These are where treatment is targeted at only the parts of the prostate where tumours have been found. One such treatment is HIFU (High Intensity Focused Ultrasound) in which sound waves heat up and destroy cancer cells at the place at which the ultrasound is focused. It was said that this treatment is available in Basingstoke.

An advantage of focal treatment is that it is less invasive and often produces fewer side effects. Disadvantages are that it is relatively new, most treatments are not yet widely available and there is a lack of reliable data on the rate of success both short and long term.

All focal treatments require precise guidance usually provided by very detailed scans.

Cyberknife is another very focused radiotherapy treatment.

Irreversible Electroporation (IRE) is a focal treatment in which an electric current is passed through cancer cells to destroy them. There have been some trials in 2014 but a lot of follow up is needed.

Focal treatments can generally be repeated where necessary and other secondary treatments are possible such as radical treatment or radiotherapy. Multi focal areas i.e. several different areas within the prostate can be treated with some forms of focal treatments

Nanoknife is in early stages of approval by NICE but approval is uncertain.

Proton beam was discussed, in which a cyclotron producing protons feeds up to four treatment stations. Some good results have occurred in other cancers but there is little evidence of improved effectiveness for prostates beyond current external beam treatment with X-Rays.

A member asked about the thresholds for PSA after treatments. Many factors are taken into account in the case of rising PSA, including the rate of increase. After radiotherapy a level of 2.0 may trigger further investigation, and a lower level following prostatectomy.

Some scans cannot detect prostate cancer cells at very low levels. At a PSA level of 2.0 CT scans could detect prostate cancer cells and PSMA PET scans can detect cancer with a PSA level of around 0.2 to 0.5 dependent upon the type of PET scan.

If PSA rises after radical prostatectomy the cancer can be within the prostate bed or lymph nodes which can be treated with further treatments.

There are treatment outcomes prediction programs available by Memorial Sloan Kettering, or by NHS Predict. For the former go to [mskcc.org](http://mskcc.org) and in the search box type [prostate nomogram](#). It was pointed out that these are very generalised and there are many factors to be taken into account when looking at predictions of prognostic outcomes.

A member asked about obtaining his medical records, in particular to see his PSA readings. He was advised that he could contact the hospital PALS department (Patient Advice and Liaison Service). Otherwise he could enquire at his GP surgery. The member said that he could only see results of GP related tests and not results initiated by the hospital. He was advised to request that he has access to these records. Another member receives his PSA figures by text message. {Editors note: My GP surgery sets the level of access that patients can see and does not allow many medical results to be seen by patients}.

The question was raised about the eating of eggs being detrimental to prostate cancer. It is not recognised that eggs are adverse, but the level of consumption may be important, anything taken to excess is detrimental. In general it is a good idea to keep consumption to low levels for such foods as dairy products and red meat.

There are rumours of people over 60 having to pay for prescriptions. There is nothing confirmed about this and it was mentioned that some prescriptions are cheaper when bought privately rather than by chargeable prescription. It was mentioned that the NHS has a prepayment certificate system for prescriptions whereby an annual fee of £108 will give prescriptions free of charge, and for persons who pay for prescriptions this may save cost overall dependent on how many items and their frequency are in your prescriptions.

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### **RPCSG WALKS**

Nine members joined the enjoyable walk in January that was a circular walk starting in Earley.

The next walk will be on the 15<sup>th</sup> February 2022 starting in the village of Ramsbury.

If you have any queries about the walk please contact Richard Brown on 07973 662925.

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### **COFFEE MORNINGS**

The January coffee morning was very enjoyable and held at The Cunning Man with nine members attending.

The February coffee morning will be on the 22<sup>nd</sup> February at The Flower Pot in Aston.

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**DATES FOR YOUR DIARY.**

**Tuesday 15th February 2022** is a walk starting in Ramsbury.

**Tuesday 22nd February 2022** will be a coffee morning at The Flower Pot in Aston.

There are a number of other external events to which all members are invited that are listed in an email from Andrew.