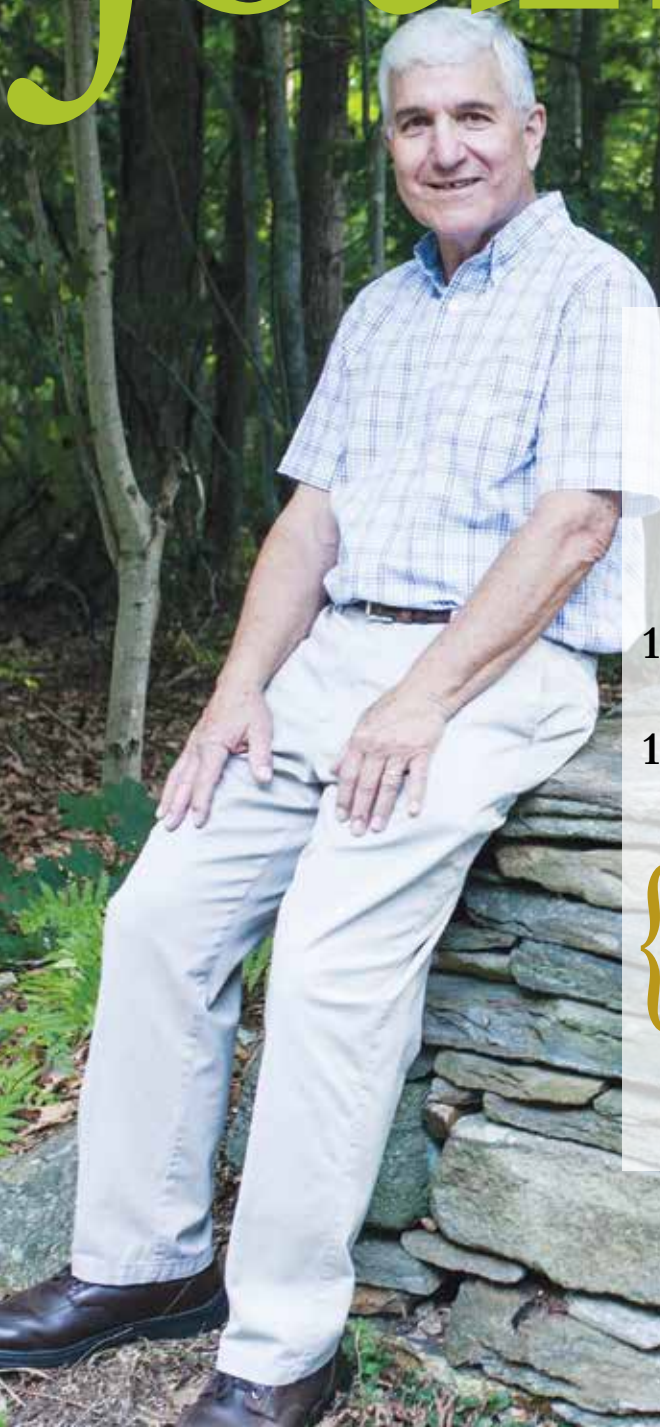


DATTOLI CANCER FOUNDATION

Journey



FALL 2016

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FINANCIAL & PHILANTHROPIC
OPPORTUNITIES

Bill Girard was one of five percent of men who had prostate cancer, in spite of a “normal” PSA. His story begins on page 6.



DATTOLI
CANCER FOUNDATION



HERB BOOTH

All in This Together – Share!

FROM THE EDITOR

Many thanks to all you fellows who sent me updated “*Encouragers*” forms from the Spring issue of *Journey*. We are delighted to receive these anytime. If you missed it before, I’ll be happy to shoot you a form by email. Just give me a buzz.

Shortly after we got that issue in the mail, I had a call from a woman whose husband was undergoing treatment at that time. She desperately wanted to talk to another “Dattoli wife” who might help her deal with some of her own fears and frustrations. It occurred to me that I should be asking for female encouragers, too. I feel remiss that I had not thought of this before now!

So – ladies, wives, daughters, sisters, partners, friends – if you would be willing to share your thoughts and experiences to help another woman, I’d like to hear from you. I hope to put together a list similar to the Encouragers list, of women who have traveled the prostate cancer journey with someone and have time to talk to another woman who seeks comfort from your experience. We might name it “*Heart to Heart*.” Please call me (941.365.5599) or send me a simple email (gcarnahan@dattoli.com) with your name, address and phone number. Put “*Heart to Heart*” in the subject line, please.

I am aware that many of the Us TOO chapters across the country have a women’s group affiliated with them. In fact, I have received a simple flyer with instructions on how to start a Women’s Support Group. It was written by Kathie Houchens, wife of David Houchens who was treated here a number of years ago. If you are interested in starting a group, I’ll be happy to share it with you.

How can this year be nearly over? I know I’m not the only one thinking this. Somehow they roll by so quickly. As you are thinking about end-of-year stuff, let me recommend that you read the message from Tom Cannizzaro on page 11. You may find his financial advice interesting, especially if you have IRA investments that mandate Required Minimum Distributions. These “distributions” can support the work of non-profit organizations (such as Dattoli Cancer Foundation) and create a tax advantage for you in the process. Tom would be delighted to assist you with this kind of transaction.

Before this old year is gone, let me wish you and your families peace, health and happiness in the New Year! Thanks for being a friend! **1**

Virginia ‘Ginya’ Carnahan, APR, CPRC

Journey

FALL 2016

Dattoli Cancer Foundation

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EDITOR

Ginya Carnahan, APR, CPRC

PUBLISHER/CREATIVE DIRECTOR

Steve Smith

WRITERS

Meg Brockett, MPH
Tom Cannizzaro
Ginya Carnahan, APR, CPRC
David Chesnick
Michael Dattoli, MD

COPY EDITOR

Susan Hicks

ART DIRECTOR

Rosie White

PHOTOGRAPHERS

Herb Booth
Sarah LeFrancois
Carmen Schettino
Alex Stafford

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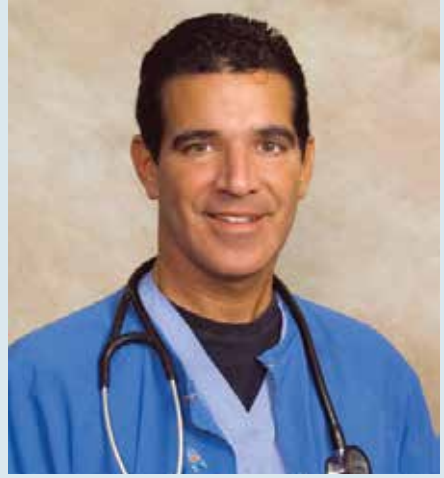
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2803 Fruitville Road, Sarasota, Florida 34237
941.365.5599 Toll-Free: 1.800.915.1001
www.dattolifoundation.org



A personal message from Michael Dattoli, MD

As this edition of *Journey* was being put together, a landmark comparison study of prostate cancer treatment results was published by the Prostate Cancer Treatment Research Foundation (September 1, 2016). Three dozen prostate cancer experts participated in this study group. Their mission was to publish an *unbiased report* comparing effectiveness of modern prostate cancer treatment methods, including Cryosurgery, HIFU, Protons, Radical Prostatectomy (open and robotic), Brachytherapy alone, and combination External Radiation with Brachytherapy. In 15 years, 1,415 journal articles reporting treatment results had been published, and 208 of these met the strict criteria to be included in this academic review study. **Our 16-year results study, published in 2010, was included in this review.**

I am extremely proud to share with you that combination therapy, featuring External Beam Radiation with Brachytherapy, surpassed all other treatment modalities in providing the longest "prostate cancer free" results, and the data from Dattoli Cancer Center was at the very

CONTINUED ON PAGE 12

Breast Cancer

MESSAGE FROM MICHAEL DATTOLI, MD



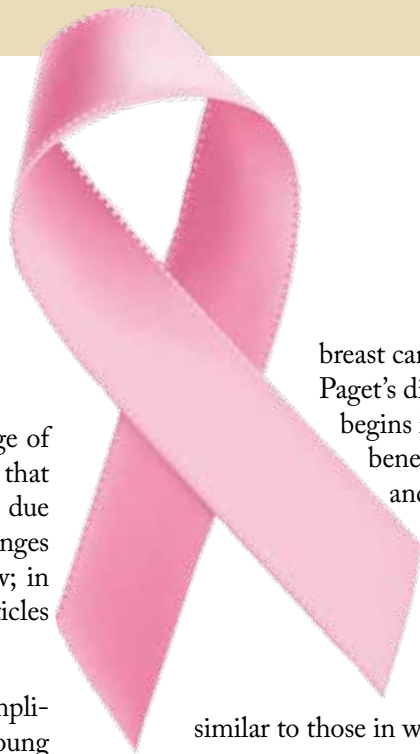
ALEX STAFFORD

In case you've been off the planet for the past 20 years and didn't know, October is the month of the pink explosion: pink fire engines, pink tractors, pink scissors, pink hair, pink clothes...pink ribbons everywhere. It is Breast Cancer Awareness Month.

Kudos to the colossal efforts of breast cancer survivors everywhere for raising awareness of this disease through the use of the iconic pink ribbon – and to organizations like the Susan G. Komen Foundation that have raised countless millions of dollars to combat the disease. Today women around the world are learning the value of regular mammograms to detect early breast cancer – and even those who lack funds or insurance can find places to get this life-saving exam.

While we almost always think of breast cancer as a woman's disease, there are men who develop it, too. About 1 percent of all cases occur in men. That is not many, but it accounts for about 2,000 men a year, and a rather high mortality rate. Men typically wait longer to notify their doctors and therefore often present with more advanced disease than women. Unfortunately, some 450 men die each year as a result of breast cancer.

in Men?



THE DIFFERENCES AND RISK FACTORS

The huge difference in the percentage of women developing breast cancer and that of men developing breast cancer is due to hormones. In girls, hormonal changes at puberty cause the breasts to grow; in boys, hormones made in the testicles prevent the breasts from growing.

Men having “mumps orchitis” (a complication of mumps in postpuberal young males) have an increased risk of developing breast cancer.

Also at increased risk for developing breast cancer are men whose mothers, siblings or daughters were diagnosed with breast cancer. Interestingly, men having close relatives with prostate cancer are also at increased risk for developing breast cancer. Genetic markers positive BRACA1 and positive BRACA2 place men at increased odds of developing breast cancer, especially positive BRACA2 (6 percent).

Alcohol intake, and specifically alcohol related cirrhosis, also places men at increased risk for developing breast cancer.

In men’s breasts, cancer can begin in the ducts and spread to surrounding tissue, similar to the pathway in women’s breasts. Rarely, men can develop an inflammatory

breast cancer (called Paget’s disease) that begins in a duct beneath the nipple and then moves to the surface.

Symptoms of breast cancer in men are

similar to those in women:

- Skin changes, such as a swelling, redness or visible differences in one or both breasts
- An increase in size or change in shape
- Changes in the appearance of one or both nipples
- Discharge from the nipple
- General pain in or on any part of the breast
- Lumps felt on or inside the breast

Another condition of the breast that men should be aware of is “gynecomastia,” a more common disorder in males. Gynecomastia is not a form of cancer, but it does cause a growth under the nipple that can be felt and sometimes seen (“man boobs”). Some men who are under hormone treatment for prostate

CONTINUED ON PAGE 12



Hiding In Plain Sight

FIVE PERCENT OF MEN WITH A
NORMAL PSA HAVE PROSTATE CANCER.
BILL GIRARD WAS ONE OF THEM.

BY DAVID CHESNICK
PHOTOS BY SARAH LEFRANCOIS

PHOTOS:

This Spread: A close-up view of Bill Girard's tools;
Bill in his home workshop.

Next Spread: Bill uses a Lion Trimmer to fine-tune
a picture frame; Arline and Bill at home
in Connecticut.

Arline and Bill Girard met more than 50 years ago. Arline had just gotten her Licensed Practical Nursing (LPN) degree at Day-Kimball Hospital in Putnam, Connecticut. Every day, she'd visit a classmate and friend who lived with a couple, John and Dottie Girard.

"One day, John's brother, Bill, was visiting. He'd come to see his nephews," Arline recalls, as though it were yesterday. "It might have been just a meeting, but I needed a ride home, and Bill offered to drive me. We said 'goodbye,' but I hoped we'd meet again."

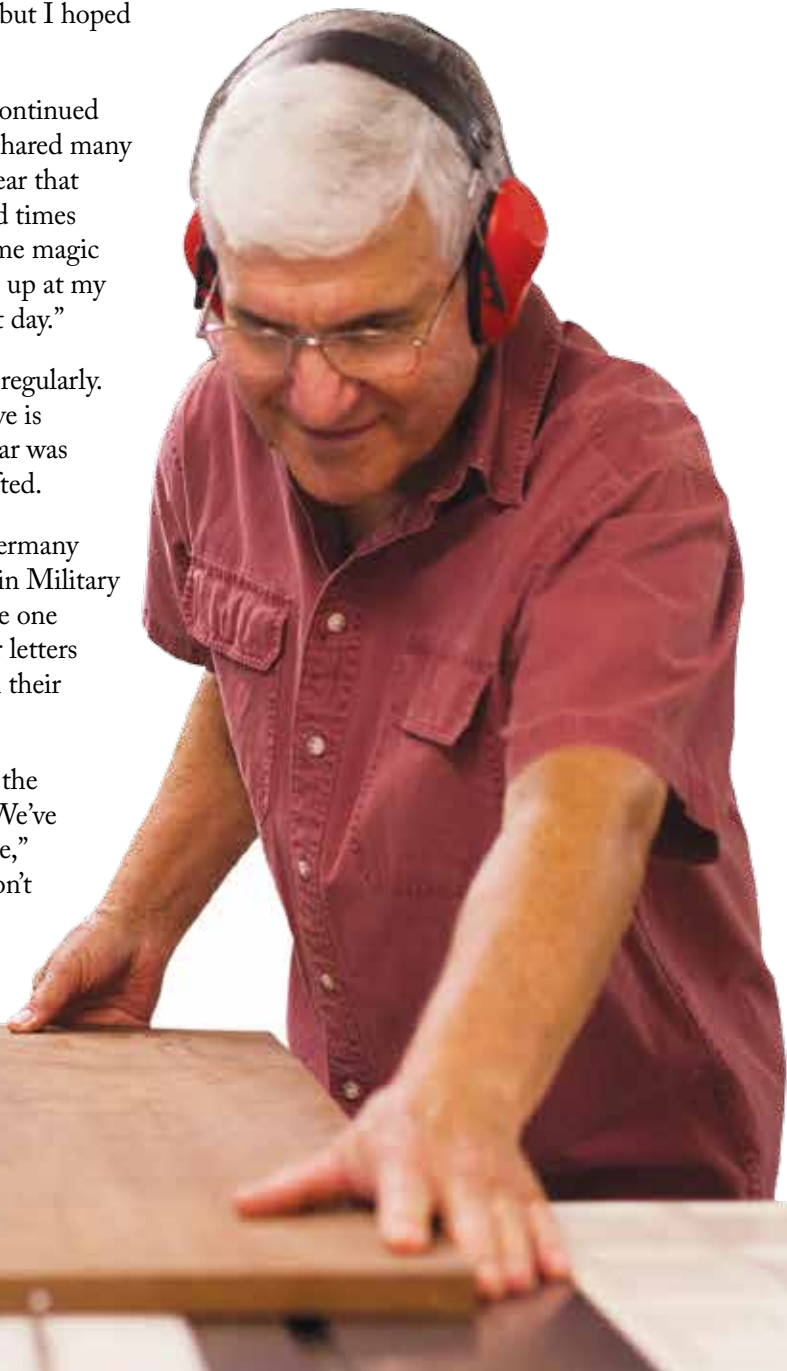
"I hoped so, too," Bill continued the story – one they'd shared many times, though it was clear that despite all the years and times told, it still held the same magic for them. "So I showed up at my brother's again the next day."

Soon they were dating regularly. But the road to true love is seldom smooth. The year was 1964, and Bill was drafted.

He was stationed in Germany for two years, working in Military Intelligence. They wrote one another every day, their letters the fertile soil in which their love grew.

The day Bill got out of the service, he proposed. "We've been together ever since," he says. "You usually don't see one of us without the other."

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Hiding in plain sight

CONTINUED FROM PAGE 7

BUILDING A LIFE TOGETHER

The young couple wasted no time creating a family of three children.

Arline became a stay-at-home mom. Bill found a job with the Connecticut Department of Transportation as a surveyor, where he worked for 35 years before retiring in 1997.

Best of all, they now got to spend all their time together, “enjoying one another” is how Arline describes it. They did some traveling and gardening; Bill did woodworking. “Life,” he says, “was sweet.”

FAITH TAKES A HAND

In 2008, things began to change. Bill had his yearly checkup and the family doctor said all was fine, but Arline wasn't so sure. Arline's Aunt Doris, “their angel,” mentioned to her a new urologist in town, Dr. McCullough. Being devout Catholics who believe God has guided them through life, Arline began to feel that God was telling her that Bill needed to see him. She started insisting that Bill make an appointment.

In November, he did. Bill's PSA was 1.4, just as it had been for 15 years, and he was completely asymptomatic. But a digital exam revealed an abnormality in the prostate. Dr. McCullough did a biopsy, which revealed a troubling Gleason Score of 9.

That meant that Bill was one of 5 percent of men with a “normal PSA” who had prostate cancer. A Gleason Score of 9 indicated the cancer was high risk and aggressive. Dr. McCullough told the Girards that surgery couldn't help and that Bill had very few options.

Initially, the news was devastating, leaving



Arline terrified that she might lose the love of her life. The doctor made an appointment with an oncologist and radiologist at Backus, the same hospital where she had been an LPN years before. The doctors there offered to enter Bill in a clinical trial and gave him a week to think it over.

In the meantime, their daughter, Lisa, sent out an email to everyone she knew, asking them to put Bill on their prayer list. One of them responded immediately, urging Lisa to have her father check out the doctor who had treated her father, Dr. Michael Dattoli.

At the same time, a friend of Lisa's husband, Paul, recommended a doctor who had treated someone he knew. Coincidentally, it was also Dr. Dattoli. Bill called both men, heard their stories, shared his, and made up his mind to call.

However, the couple who had always seen eye-to-eye on everything weren't yet on the same page. Arline had reservations about being so far from their support system in Connecticut. Bill called anyway.

HEALING BEGINS

Bill's call was returned that very evening. After more than an hour on the phone, Bill was told he had a 93 percent chance of recovery. Arline's fears of being away from family and friends quickly dissipated.

Treatment began in Connecticut, where Bill received the first of 22 hormone injections over the next several months. Fittingly for the couple, that first shot was administered on Christmas Eve, 2008. Two months later, the Girards



were in Sarasota where Bill got his next set of hormone injections and began his treatment protocol of 30 external radiation treatments over the next six weeks.

Ten days after the completion of radiation, Dr. Dattoli implanted 53 radioactive palladium 103 seeds in and around Bill's prostate. A day later they went home.

After three months, they returned for a checkup, at which time Dr. Dattoli recommended 10 more radiation treatments.

Near the end of 2009, their faith in the Lord and the doctor were rewarded: No cancer was observed at this checkup. There is no incontinence, and the couple is still able to enjoy a healthy sexual life.

CELEBRATING THEIR LIFE TOGETHER

Their return trips for annual checkups have become month-long vacations that begin with a visit to son Tom in Branford, Connecticut, Bill's sister in Allentown, Pennsylvania, and their daughter in Mt. Pleasant, South Carolina, with stops in Florida to see Bill Jr. and Arline's brother. They've also become friends with a couple they met at The Dattoli Center who live in Naples, Florida.

"The whole process was harder on Arline than it was on me," Bill says. "But having her beside me through treatment made it easier. And I can't say enough about the staff at Dattoli. Their thoughtfulness and many kindnesses helped immeasurably, especially Meg Brockett, the Patient Program Director. She got us involved with the 'Beamers' support group there." Hearing other stories and sharing theirs inspired the couple to begin attending a support group in Connecticut.

"Meg said you have no idea how many people you'll help by telling your story. We hope we help everyone who reads this story."

The couple looks forward to the Golden Anniversary that's now only months away, a celebration of the seed of love sown 50 years ago – and of the seeds planted by a doctor who's helped make it possible. **1**

The Mood Cure: The 4-Step Program to Take Charge of Your Emotions – Today

BOOK REVIEW BY MEG BROCKETT, MPH

I have long argued that our bodies have a lot more to do with our emotions than most people believe. Julia Ross, MA, is considered a pioneer in the field of “nutritional psychology.” From the author’s 30 years of experience in working with people suffering from depression, anxiety, irritability and other negative emotions, she developed a “comprehensive program based

on the use of four mood-building amino acids and other surprisingly potent nutrient supplements, plus a diet rich in good-mood foods.”

Curious what the author would say about what your body might be missing to feel your best? Well, you’re in luck!

She offers a free online quiz entitled *The Mood Type Questionnaire* to help identify the challenges your body is facing that could be impacting your mood.

Why not take the quiz? Julia’s recommendations are all-natural and generally very affordable, such as specific nutritional supplements and getting more sleep.

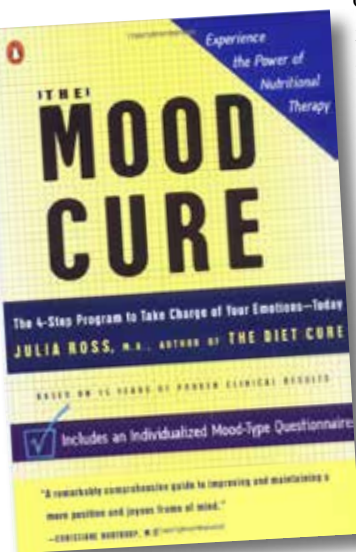
The Mood Type Questionnaire’s indication, that I should take GABA (gamma-Aminobutyric acid) to help me relax and sleep, was right on! In fact, her recommendations to a number of people whom I’ve told about the quiz have always proven to help – although you’ll need to read the book yourself to get the details needed to know exactly what to do.

Obviously, not all bad moods are physical/biological. The book includes a chapter to help you identify which ones are likely related to your body and which to your circumstances and other issues. It also includes recommendations on certain medical tests, when necessary.

Would you like to know what the “four steps” are? Each step involves three to four “How To” chapters, but just to pique your curiosity, here they are:

- STEP 1: Gaining a New Perspective on Your Moods**
- STEP 2: Eliminating the Four Most Common Mood Imbalances**
- STEP 3: Creating Your Nutritherapy Master Plan**
- STEP 4: Getting Help with Special Mood Repair Projects.**

In conclusion, I highly recommend *The Mood Cure* for everyone having trouble sleeping and/or experiencing emotions that do not seem to be entirely related to your circumstances. ❶



The Mood Cure is available at [amazon.com](https://www.amazon.com).

The Mood Type Questionnaire can be found at [moodcure.com](https://www.moodcure.com)

Year-End Brings New Financial & Philanthropic Opportunities

YOUR IRA DISTRIBUTIONS CAN BECOME A WIN-WIN FOR YOU AND YOUR FAVORITE CHARITY.

Every year, the IRS requires individuals with traditional IRAs who've reached age 70½ to take Required Minimum Distributions (RMDs) from their accounts and to pay income tax on that money.

Having planned well and saved for retirement, many people in their 70s and 80s are enjoying life and, frankly, don't need the money from those RMDs. They no longer have the urgency to pay bills, provide financial assistance to children or fix up the house. But the government requires these distributions, and the income tax liability associated with them. Well, the good news is you can ease the pain of that tax burden while substantially supporting the charities you're passionate about.

Qualified Charitable Distributions (QCDs) count as RMDs. Seniors can make QCDs directly from individual retirement accounts to charity, up to \$100,000 per individual, per year. So for example, if John Smith has a \$25,000 RMD this year but sends a \$25,000 QCD to his favorite charity, he does not need to report that distribution on his tax return. The QCD will not generate a deduction, but the RMD will not be included for income tax purposes either. So, John will avoid adding \$25,000 to his adjusted gross income.

As year-end approaches, keep this in mind and consider donating all or part of your RMD to the Dattoli Cancer Foundation (or another nonprofit).

Another possibility is to use that RMD to pay the premium on a life insurance policy, with the charity named as beneficiary. The impact of this "planned giving" strategy could be tremendous, with some policies paying benefits of \$1 million or more and enabling transformative growth in the charity's ability to advance its mission.

Please contact me if you'd like to explore these options. **❶**

Contributed by:

Thomas V. Cannizzaro, CFP®, CLU, ChFC
Specialist in life insurance-based financial planning
1990 Main Street, Suite 750 Sarasota, FL 34236
tomcannizzaro@aol.com • (941) 587-7810

About Tom Cannizzaro:

Thomas V. Cannizzaro has over 30 years experience in the financial services industry, specializing in Life Insurance Based Financial Planning. Tom is a Certified Financial Planner™ (CFP®) and holds the Chartered Life Underwriter (CLU) and Chartered Financial Consultant (ChFC) designations. Tom has reviewed thousands of cases for individuals, businesses and non-profit organizations, and looks forward to working with you as a partner in providing customized life insurance-based financial planning solutions.



PHOTO BY CARMEN SCHEITINO

Message from Dr. Dattoli

CONTINUED FROM PAGE 3

top, with respect to overall cure with the longest follow-up and the least side effects.

Your financial support of the Dattoli Cancer Foundation, among other things, makes possible the ongoing data analysis that is so important to what we do. Very few independent treatment centers track results, partly because it adds to the cost of running the center. We are blessed to have generous donors who underwrite the costs of data gathering and analysis, and producing complex journal submissions.

I thank each of you for the consistent and generous donations you bestow upon us. None of this would be possible without you. My personal mission, as you know, is to increase awareness, continue to refine the treatment protocol, and deliver one-of-a-kind care to each and every patient who comes to us for help. ❶

Breast Cancer in Men?

CONTINUED FROM PAGE 5

cancer will experience the growth of gynecomastic tissue, and often teenage boys will note this type of breast tissue growth while they are going through the hormonal changes of puberty.

TREATING MEN'S BREAST CANCER

Treatment for male breast cancer is generally the same as for female breast cancer, including surgical removal of the breast (mastectomy for full breast, or lumpectomy for just the tissue identified as cancerous) followed by radiation therapy and perhaps chemotherapy and/or hormone therapy.

If the cancer is believed to have spread outside the breast to the lymph nodes, adjuvant therapy including hormone therapy, and chemotherapy, will be necessary to stop the spread. For men whose breast cancer has spread to other parts of the body, the challenge is greater – and treatment will include several different therapies.

Advice to men is the same as to women: Take a minute to check your breasts once a month. It can be done while in the shower – just feel the breasts for any bumps or lumps, then look in the mirror for any visible changes. If something looks funny, don't delay. Call your doctor for an appointment.

Like all cancers, early detection provides your best chance for survival and cure! So, whenever you see those pink ribbons, remember that they include YOU. ❶