

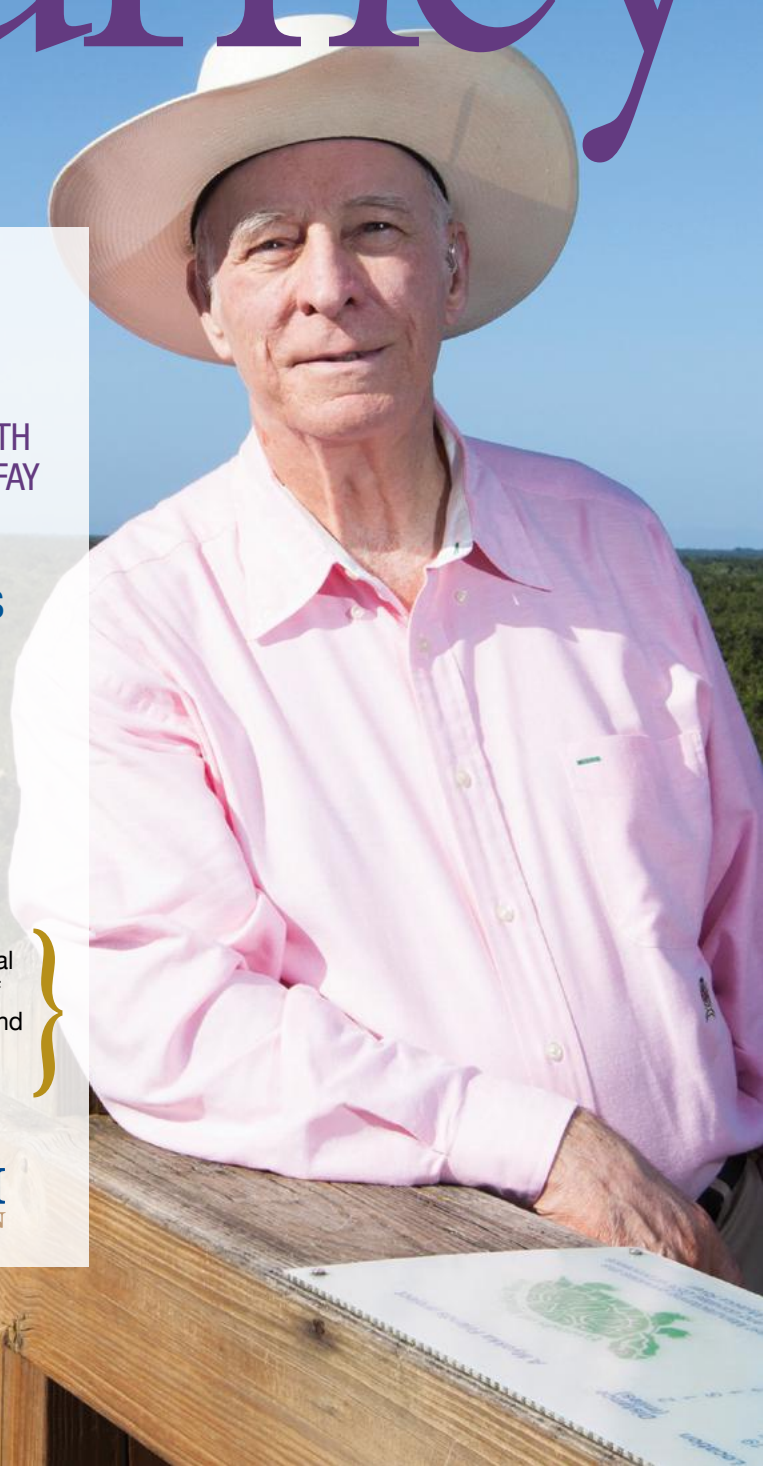
DATTOLI CANCER FOUNDATION

Journey

FALL 2013

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PROSTATE CANCER
BREAKTHROUGHS:
NEW TESTS,
NEW TREATMENTS,
BETTER OPTIONS**

Ted Tudor traveled from central Colorado to share the story of his prostate cancer journey, and that of his two brothers. They are all survivors. }





A Matter of Trust

FROM THE EDITOR

In early August, I had the opportunity to hear the dynamic speaker Roy Reid, APR, address the 75th Annual Conference of the Florida Public Relations Association at the historic Renaissance Vinoy Hotel in St. Petersburg, Fla. Roy's keynote address was entitled "Cultivating Outrageous Trust."

His message struck home with me in many ways. How many organizations and how many people can we fully trust today? What are their motives and missions, and how do these align with our personal goals and ambitions?

Roy began with an examination of some of the most trusted names in business today, as determined by various "trust research" organizations. While there is some small discrepancy in the various lists of top 10 brands, here are the most prevalent names: Amazon, Apple, Walt Disney, Google, Johnson & Johnson, Coca-Cola, FedEx, Whole Foods, Target, Sony, Ford Motor Company, Nike, Proctor & Gamble, Costco, Starbucks, Southwest Airlines and Nordstrom.

I have to agree that each of these brands has a strong consumer following and a nearly pristine reputation for "doing the right

thing." My interest is in how we can cultivate a similar platform of trust.

Roy shared that there are four steps to achieving trust:

1. Take responsibility for relationships. We must own these relationships in order to earn trust from our constituents, which can translate into success.
2. Trust is built from the inside out. Be aware of "blind spot" characteristics of yourself as well as others.
3. Communicate consistently. Roy says that the majority of people need to hear a message three to five times before they will believe it. The more we communicate with audiences with consistent messages, the greater the opportunity to secure their trust.
4. Be good stewards of trust. Don't offer trust to anyone or anything that doesn't live up to the standards you have set. Guard and protect the trust relationship.

Why is trust important to me and to our Foundation? Anytime someone is dealing with something as precious as one's health, there must be a level of intimate trust. And

Journey

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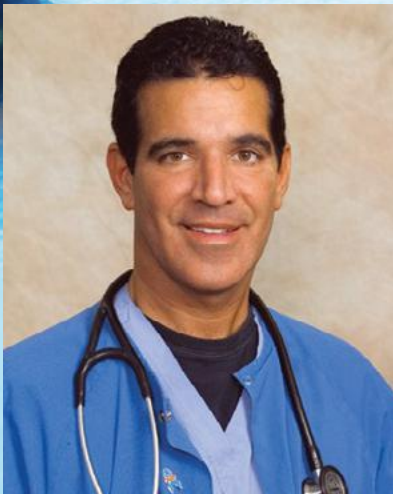
when an organization is dependent upon financial support for its outreach, activities and very existence, there must be complete trust. The creation of this expanded *Journey* publication two years ago was an effort to secure and cement your commitment to and trust in our mission. We sincerely thank you for your steadfast contributions to all that we do.



In Memoriam:

During the process of creating this edition of *Journey*, we lost one of our key team members. Art director Donald A. Adamec expired peacefully – however, unexpectedly – in his home. Don was a well-known designer who had worked for clients such as Quaker Oats, National Airlines and Xerox before coming to Sarasota in 1983. His magazine design skills were evident in his redesign of *Ladies Home Journal* magazine in the 1970s and in the artful layouts he created for our publication. He will be greatly missed.

Virginia "Ginya" Carnahan, APR, CPRC
Editor



MESSAGE FROM
MICHAEL DATTOLI, MD

Omega-3: Another Needless Controversy

ONCE AGAIN, RESULTS OF A SINGLE, POORLY CONSTRUCTED STUDY
HAVE HIT THE POPULAR MEDIA AND CAUSED ALL KINDS OF CONFUSION
FOR PROSTATE CANCER PATIENTS AND OTHERS.

This time the target is omega-3 supplements.

An article published in the Journal of the National Cancer Institute in July 2013 sent shockwaves throughout the prostate cancer community when it generated headlines like this: *Omega-3 Fatty Acids Linked to Prostate Cancer Risk*. Overnight, a tsunami of questions ensued, and patients who have been advised to take the supplements (and consume omega-3 containing fish and food products) were shocked.

Previous studies have suggested an omega-3 protective benefit against prostate cancer, as well as numerous other diseases (especially cardiovascular disease). There is extensive literature illustrating the anti-inflammatory properties of omega-3 fatty acids. These are the foundation research inspiring the common practice of advising prostate cancer patients (and others) to include omega-3 in their daily supplement regimes.

The fundamental problem with the conclusions drawn from the study is related to how the study was constructed and what the objective of the study was. This one study was designed to look at the relationship between vitamin E and selenium supplements for the prevention of prostate cancer. Fish oil (omega-3) intake was never actually examined in the study.

The study was *not* a randomized, double-blind, placebo-controlled trial, but it openly “borrowed” data from a larger SELECT (Selenium and Vitamin E Cancer Prevention Trial) study. Dr. Jay Udani, who was an original investigator in the SELECT trial, has been quite vocal on how the data

was “modified” for the NCI study. In a video interview, Dr. Udani mentions several examples of how his data was corrupted, including arbitrary selection of which patient data to “borrow.” The SELECT study was a large (3,500 subjects), long (2001-2011), carefully designed trial. The NCI group did not include the entire group, and it added some other patients who were not in the original group. The authors also did not choose equally from the entire study length (they skipped some periods of time entirely), making the analysis “messy and unreliable,” according to Dr. Udani.

And yet it made big news. This is a problem we, as consumers, have with the abundance of news and information channels beaming material at us 24/7. Broadcast and print news outlets, social media, etc., are ravenous for the latest “news.” They are in such a competitive race that no one takes the time to confirm or vet news stories anymore. It is up to the reader to decide what is the truth and what might not be true.

So, I still recommend omega-3 for my patients. I also recommend that you try to purchase quality products. Most of the omega-3 supplements in drug stores and discount clubs are substandard. If you can taste anything fishy after your dose, more than likely your supplement was rancid and no longer potent. Very pure, recently collected fish oil will not impart that fishy taste. Also, the capsules should be clear or transparent and not opaque or cloudy. I have always recommended refrigerating the capsules once the bottle is open. Do some research or call our office for our brand recommendations. ❶

Jone M. Fay, BS, RT (R)(T), CMD

Behind the Scenes

AN CONVERSATION WITH OUR
CHIEF DOSIMETRIST

BY MEG BROCKETT, MPH

Dosimetry is a term that is foreign to most patients. It has a fairly simple definition, but it serves a very complex and important role in the treatment of cancers. Dosimetry comes from the word dosimeter, which is a device for measuring doses of radiation. Dosimetry is the practice or science of creating specific dosing patterns or designs for the delivery of radiation. It is absolutely key in being able to defeat the cancer cells while protecting the healthy surrounding tissue and organs.

HOW DID YOU GET INTO THE FIELD?

A high school teacher prodded me to continue school. I had an uncle who had cancer, so I decided to go into the medical field to work with cancer patients. Out of 500 kids in my graduating class, only two went into radiological sciences. After school, I went to x-ray training at Theda Clark Regional Medical Center for two years and then passed a national exam. Following that, I went to the University of Wisconsin in Madison for a year of training in radiation therapy, and then I took another national exam. From there, I began working in my hometown of Fond du Lac, Wis., using some of the same equipment that my grandfather was treated on before I was born. I only dreamed of working on more modern, even the latest equipment in the field. After being named head of the Department of Radiation Therapy at St. Nicholas Hospital, I became interested in further training in dosimetry and passed a national certification in that as well.



ALEX STAFFORD

WHAT DO YOU LIKE BEST AND/OR LEAST ABOUT THIS SPECIALTY?

I like the advancements in patient treatment and computerized technologies the most. What I like least is that I don't get to interact with the patients as much as I did as a therapist.

WHAT ARE THE CHALLENGES?

The challenges come in the individualized plans – meeting each patient's needs for treatment – and of course, keeping up-to-date with the latest and greatest technologies as they come out. This is a fast-growing field with advances coming along frequently.

WHAT DO YOU SEE FOR THE FUTURE?

I think we'll see further advances in lymph node treatment, new calculation models, and external beam equipment to provide the ability to more precisely target tumor areas and avoid normal tissues.

CAN YOU TELL US SOMETHING ABOUT WHAT YOU DO OUTSIDE OF YOUR WORK AT DATTOLI?

I'm in three different choirs and a soloist. And when I'm not singing, I enjoy creating fiber arts. 🎨

We Are Our Brothers' Keepers



L-R: Brothers Tim, Ted and Bob Tudor get their "cowboy on" during a reunion at Bob Tudor's place in Arizona.

LOOKING AFTER ONE ANOTHER AND BEATING THE DISEASE THAT CLAIMED THEIR FATHER'S LIFE IS THE SHARED BOND OF THIS BAND OF BROTHERS.

BY DAVID CHESNICK

Bob, Ted and Tim Tudor were raised on a small 137-acre farm near Johnstown, Ohio, a farming community in the central part of the state. It was a hardscrabble life, but the experience of their upbringing drew them close. The brothers came to share common values they've taken with them throughout their lives: a deep and abiding faith that has never abandoned them, their love for their family, and a belief that family looks after one another.

They also shared another experience – the loss of their father to an aggressive form of prostate cancer. They came to share a doctor as well who would save their lives from the disease.

Bob was the first of the brothers to experience problems and the first to be treated by Dr. Michael Dattoli.

BOB TUDOR – GIVEN ONLY WEEKS TO LIVE

Bob had left the farm after high school and gotten a job in a meat-packing plant

in Columbus, Ohio. He soon realized it wasn't for him, so he joined the Army and went to Korea. Three years later, he returned home and worked at several different jobs – from fireman to trucker – before opening a number of small businesses, contractor/builder and owner of a small chain of car washes among them.

It was while he was running these businesses that Bob began to exhibit symptoms of the disease, and in 1998, a biopsy confirmed that he had cancer. His doctor in Ohio told him that he had a particularly virulent form of cancer and should "get his affairs in order."

A young 60, Bob and his wife, Ruth, refused to accept that verdict. They got on the Internet, and after considerable research discovered Dr. Dattoli and read about the work he was doing. Bob called and was asked by staff to send his medical records. At around midnight a few days later, he got a call from the doctor telling him to come to Florida to begin treatment.

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“It was as if heaven opened for me” is how Bob describes the call today. For the next few months, Bob underwent radiation, then seed implants and more radiation, and hormone shots, and the life that was supposed to be over in weeks returned to normal.

Until 2005. Bob and Ruth had retired to Arizona when severe pain signaled new trouble. On Dr. Dattoli’s recommendations, the couple returned to Ohio for further examinations at the Cleveland Clinic. When a biopsy revealed that the cancer had flared up near his abdomen, Dr. Dattoli put Bob on a heavy regimen of medications and hormone shots.

The next year was a difficult one, both medically and emotionally, but Bob, with Ruth at his side, made it through. Now, 15 years after he was given weeks to live, Bob has no cancer symptoms. But he did have a couple of younger brothers that he would need to help through the experience.

TED TUDOR – LIVING THE COWBOY WAY

After high school, middle brother Ted followed Bob’s example and went to work in a manufacturing plant. It wasn’t for him, so when a friend asked him to help drive

across country to Wyoming, he then 20-year-old quickly agreed. He fell in love with the West and the Western lifestyle, and he stayed for the next 10 years, working in the oil fields and trucking industry.

When he was 30, Ted returned to Ohio and continued working as a trucker until 1991, when a brain tumor forced him off the road. He turned to writing about what he knew and turned out several books on driver training.

“My hunger for the West pulled me back,” Ted said, “and I moved to Colorado where I met and married Caterina, the love of my life.”

Today they live on about six acres in south central Colorado with Caterina’s mother and Ted’s sister, Judy. They share their spread with a menagerie of rescued animals, including a mule, four horses, three dogs and a few cats.

Caterina, who has a doctorate in psychology and has started a nonprofit organization called Desert Waters (see sidebar), is also, as Ted describes her, the doctor in the family.

So when Caterina, aware of the family

“Bob’s always been a bit of a mother hen, telling me to do this and this and this. That was especially true when I got the diagnosis of prostate cancer. He said to sit by the phone – that Dr. Dattoli would be calling soon. And he called within hours.”

- Ted Tudor

ALEX SIVA PHOTO

history, insisted that Ted get his PSA checked regularly, he did. Every year for the next four years, it rose constantly. He had biopsies, but there was no evidence of cancer until the fifth year. Leaning towards surgery, he called his big brother for advice.

“Bob’s always been a bit of a mother hen, telling me to do this and this and this,” Ted said. “That was especially true when I got the diagnosis of prostate cancer. He said to sit by the phone – that Dr. Dattoli would be calling soon. And he called within hours. He told me about the course of treatment, and from that point on, I was hooked.”

In 2006, under Dr. Dattoli’s care, Ted underwent radiation treatment, seed implants, and then another course of radiation and hormone therapy. A caring staff eased what might have been a difficult journey, and Ted speaks with great affection about them.

“To a person, they were friendly, caring and interested in me. I wasn’t a number. I was a human being.” Ted has been returning regularly and has been disease-free since, but the now familiar family story played out again when the youngest brother, Tim, received his diagnosis on Halloween 2007.

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Desert Waters: Ted Tudor and His Wife, Caterina Spinaris, are on a Mission

The mission of Desert Waters Correctional Outreach is to increase the occupational, personal and family well-being of correctional employees. Often overlooked, these security officers, medical professionals, office personnel, chaplains and other correctional professionals face dangerous and highly stressful challenges. To help them cope, Ted and his wife, Caterina Spinaris, PhD, LPC, founded Desert Waters.

Caterina has an extensive background teaching about and treating post-traumatic stress and “burnout.” She began working with this population in 2000, and her efforts have reached a national audience. Caterina has instituted a number of programs to help this underserved population, and she has written extensively on the subject. She serves as Desert Waters’ Executive Director, while Ted volunteers at the office of the Colorado-based 501(c)(3) nonprofit. Together they devote much of their life to its mission.

Visit desertwaters.com to learn more about the mission of this special couple.



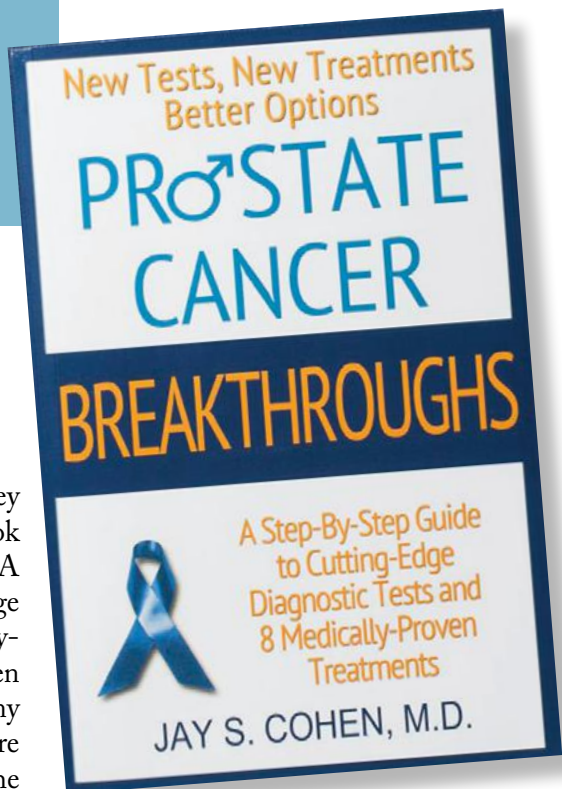
Prostate Cancer Breakthroughs

BY MEG BROCKETT, MPH

A NOTED PHYSICIAN
ADVISES OTHER
NEWLY-DIAGNOSED MEN

Jay Cohen, MD, describes his journey with prostate cancer in his book “Prostate Cancer Breakthroughs: A Step-by-Step Guide to Cutting-Edge Diagnostic Tests and 8 Medically-Proven Treatments.” In 2011, Dr. Cohen agreed to the radical prostatectomy recommended by his Urologist. But before the operation could be performed, he came to believe that he was lacking adequate information about his particular cancer to risk the possible serious side effects involved in that operation. “It’s hard to know what to do when you don’t know what you have” is a recurrent theme throughout the book, as Dr. Cohen urges men to avail themselves of an endorectal MRI and a Color Flow Doppler (CFD) ultrasound in every case.

He advocates that men use the findings from their MRIs, CFD ultrasound, PSA levels, T grade, Gleason score, and the number of positive biopsy cores to assess their total “risk level” before they decide on a treatment or in some cases, no treatment at all.



Dr. Cohen also believes the MRI and CFD ultrasounds are critical in performing a guided biopsy rather than a blind biopsy. He asserts that blind biopsies miss about 20 percent of prostate cancers and frequently result in the need for additional biopsies that further expose men to the risks associated with this procedure.

This book is a valuable resource for the newly diagnosed man. And for me, a member of the Dattoli Cancer Center team, it was a nice, reassuring reminder that our patients already have the benefit of the “cutting-edge diagnostic tests” that Dr. Cohen advocates. **1**



"What endures is what we do for others"

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November 2013

Dear Friends,

Another year has whizzed by! Where does the time go? Who would have predicted that we would be living such busy lives in 2013? Even in this lightning-fast technology field, I never imagined it would be like this.

Many things are escalating the way we practice and relate to patients today. Perhaps the biggest of these is the mandate that all medical practices transition to "paperless" status, i.e., Electronic Medical Records (EMR). While the end result may benefit patients and medical practitioners alike, the process of getting there is incredibly cumbersome, time-consuming, and extremely costly.

The first step is to find, purchase or create a system to accommodate the type of medical practice that we have. Just imagine incorporating all the points of entry into a single medical record chart. There are dozens of reports, notes, prescriptions, treatment plans, emails, correspondence, daily progress charts, etc., that are created by the doctors, dosimetrists, nurses, physicists, radiation therapists, business office, marketing, insurance providers and more. In the future paperless world, these entries will be entered into the electronic chart as they are generated. Over the past 5-6 months, we have started an electronic chart for each new patient. In addition, we have had to create electronic charts for all of the existing charts (going back 15 years or more). These old paper charts must be painstakingly dissected and scanned page by page into a new file in the system. It is a monumental task. Virtually every employee at our Center has been involved in some way in the process. They have each stepped up to add new responsibilities to their work loads.

Compounding our challenges (as much as it is confusing the patient population) is the beginning of the Affordable Care Act ("Obamacare"). No one really knows what the impact will be, but our practice will never be the same. We can only hope that eventually the goal will be accomplished and good medical practices will not perish in the process. More regulation only makes a comprehensive service environment like ours more difficult to sustain.

It is our pledge to you that during all these changes and challenges we will never lose sight of our true mission. Providing our patients with the very best care, in an environment of respect and compassion, is the one and only reason we are here.

I thank each of you for your support and contribution to our not-for-profit efforts through the Dattoli Cancer Foundation. As I write this letter, we are gearing up for our 13th annual free screening event during Prostate Cancer Awareness Month. Another hundred or so men will have the opportunity to learn their PSA and have a DRE through the generosity of your donations. Early diagnosis is the key to defeating this disease.

A handwritten signature in black ink, appearing to read 'Michael Dattoli', written over a horizontal line.

Michael Dattoli, MD

Our Brother's Keepers

CONTINUED FROM PAGE 9

TIM TUDOR – ANSWERING A HIGHER CALLING

Tim had left the farm to attend the Cincinnati Bible College and Seminary. His ministry took him to a number of cities before he and his wife of 47 years, Jeanetta, settled in Raleigh, North Carolina, where he now works as a chaplain at Heartland Hospice, ministering to the terminally ill and their families.

“Wisely, because of his own experience, Bob got me to visit Dr. Dattoli for regular checkups seven years before I was diagnosed,” Tim said. “Over that time, we established a relationship.

“In 2007, my wife and I were going to pay her mother a visit, and I called Dr. Dattoli to see if I could schedule a last-minute appointment. He said that while I was in Florida, he wanted me to go into the hospital for a biopsy.

“Dr. Dattoli has a keen awareness, perception, and understanding of the disease. He’s able to pick up on little nuances that raise red flags. Sure enough, when we returned to Raleigh, he called and gave me the news. I could be treated in Raleigh or

come back to Florida. I chose to come back.

“The doctor told me during a conversation this year that I have now been disease-free for five years. It was an important milestone.”

The story doesn’t quite end there. The same specter that loomed over Tim and his brothers now looms over his three sons: Michael (42), Jed (38), and Jeremy (33). Tim has spoken openly with them about his experiences, educating them about what he’s learned and encouraging them to get regular diagnostic checkups.

“Jeremy and I spoke about it recently,” Tim said. “He told me that he used to be frightened of the word cancer. But now, with what he’s seen and heard from me, he’s no longer frightened by the word cancer.

“I can’t say how grateful I am to Bob for pointing me in the direction of Dr. Dattoli,” Tim acknowledged. Thousands of others feel that same sense of gratitude and hope. **1**