



## STEVE ZIMMER - An unexpected epiphany

By Virginia Carnahan, APR, CPRC

At age 59, Steve Zimmer was navigating a major life change. He was transitioning to semi-retirement and facing a cross-country move from high-energy California to pastoral Middle Tennessee. These weren't the only changes taking place for Steve. Little did he know that deep in his abdomen, cancer was growing in his prostate.

Shortly after he settled into his life in Brentwood, TN, Steve began feeling a little run-down, enduring a nagging backache. He made time for an executive physical in neighboring Nashville.

The first physician noted that Steve's prostate specific antigen (PSA) was "a little high." He was quickly referred to another physician for further testing. This time, the PSA was measured at 12.6 (*"normal" PSA should not be higher than 4*).

Dattoli previously, Steve signed on for the Dattoli protocol. He would start with daily radiation (DART - Dynamic Adaptive Radiation Therapy, available only at Dattoli Cancer Center & Brachytherapy Research Center in Sarasota, FL). Next, he would undergo Brachytherapy (Palladium-103 seed implant) and additional ADT (Adjuvant Hormonal Drug Therapy). Steve's cancer would be bombarded with extremely precise, externally aimed, miniscule radiation beamlets; then internally placed also highly precise radioactive seeds; and finally a drug cocktail to control cancer-influencing hormones.

That is how he got here. Now for how this experience changed Steve.

Steve had been a longtime Harley Davidson rider, and once he



Steve admits, that like many men, he was "uneducated" about the prostate gland in general and prostate cancer specifically. However, he recalled that a close friend of his, John Mulcahy, a graduate of the Dattoli Cancer Center, had shared his own prostate cancer diagnosis story with him a few years earlier. John was to become a valuable sounding board and advocate for Steve at this time. Within just days, and with advice from John Mulcahy, Steve launched his own quest for information about his cancer and what the future might hold for this still-young fellow. Additional information gained from his 12-core prostate biopsy revealed that his cancer was quite serious: Gleason 9. Meanwhile a subsequent PSMA Pet Scan revealed advanced Stage 4 disease. ***He asked, "what is beyond Stage 4?" Answer: There is no Stage 5!***

Reaching out to several friends for references to trusted oncologists, Steve began a methodical series of consultations from five different sources. Each specialist had something different to say, but all recommended treatment quickly. His final consult was an in-depth phone conversation with Dr. Michael Dattoli, the only one to pronounce his approach as potentially CURATIVE.

Dattoli's advice was to start treatment immediately. With the strong approval of John Mulcahy, who had been treated by Dr.

was settled into his prostate cancer treatment regimen, he was ready to gingerly get back on his bike. He called a few fellow riders one weekend and invited them to explore some of the picturesque back roads of middle Tennessee with him. Reliving the freedom and total joy that comes with motorcycle riding, a genesis of an idea crept into Steve's mind.

Thankful and confident for the path he had chosen for the treatment of his prostate cancer, along with the good fortune he had found in his friendship with John Mulcahy and others, and the original lucky decision he made to see a doctor about his fatigue and backache, Steve began to puzzle over the thousands of other men who were, or would be in his shoes.

Having always been community-minded and highly organized, Steve began to toss around ideas of how he could reach out to men, like himself, who would find themselves about to step into the dark abyss of prostate cancer – *uneducated and afraid*.

It occurred to Steve that perhaps he could combine his love for motorcycle riding with his strong desire to educate men about the disease he was now fighting. This was his epiphany, the seed of an idea that drove Steve Zimmer to create the *Fight to Kill Cancer Foundation*.

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# My Prostate Cancer Has Spread – What Do I Do Now?

By Michael J. Dattoli, MD with Virginia Carnahan, CPRC

When prostate cancer spreads beyond its original site and is no longer locally confined to the prostate gland – a process called metastasis—it marks a significant turning point in the disease. For many, this diagnosis can feel overwhelming, as metastatic cancer has historically been considered incurable. However, the landscape of advanced prostate cancer treatment has evolved significantly over the past two decades thanks to technological progress and our growing knowledge of the disease process. Today, there are innovative strategies that offer patients hope for improved survival while maintaining their quality of life.

## Understanding Metastatic Prostate Cancer

Metastatic prostate cancer occurs when cancer cells spread from the prostate to other parts of the body, most commonly the lymph nodes, bones, lungs, and liver. Historically, metastatic prostate cancer was treated with systemic therapies alone – such as androgen deprivation therapy (ADT) and chemotherapy – aimed at controlling cancer throughout the body. However, these approaches often left persistent cancer cells in the prostate gland itself or in localized metastatic sites, and these persistent cancer cells often become resistant to systemic agents.

As a result, these remaining cancer cells often progress and spread, leading to problems within the prostate region itself, and are also left to colonize distant sites such as the lymph nodes, bone, lungs and liver.

## A Shift in Perspective

For decades, the prevailing belief was that treating the primary tumor in cases of metastasis was futile. However, emerging evidence has challenged this view. Research now suggests that treating the prostate gland – even in the setting of metastasis – can influence outcomes by reducing tumor burden and potentially slowing or preventing further spread.

One of the most intriguing concepts in this field is that of the *abscopal effect*. This phenomenon describes how local treatments like radiation therapy not only target tumors at their primary site of origin but also stimulate systemic immune responses that shrink untreated tumors elsewhere in the body. This discovery has opened new doors for integrating local and systemic therapies.

## The Evidence: Key Clinical Trials

Several landmark studies have reshaped our understanding of metastatic prostate cancer treatment:

### 1. The STAMPEDE Trial (2016)

This large, randomized trial demonstrated that adding radiation therapy to systemic treatments (such as ADT) provided a significant survival benefit for men with metastatic prostate cancer, and especially for those having low-volume metastatic disease. The study showed that targeting the primary tumor with radiation improved outcomes even when metastases were present.

### 2. The HORRAD Trial

This clinical trial explored the benefits of combining radiation therapy with ADT specifically for men with bone metastases. The results demonstrated beneficial outcomes in patients having low-volume skeletal metastases, although even treating high-volume disease with this combined approach was associated with several superior clinical and radiographic endpoints.

### 3. Oligometastatic Disease Concept

A concept introduced in 1995 by University of Chicago researchers Weichselbaum and Hellman, who coined the term “oligometastases,” referring to cases where cancer has spread to a limited number of distant sites (typically up to five) outside the prostate. Studies suggest that patients with oligometastatic disease may achieve long-term complete remissions – or even cure – through aggressive local treatments targeting *both* the primary tumor and metastatic sites.

## Modern Treatment Strategies: A Multi-Pronged Approach

The treatment of advanced prostate cancer now often involves a combination of therapies tailored to each patient’s disease characteristics. Below are key components of this multi-pronged approach:

### 1. Treating the Primary Tumor

Radiation therapy directed at the prostate gland remains a cornerstone of definitive treatment for localized prostate cancer. By reducing the tumor burden at its source, this approach delays progression and halts and minimizes complications such as urinary obstruction or pelvic pain. But recent clinical trials have validated the use of local radiation to the prostate even in the metastatic setting.

### 2. Metastasis-Directed Therapy (MDT)

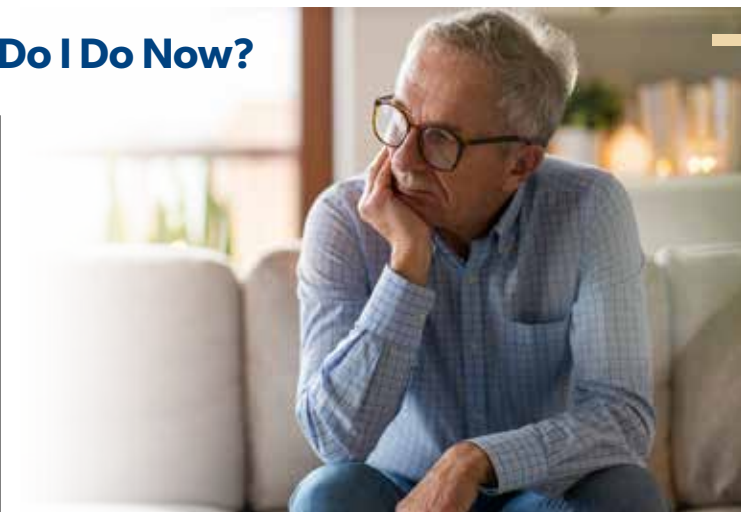
Advances in imaging technologies like PSMA PET scans makes it possible to precisely identify metastatic sites early in their development. This has enabled targeted radiation to treat these sites directly – a strategy known as metastasis-directed therapy (MDT).

- MDT can be particularly effective for patients with oligometastatic disease.
- Precision radiation techniques such as Intensity Modulated Radiation Therapy (IMRT) and Stereotactic Body Radiotherapy (SBRT) are used to deliver highly focused doses to metastatic lesions while sparing surrounding healthy tissue.

### 3. Systemic Therapies

Systemic treatments remain essential for controlling widespread disease. They include the following:

- Androgen Deprivation Therapy (ADT): In its multivarious forms, ADT represents the historic foundation of systemic therapy for prostate cancer.
- Androgen Receptor Pathway Inhibitors: Drugs like enzalutamide (Xtandi), apalutamide (Erleada), abiraterone (Zytiga), and darolutamide (Nubeqa®) enhance ADT by blocking testosterone signaling more effectively than ADT alone.
- Chemotherapy: Docetaxel or cabazitaxel are often used in combination with hormone therapy.
- Radioligand Therapy: Agents like Xofigo (radium-223) and Pluvicto



(lutetium-177) deliver targeted radiation directly to cancer cells, body-wide.

- Immunotherapy: Sipuleucel-T (Provenge) is an FDA-approved vaccine-based immunotherapy for advanced prostate cancer, often referred to “designer immunotherapy.”
- Molecularly Targeted Therapies: Genomic profiling can identify actionable mutations for personalized treatments using PARP inhibitors or monoclonal antibodies.
- Precision Medicine: Using state-of-the-art imaging technologies.
  - PSMA PET Imaging provides unparalleled accuracy in identifying even small metastases.
  - Combidex/USPIO Nanoparticle Imaging is used to detect the earliest microscopic lymph node involvement.

These tools allow clinicians to stratify patients into low-volume versus high-volume metastatic disease categories and tailor treatment plans accordingly.

### Real-World Success Stories

At the Dattoli Cancer Center, these advanced concepts have been applied with remarkable success. Over the past two decades, many patients with advanced metastatic prostate cancer have achieved long-term complete remissions – many remaining cancer-free for well over 10 years – through aggressive yet precise protocols that are safe. Key elements of our approach include:

- Dynamic Adaptive Radiation Therapy (DART), which is an extremely precise form of external beam radiation used to target both the prostate and regional lymph nodes.
- Metastasis-directed DART for skeletal or visceral metastases.
- Integration of systemic therapies such as ADT and androgen receptor inhibitors.
- Use of radioligand therapies (e.g., Xofigo, Pluvicto) and immunotherapies (e.g., Provenge).
- Molecular profiling to guide precision medicine strategies.

Toxicity profiles have been very mild, making these treatments both effective and well-tolerated by our patients, especially compared to chemotherapy.

### The Path Forward

The treatment paradigm for metastatic prostate cancer has shifted dramatically from one of palliative care alone to one that embraces long-term curative potential.

A comprehensive strategy combining local therapies, metastasis-directed interventions, and systemic agents offers new hope for extending survival and improving quality of life.

For patients diagnosed with metastatic prostate cancer today – including both newly diagnosed patients and those who experience recurrence after initial treatment – there is no longer a single path forward but rather a spectrum of options tailored to individual needs and disease characteristics. By leveraging advances in imaging, precision medicine, and multidisciplinary care, we are entering an era where even advanced stages of this disease can be managed with much optimism about potential success in the near-term.

With this article, my team and I hope to inspire both physicians and patients alike by highlighting how far we’ve come – and how much further we can go – in transforming outcomes for men living with metastatic prostate cancer. ❶



Dear Friends:

### Weather or Whether?

As I write this column tonight, it is uncharacteristically chilly here in Sarasota – temps in the 50’s, dripping rain and wind. Brrrr. However, I know that many of you have been functioning with snow on the ground, ice on the highways and power outages. I do remember those days from my upbringing in Upstate New York, and I don’t envy you those struggles.

Weather impacts so much of what we do on a daily basis, as well as seasonally. As much as the experts try to predict our various weather outcomes, it is not an exact science. Who would have dreamed that this part of Southwest Florida would have been struck by four hurricanes in the space of a two years?

Hurricane Ian, a category 4 storm, assaulted Florida in late September, 2022, causing \$113 billion in losses, surpassing that of Hurricane Irma that devastated the Gulf Coast in August 2017.

Hurricane Debby made her local debut on August 5, 2024, and left 2 feet of water in Sarasota; Hurricane Helene wasn’t far behind on September 24, 2024, bringing up to 7 feet of tidal surge; and Hurricane Milton blew into town on October 5, 2024, with sustained 120 mph winds.

Families who lost homes or sustained significant damage from Ian, were still trying to get back on their feet when this 2024 triple treat blew through. One can hardly imagine the disruption that followed these hurricanes – utilities were cut off repeatedly, infrastructure was a shambles, businesses were crippled, basic supplies were exhausted – and peoples’ nerves were frayed over and over again.

But somehow we pulled together, restored and rebuilt. I am forever grateful to the Dattoli staff who remained committed to caring for our patients and to each other, during this extremely stressful time.

To those of you impacted with fires, floods, storms and tornadoes in other parts of our country, I send condolences and prayers for your recoveries.

In this new year, we are looking forward to continued research into this disease that threatens so many men. We seek better, high tech diagnostic methods; more effective, less damaging treatment; and longer, happier lives for all men affected by prostate cancer. Your continued support of our non-profit Dattoli Cancer Foundation will help make these dreams a reality.

My sincere appreciation to each of you.

Michael Dattoli, MD

The concept was sound – it is estimated that 90% of Harley riders are male. The Harley Davidson “brand” after all, is decidedly manly. Steve’s genius was to combine the historic growl and look of the motorcycle to produce an attractive educational vehicle all about Prostate Cancer.

Calling upon friends with creative outlets and funds, Steve put together a team to create a functional website that would offer the basics of who-what-when-where-why of prostate cancer. He registered the Fight Foundation as a legitimate not-for-profit, tax-exempt organization that could solicit contributions to support its activities.

Within just a few months the initial site was built, containing a massive library of current information about diagnosis, treatment options, technology, pharmaceutical information, etc. Dozens of brief video interviews with several specialists are featured and directions for how to find more information is included. The site is very “active” and encourages the viewer to scroll through pages of high-energy presentations.



With the Foundation up and running, Steve and friends began to expand their outreach with plans for holding free prostate cancer screening events and other activities to spread the word and educate men and their loved ones.

At press time, we have news that The Fight Foundation has scheduled the First Annual Fight Foundation Dive Weekend, to be held in July, 2025 in Roatan, Honduras. Detailed information will be found on the website.

Through the Fight Foundation Steve Zimmer has made a commitment to reaching out to other men in a format that they would welcome and enjoy. This is Steve’s personal invitation to “get out on the Fight Foundation highway!” He says each time he makes contact with a man who is facing prostate cancer, he gets a deep sense of helping the other guy, that can only be compared to the thrill he feels each time takes his motorcycle out for a ride! **1**

**Check out the Foundation here: [www.thefighttokillcancer.org](http://www.thefighttokillcancer.org)**

## NEWS BULLETINS



From Medscape 08/30/24

### **Cancer Cases, Deaths in Men Predicted to Surge by 2050**

“The number of cancer cases in men is estimated to increase by 84% from 2022 to 2050 – reaching 19 million globally – and deaths are expected to rise more than 93% - reaching 10.5 million globally, a recent analysis found.

Overall, men have higher cancer incidence and mortality rates, which can be attributed to a higher prevalence of modifiable risk factors such as smoking, alcohol consumption, and occupational carcinogens, as well as the underuse of cancer prevention, screening, and treatment services.

Researchers reported an estimated 10.3 million cancer cases and 5.4 million deaths globally in 2022, with almost two thirds of cases and deaths occurring in men aged 65 years or older.

From National Geographic Top Stories of the Week  
01/03/25

### **Surgeon General Encourages Warning Labels on Alcohol**

“Humans have been drinking alcohol for thousands of years – but what is all that booze doing to our bodies?” Scientists are increasingly finding that even moderate drinking may be more harmful than we thought.

U.S. Surgeon General Vivek Murthy recently released a report calling for updated warning labels on alcoholic beverages to reflect the direct link that scientists have established between alcohol consumption and cancer. The report states that alcohol is a well-established, preventable cause of cancer responsible for 100,000 cases of cancer and 20,000 cancer

deaths annually in the United States – and greater than 13,500 alcohol-associated traffic crash fatalities per year in the U.S.

Dr. Murthy’s recommendation is based on years of research that have determined alcohol is a group-1 carcinogen, linked to cancers of the mouth, pharynx, larynx, esophagus, liver, colorectum, and breast. In 2023, The World Health Organization declared there is no safe amount of alcohol to consume – adding there is no evidence that the potential cardiovascular benefits of a glass of red wine outweighs its cancer risks.

From National Geographic Spring 2025  
**Why Tea Drinkers live longer**

“Tea is one of the world’s most popular drinks, second only to water, and for good reason.” It is celebrated for its calming effects, bold flavors and impressive health benefits – tea is calorie-free and rich in antioxidants.

These properties help lower the risk of stroke, improve blood pressure and cholesterol level, and boost immune function. In fact, a 2022 study found that regular tea drinkers had a 9-13 percent lower risk of death over a decade compared to non-tea-drinkers.

L-theanine, a non-protein amino acid found almost exclusively in tea, promotes relaxation and enhances concentration, improves memory retention, helps with stress and may protect against chronic diseases. Matcha tea, in particular, is rich in L-theanine, with ceremonial-grade varieties offering the highest concentrations. Tea also contains small amounts of the neurotransmitter GABA, which may enhance its calming effects and help reduce anxiety.