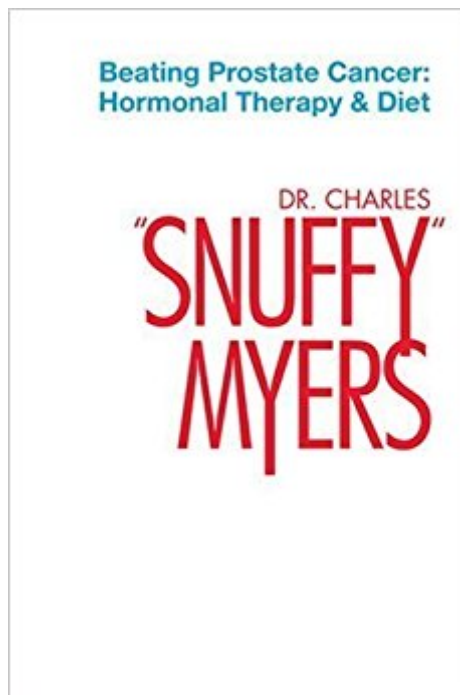




The book was found

Beating Prostate Cancer (Hormonal Therapy & Diet, 1) (Hormonal Therapy & Diet, 1)



Synopsis

Renowned prostate cancer oncologist and survivor, Dr Charles "Snuffy" Myers breaks down the ins and outs of prostate cancer treatment for patients everywhere. Details Include: Integrating A Comprehensive Approach To Treatment; Using Hormonal Therapy Alone Or With Radiation and Surgery To Prolong Life; Comprehensive Listing Of Vitamins, Diet, & Lifestyle Recommendations; Case Histories With High PSA Reductions; Infusing Treatment With Hope. In the words of Dr. Charles "Snuffy" Myers, "treating prostate cancer is a lot like golf because you need to play it as it lies." In this unique volume, both practical and highly accessible, Myers puts over thirty years of experience with this disease to work for the benefit of survivors everywhere. As one of the most influential physicians in the prostate cancer field today, Myers has created the most hands-on and comprehensive resource on hormonal therapy and diet on the market. As a prostate cancer survivor with an undetectable PSA, Myers infuses this book with the life-saving hope that led to his own recovery. Medical oncologist, scientist, and nutrition expert, Dr. Charles "Snuffy" Myers was a key player in creating AZT, Suramin, Phenylacetate while working at the National Institute of Health. With over 250 research papers published, Myers is one of the leading developers of today's prostate cancer canon on both the research and treatment side of the test tube. Former Cancer Director at the University of Virginia, Myers opened the American Institute for Diseases of the Prostate in 2001 to provide men with the comprehensive care that saved his life.

Book Information

Paperback: 208 pages

Publisher: Rivanna Health Publications; 1 edition (2007)

Language: English

ISBN-10: 0967612926

ISBN-13: 978-0967612928

Package Dimensions: 9.1 x 6.8 x 0.7 inches

Shipping Weight: 10.4 ounces

Average Customer Review: 4.5 out of 5 stars 21 customer reviews

Best Sellers Rank: #257,655 in Books (See Top 100 in Books) #22 in [Books > Health, Fitness & Dieting > Diseases & Physical Ailments > Cancer > Prostate Disease](#)

Customer Reviews

Renowned prostate cancer oncologist and survivor, Dr Charles "Snuffy" Myers breaks down the ins and outs of prostate cancer treatment for patients everywhere. Details Include: Integrating A

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The best book I have read on the subject. The fact that it was first published in 2007 and defines current ADT procedures begs the question; Why did it take so long? As a P-cancer (metastasized) patient, Dr. Meyer's book has provided me with information enabling me to seek out appropriate medical support. I am on ADT and an appropriate diet for 2 plus months now and I feel great. I am over 89, so I no longer am concerned with the primary side effect. I live in Germany.

Smart. Easy to read. Gives a roadmap for those newly diagnosed. He comes across not as a doctor, but as a person who has experienced metastatic prostate cancer

interesting read

Recent developments are not covered

Awesome book with a lot of good recommendations by a Doctor who has been there.

GOOD

It's sad to read about cancer especially when it is your father but it gives many options and is very informative.

This review was written by Prostate Activist Jim Waldenfels: We have a mighty new sword available to us in our war on prostate cancer. It's a new book: "Beating Prostate Cancer: Hormonal Therapy & Diet," by Dr. Charles "Snuffy" Myers, MD, 2006, Rivanna Health Publications, LLC. For so many of us our personal war hinges not so much on the existence of a therapy that will cure us or give us excellent control of the cancer; rather it hinges on whether we can get the right information in time to make a difference in our cases. That's what Dr. Myers has done in this book for hormonal therapy and diet! Many of us know of Dr. Myers or may even have heard or spoken to him at one of the many free talks as well as seminars and national conventions in which he has played a key role. (Among many accomplishments, he was the co-moderator of the 2003 convention (Burbank, CA) and the sole moderator for both the 2005 (Washington, DC) and 2006 (Reston, VA) conventions.) Many of us with newly diagnosed prostate cancer, with challenging cases, or with a desire to know all we can subscribe to his Prostate Forum newsletter. Some of us are his patients. He is clearly one of the leading doctors in the field of prostate cancer, and I am personally convinced he is the best at communicating sound information that we need to know in a way that is understandable to all, regardless of our education level, knowledge of prostate cancer, and medical training or lack thereof. (That would be the vast majority of us!) While I would welcome more graphs, charts and some footnotes myself, these resources are distracting to most of us who just want the straight information. Dr. Myers has aimed this book at this broad group, but he is specific enough that those of us who want to dig deeper can do so, and I'm convinced that those of us who have learned a lot about the disease will also find it well worthwhile. The book is an easy read, written in conversational style. (That said, Dr. Myers is writing for the reader who has some basic knowledge (or can find it quickly), including concepts like Gleason score, staging, PSA and DRE.) So what is it that is so exciting about this book? Actually two things. First, it is THE first book devoted to hormonal therapy for prostate cancer, particularly hormonal blockade therapy in the advanced intermittent triple blockade with maintenance form that is proving so effective as a primary therapy, as a therapy to control recurrence or as a supportive ("adjuvant") tactic, and as a way to at least partially knock the cancer back in challenging cases. Much of his discussion will be familiar to readers of the Prostate Forum and attendees at the national conventions, but there are many new points, and he gives us the latest information. Second, there is a fresh discussion of diet and lifestyle (meaning exercise and stress reduction). On both counts I learned important points,

resulting in some adjustments in my tactics. The Myers team brought many boxes of the books to this year's convention, and it was virtually sold out. (I helped, buying one copy for myself, one for a physician, and two with money from friends who wanted one but could not come to the convention.) But there is more. The very first chapter ("The Golfer's Approach to Prostate Cancer," pp. 9-20) makes two vital points that set the stage for the rest of the book: first, we need to realize the importance of identifying and dealing with the particular nature of the prostate cancer that we are each having as individuals. Dr. Myers words for this stick in the mind: as in the game of golf, when we are facing prostate cancer, "we have to play it as it lies." Second, we need to be optimistic. As Dr. Myers put it, "In fact, over the years I've found myself asking if pessimism is as deadly a disease as prostate cancer itself." He considers this so crucial that he devotes several pages to it in this first chapter. Here's one brief excerpt: "I deal with life and death issues everyday, and time and again I have seen people give up and die long before they should have. In contrast, I have patients whose disease is so aggressive that their other doctors urge them to put their affairs in order, and yet they refuse to give up. These kinds of relentless optimists continually seek out new and better treatments and beat all odds." (I identify with that.) You do not have to be either a golfer or an optimist to understand what he is saying, and its easy to get these points after reading the chapter. (Dr. Myers uses the golf analogy effectively throughout the book.) It's not just at a pep-talk level; for instance, he discusses the usefulness of Welbutrin and Lexapro "as treatment for depression," as well as mentioning the role of vitamin D, a topic thoroughly discussed later in the diet section. Like so much in this book, this information is valuable whether or not you plan to have or have had surgery, radiation, or some primary therapy other than hormonal blockade. After all, for such patients hormonal blockade may be used in the present as a booster for the other therapy because evidence is piling up that many patients will do better with this booster (as reviewed in the book), or it may be used in the future should there be a recurrence. We all need to be informed and to hear the good news about hormonal therapy. The next two chapters ("What Is Complete Remission?", pp. 21-28; and "Where the Ball Lies," pp. 31-43) start the main part of the book -- the coverage of hormonal therapy. The chapter on remission gives us an understanding of what remission is, and then goes on to discuss the surprising, impressive success of triple hormonal blockade therapy plus maintenance as the primary therapy in achieving apparently indefinitely long remissions in low-risk men. Dr. Myers mentions Dr. Robert Leibowitz's success with this therapy, and states that results in his practice validate Dr. Leibowitz's approach, including the observation that long term success is common. (And, I would add from my layman's viewpoint, side effects appear to be virtually completely reversible for nearly all, resulting in a high quality of life like the life prior to treatment, or

superior.) Dr. Myers gives an encouraging account of the lesser but still impressive effectiveness of hormonal blockade for men who are already metastatic at the time of diagnosis, giving us the key details of his approach in such cases. He splices in his own successful experience in dealing with his personal challenging case of prostate cancer, which involved eighteen months of such therapy, a duration that he would reduce based on more recent knowledge. The next chapter deals with how to satisfactorily stage the disease so you know what you are dealing with. This goes well beyond the usual PSA, stage and Gleason scoring, which is all the staging that many of us get. I particularly liked the discussion of the great value of fusion ProstaScint scanning in appropriate cases; this is so needed; I wince when I hear many doctors dismiss ProstaScint: they have not kept up to date with ProstaScint developments and generally do not appreciate its usefulness. The next six chapters address the ins and outs of hormonal therapy, but in layman's language. The chapter titles are: "Understanding Hormonal Therapy", pp. 45-54; "How Hormonal Therapy Works", pp. 57-63; "Intermittent Hormonal Therapy", pp. 65-70; "Hormonal Therapy as Adjunct", pp. 73-90; "Second Line Hormonal Therapy", pp. 93-104; and "Case Studies: What's Your Handicap?", pp. 107-119. Dr. Myers quickly dispenses with two discouraging but still widespread myths: that responses last only 18 months, and that hormonal therapy does not kill prostate cancer cells (at least many of them). (If your doctor still expresses those myths to you, you might want to give him a copy of the book to get him up to speed; if your doctor is not open minded and you are serious about hormonal therapy as an option, in my opinion you need to find another doctor to explore or pursue that option.) He explains the roles of testosterone and dihydrotestosterone (DHT) in fueling the cancer, and the importance of monitoring levels of these hormones during therapy, something many physicians fail to do, leading to the false conclusion for an unfortunate few of us that hormonal therapy has failed when it really has not failed. One of the points that will be new to many of us is that several forms of hormonal blockade, while highly effective in minimizing testosterone, for quite a few of us are inadequate for reducing DHT, and in such cases a 5-alpha reductase inhibitor (Proscar or Avodart) is vital. Several chapters address "intermittent" (meaning "on" and "off" phases) hormonal therapy, the approach Dr. Myers strongly favors over the approach of giving hormonal therapy continuously for many years. The discussion of hormonal therapy as a booster ("adjuvant") to surgery and radiation ranges from low-risk cases, to what turn out to be high-risk cases without metastases, on to cases with metastases to the lymph nodes, and finally to cases with distant metastases; he again stresses the importance of fusion ProstaScint analysis in appropriate cases. Though I am personally doing very well as I begin my eighth year as a survivor, just starting my second off-therapy period using intermittent triple hormonal blockade with maintenance after again achieving a PSA low point

of less than 0.01, I was especially interested in the chapter on "second line" hormonal blockade, meaning blockade after the first approach no longer can hold back the cancer; some day, hopefully many years in the future, I may need that. Dr. Myers covers such key second-line tactics including Ketoconazole, estrogen (particularly delivered via skin patches for safety), Sandostatin, Leukine, and combinations of second-line drugs. The "Case Studies" chapter presents the stories of four patients whose highest PSAs were 1,026 (latest 0.04 and stable), 3,488 (fell to 0.01), 3,656 (declined to plateau between 1.8 and 2.3), and 35 (now remaining below 0.08). The first three made me feel like my initial PSA of 113.6 was not so high after all! I found these four cases most encouraging. The long and rich chapter on "Diet & Lifestyle" covers topics like "Hormonal Therapy and Weight Gain," "Mediterranean Diet," "Obesity & Prostate Cancer," "Why I Favor the Mediterranean Diet," "Exercise," drugs and supplements for muscle strength and weight loss, and "Vitamins & Supplements" (especially lycopene, selenium, vitamin E, fish oil, soy isoflavones, and vitamin D3, with a list of other supplements he specifically does not recommend). The section on vitamin D3 and closely related sub-topics is extensive. That is most welcome, as recognition of the importance of D3 is exploding, yet many patients and even their doctors are not yet up to speed on this. As Dr. Myers put it: "I think it [vitamin D3] is by and large the most important supplement for prostate cancer treatment." He also talks about how our genes affect how useful lycopene, selenium and vitamin E will be for each of us. His "Final Thoughts" chapter underlines the importance of choosing a "positive and open-minded health team who is willing to work with you to not only treat your cancer but also to prolong your survival and quality of life." This ties in to the final section, which contains 258 references to medical research, listed by chapter. If you want these details for yourself, or if you need these details to aid communication with your doctor, you can check a free abstract of each study in the appendix at [...]. For example, to find the abstract for reference 193 (Hussain, M., et al., Soy isoflavones in the treatment of prostate cancer. *Nutr Cancer*, 2003. 47(2): p. 111-7), use this search string to get to the lists of abstracts that match the search, or in this case to the only abstract that satisfies the search string: "hussain m [au] AND 2003 [dp] AND soy ". (Note how the author's first initial (or first and second) help limit the search, and how the capitalized "AND" and bracketed "au" for author and "dp" for date of publication limit the search.) Dr. Myers' final paragraphs focus on hope, echoing the focus on optimism at the beginning of the book. Dr. Myers explains that he is giving us ample margins and extra pages for notes. I have put those margins to work by adding notes highlighting the details and website for the Leibowitz team's presentation at the Orlando, ASCO meeting (see [...]) on one of the pages that mentions the Leibowitz-Tucker research, and I'm also adding a reference to the key section in Dr. Strum and

Donna Pogliano's book "A Primer on Prostate Cancer" that deals with hormonal therapy, as well as a reference to the published breakthrough study providing later follow-up by Drs. Scholz, Lam, Strum and team entitled "Intermittent use of testosterone inactivating pharmaceuticals using finasteride prolongs the time off period", published in the Journal of Urology in May 2006, no doubt too late for the publication cycle of this book in October. Those recent, earlier works are also important resources for those interested in hormonal blockade, but the Myers book is invaluable for the long and easily understood look it takes at this important therapy, especially in the context of supportive diet and lifestyle, and for the access it gives us to Dr. Myers' insights. I also underlined and highlighted many passages, and I'm building my own index based on these highlights. The book is available at [...] While the information is priceless, the price of the book is \$25, plus S&H. There are now two key books that I'm convinced every prostate cancer patient should read for a basic foundation of understanding and to keep for reference and note recording. (Other books are good on specific therapies other than blockade, on complicated and scientific-style information, and on elementary information.) The first to be published was "A Primer on Prostate Cancer - The Empowered Patient's Guide." The latest is the book in this review: "Beating Prostate Cancer: Hormonal Therapy & Diet."

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