

Prostate Cancer and Health...

You are visiting a urology center probably because of concerns about prostate cancer. Even though it is called “cancer”, prostate cancer actually varies in terms of its aggressiveness – it doesn’t always kill people; sometimes people live with it for decades without being affected.

Chances are, you have heard something about PSA – the blood test for ‘prostate specific antigen’ – not being always correct about the presence of cancer, but more importantly, it cannot always predict whether the cancer will be detrimental to long term health.

Biomarkers other than PSA

Besides PSA, there may be other biomarkers that could reveal the true nature of prostate cancer. “Biomarkers” is a fancy word for laboratory tests – tests that can be done on blood, urine, semen, and biopsy (or surgery) samples.

These biomarkers can be genes, proteins, even fragments of cancer cells that could be detected using modern laboratory technologies. (They give rise to fields of study such as genomics, proteomics, and metabolomics.) The opportunity is here, that the range of prostate cancers and their respective aggressiveness can be studied in far greater detail with these technologies.

What is the Alberta Prostate Registry and Biorepository?

In order to learn about how prostate cancers can be characterized by new biomarkers, many biospecimens – samples of blood, fluids, tissue materials – will have to be collected before and after prostate cancer is diagnosed. Some patients will develop cancer and may be treated for prostate cancer, sometimes with different kinds of options over time when the cancer progresses. Others may undergo active surveillance or monitoring.

As part of the Alberta Prostate Registry and Biorepository, patients will be entered into “cohort studies”, in which blood and other samples are collected over time and their health outcomes are recorded over many years. Patients will follow standard medical advice and care through their doctors. Cohort studies are also known as “natural experiments”, because people continue their usual care without interference from the researchers. The researchers collect biospecimens and information related to general health and cancer behavior over time, without dictating how and what kind of cancer treatment should be given.

As the Registry builds over thousands of patient visits and observations over ten or more years, information can be turned into knowledge that will inform future generations of doctors and patients.

Visit our web portal at
www.APCaRI.ca

What we hope to achieve

Biologists tend to think about molecules, switches and pathways inside the cell. Doctors tend to think whether surgery is necessary, how much radiation or drug therapies to use. Together with epidemiologists, biostatisticians, and other researchers, we hope to gain a much richer understanding of prostate cancer through markers of biological change and how they implicate future cancer and health problems.

Rather than being frightened by the word ‘cancer’, we want to learn how to predict serious and morbid prostate cancer complications well before they happen, so that we can weigh carefully the pros and cons of available treatments. It is true that we cannot predict the future, but that shouldn’t stop us from learning how to make educated guesses. In the process, we expect to identify new and important advantage points for better therapies to be developed. The word “cancer” may be scary, but what is truly scary is ignorance.

How you can help

If this is sounding interesting to you, please take a moment to chat with our friendly research coordinator or nurse.

If you are uninterested or you think it is too much of a hassle, we want to hear about it too. This is how we learn. After visiting our website or reading more in the consent to research form, you can decide whether you want to participate in this prostate registry and study.

What it means to be in a study

Being in this research study means that you – your health as it relates to prostate problems, prostate cancer or other chronic conditions – will be observed by researchers. There are two components to observation: active and passive.

Active observations require your attention, which include collecting samples from you (blood, urine, semen, etc.) and asking you questions directly through surveys once a year for five years.

Passive observations do not require your attention, which include researchers requesting on your behalf relevant clinical and related information from your health care providers, such as your urologist and Alberta Health Services which administrate all hospital-based services, for at least 10 years.

Participation in a research study is voluntary, which means even after you signed consent, you can also quit being in this study if you choose to.

Thank you for giving thought to this important initiative!

If you have more concerns or unanswered questions please contact:

Dr. John Lewis
Principal Investigator Lead Site
Frank and Carla Sojonky Chair in
Prostate Cancer Research
Department of Oncology
University of Alberta
jdlewis@ualberta.ca
780-492-6113

Dr. Adrian Fairey
Principal Investigator Alberta Urology Institute
Department of Oncology
University of Alberta
afairey@ualberta.ca
780-426-3075

Dr. Bryan Donnelly
Principal Investigator Prostate Cancer Centre
Department of Oncology
University of Calgary
donnelly@ucalgary.ca
403-943-8968

Dr. Peter Venner
Investigator Participating Cross Cancer Institute
Department of Oncology
University of Alberta
peter.venner@albertahealthservices.ca
780-432-8756

Dr. Dean Ruether
Principal Investigator Tom Baker Cancer Centre
Department of Oncology
University of Calgary
dean.ruether@albertahealthservices.ca
403-521-3009

Dr. Ronald Moore
Principal Investigator Kaye Edmonton Clinic
Department of Surgical Oncology
University of Alberta
Ron.Moore@albertahealthservices.ca
780-407-6330

The Alberta Prostate Cancer Research Initiative (APCaRI) is supported by:



ALBERTA
PROSTATE CANCER
RESEARCH INITIATIVE
knowledge | action | impact

**Alberta Prostate
Registry and BioRepository**

**Making an Impact on
Prostate Cancer Outcomes
and Quality of Life**



“What can we do to make a difference tomorrow?”

Frank Sojonky 1928-2012

