# Prostate Examiner Winter Newsletter

Visit us at www.prostatecancersupporttbay.org

Prostate Cancer Support

## Looking for Support?

### Men available to talk to you

| | |
|---|---|
| Harold Alanen | 807 252-9067 |
| Mike Aldrich | 807 630-3744 |
| Marc Breton (en francais) | 807 628-9944 |
| Bill Everitt | 807 767-5768 |
| Bill Horde | 807 767-1490 |
| Bill Komar | 807 627-2424 |
| Ed Long | 807 628-6915 |
| John Mann | 807 626-6522 |
| Milton Marion | 807 475-0760 |
| Keith Moore | 807 632-6055 |
| Mark Sypus | 807 768-5009 |

### Women available to talk to you

| | |
|---|---|
| Carmen Marion | 807 475-0760 |
| Susan Aldrich | 807 628-7150 |
| Lise Pollard (en français) | 807 623-3102 |

### Northwestern Ontario Region

**Atikokan**
Ron Speck 807-597-2219

**Hearst**
Marcel Girouard 705-362-8154 (en français)

**Terrace Bay/ Schreiber**
Mike Regis 807 825 9696

**Geraldton**
Ron Adams 807 854 1476




Email us at info@prostatecancersupporttbay.org

Prostate Cancer Support Thunder Bay

**December 2026**




**Sept 21 2026 City Hall flag raising**
Mayor Ed Boschcoff spoke about the importance of Prostate Cancer awareness and the great advances being made as well as the great cancer team we have in Thunder Bay

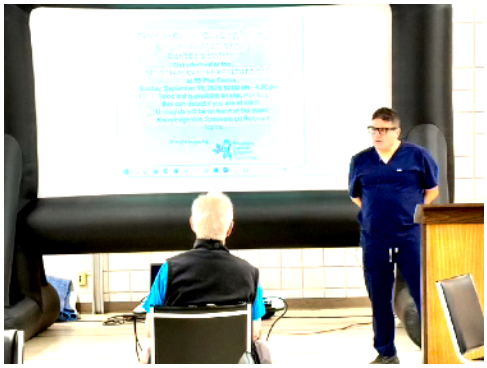


**Boulevard Lake Dam**
Lit up in recognition of Prostate Cancer Awareness Month

## Pictures from this years Sept 13th Prostate Cancer Health Fair



Amazing Volunteers from Lifelabs



Dr Shahrour addressing the attendees



Attendee getting a PSA test



Dr Joe DelPaggio, Chief of Oncology, with a volunteer




Sponsors and door price donators



Panel of Doctors held a lively discussion with the attendees

Prostate Cancer Support Thunder Bay

**December 2026**

# Study shows how prostate tumors rewire metabolism to resist therapy

Weill Cornell Medicine August 20 2026

Prostate tumors can rewire amino acid metabolism to override the normal brakes on cholesterol production, a process that may fuel hormone therapy resistance, according to a study by Weill Cornell Medicine investigators. The preclinical study, published Aug. 20 in Nature Metabolism, revealed that a compound called propionyl-CoA, produced by the breakdown of amino acids isoleucine and valine during normal energy metabolism, acts as a signal that switches on cholesterol production. This helps prostate cancer cells adapt to the hormone-deprived conditions resulting from treatment and acquire more aggressive features. By revealing this previously unrecognized connection, the study identified a potential weakness in prostate cancer that could be targeted with new drugs or, pending clinical testing, dietary strategies that reduce levels of isoleucine and valine. These essential amino acids are abundant in protein-rich foods such as meat, fish and dairy products.

*"Our study uncovers an unexpected way prostate cancer cells can adapt when hormone signaling is blocked. It raises the possibility that the availability of certain amino acids, whether from diet or altered metabolism, may affect how tumors progress and respond to therapy."*
*The study's lead author, Dr. Zhongchi Li, an instructor in pharmacology at Weill Cornell, explained that the team identified elevated levels of propionylcarnitine, a metabolite closely related*

The study's lead author, Dr. Zhongchi Li, an instructor in pharmacology at Weill Cornell, explained that the team identified elevated levels of propionylcarnitine, a metabolite closely related to propionyl-CoA, in more aggressive human prostate tumors. Following this clue, the researchers discovered that propionyl-CoA promotes the addition of a chemical tag, called propionylation, to a protein named SREBP2. This tag stabilizes SREBP2 and keeps cholesterol-producing genes switched on. Normally, SREBP2 acts as a sensor that boosts cholesterol production when cholesterol levels are low and reduces production when levels are high, maintaining balance. However, propionyl-CoA enabled SREBP2 to remain active even under conditions that would normally suppress cholesterol production, allowing cancer cells to bypass this metabolic safeguard.
Prostate cancer cells use the excess cholesterol to produce androgens (testosterone and related male hormones), which activate the androgen receptor, a key driver of prostate cancer growth. Drugs like enzalutamide are designed to block this signaling pathway, but increased production of male sex hormones helps tumors maintain that signaling and become less responsive to treatment. The researchers also found that propionyl-CoA levels rose when prostate cancer cells were deprived of male hormones in laboratory models, indicating that tumors may activate this pathway as a survival strategy when hormone signaling is disrupted by treatment."Because this pathway connects nutrients, cholesterol and hormone signaling, it gives us several points where we may be able to intervene," Dr. Blenis said. "The long-term goal is to determine whether drugs or carefully controlled dietary strategies can make existing treatments work better." Though people normally get isoleucine and valine from their diet, other potential sources of propionyl-CoA exist in the body. Aging and cancer-associated cachexia can involve substantial muscle loss, while obesity and diabetes have been associated with altered circulating levels of branched-chain amino acids. Whether these systemic changes increase propionyl-CoA production within tumors remains unknown.

## UPCOMING EVENTS

1. December 17th 2026 - Christmas Social, 5:00 PM at 55 Plus centre.
   (2026 paid up members only. Memberships available at the event)
2. January 14th 2027 - Dr Joe Del Paggio (Chief of Oncology) and Dr Restini (Radiation Oncologist)
3. February 18th 2027 - Dr Meaghan Labine (Modern Medicine) on Hyperbaric Oxygen Therapy
4. March 18th 2027 - To Be Determined

**(Continued from Page 3)**

The researchers found that restricting isoleucine and valine slowed tumor growth and reduced metastases of prostate cancer cells to the lungs in mouse models. On the other hand, boosting propionyl-CoA levels promoted tumor growth and increased lung colonization.

"If future clinical studies show that reducing valine and isoleucine in a patient's diet is safe and effective, combining this approach with enzalutamide might improve the response to treatment," Dr. Blenis said. "In addition, drugs that inhibit key enzymes required to convert isoleucine and valine into propionyl-CoA could aid in limiting resistance to androgen receptor targeting therapies."

Because the pathway ultimately drives cholesterol production, the findings may also help explain why some studies show that cholesterol-lowering drugs known as statins appear to benefit some prostate cancer patients but not others. If validated in future studies, activity of this pathway may indicate which patients with prostate cancer would benefit from statins, Dr. Li said.

Dr. Blenis' lab will continue to study the role of this pathway in other types of cancer, as well as in aging and metabolic diseases.

"Metabolism does much more than supply energy and building blocks—it also generates signals that can change how cells behave," Dr. Li said. "This study shows how one such signal can help cancer cells adapt to treatment, highlighting why the connections between diet, metabolism and therapy deserve closer attention."

**Source:**
Weill Cornell Medicine

**Journal reference:**
Li, Z., et al. (2026). Isoleucine and valine promote prostate cancer progression via propionyl-CoA-mediated cholesterol metabolism. Nature Metabolism. DOI: 10.1038/s42255-026-01583-z. https://www.nature.com/articles/s42255-026-01583-z

# PRESIDENTS MESSAGE

This year we've had an absolutely wonderful summer and so far a beautiful fall, with lots of sunshine and great temperatures.

I'm hoping that the coming winter treats us well.

We had a very successful Health Fair and the attendees were able to not only get their PSA tested but were treated to many informative presentations.The doctors very graciously donated their time and knowledge and we really appreciate their continued support.

A big shout out to the volunteers from Lifelabs who did a fantastic job. Thank you.

Thank you also to the retired nurses who volunteered their time to assist with the Mini Medicals.

Without the Doctors, Lifelabs, Nurses, volunteers and donors, this event would not be possible.

I am wishing everyone a wonderful Christmas and a happy and healthy New Year.

I hope to see you all at our Christmas Social on December 17th.

See you all there.

*Sincerely*
*Your President*

*Keith Moore*



# New alpha-emitting radiopharmaceutical therapy achieves strong responses in advanced prostate cancer

Society of Nuclear Medicine and Molecular Imaging — October 26 2026

A new alpha-emitting radiopharmaceutical therapy (RPT) for advanced prostate cancer was well tolerated, with no dose-limiting toxicities observed, and showed encouraging signs of antitumor activity, according to a phase 1 trial published in The Journal of Nuclear Medicine's Late-Breaking Fast Track. Among patients treated with 212Pb-ADVC001, 80 percent experienced a decline in prostate-specific antigen (PSA) levels of at least 50 percent, and the overall response rate was 100 percent. The findings support further clinical development of 212Pb-ADVC001 to address the significant unmet needs in metastatic prostate cancer.

Prostate-specific membrane antigen (PSMA)–targeted RPT is an established treatment for metastatic androgen pathway modulation-resistant prostate cancer (mAPM-R, formerly metastatic castration-resistant prostate cancer). Although 177Lu-PSMA-617, a beta-emitting RPT, has shown improved overall and radiographic progression-free survival in pivotal trials, approximately one-third of patients are resistant to 177Lu-PSMA, and most responders progress during, or soon after treatment.

"Current RPTs use fixed dosing regimens that do not account for variability in tumor response," said the study authors. "These limitations highlight the need for novel treatment strategies that may enhance patient outcomes using more potent payloads and optimization of dose and schedule."

Alpha-emitting RPTs have emerged as a new treatment approach: unlike beta emitters such as 177Lu, which release lower-energy particles that travel up to a couple of millimeters, alpha emitters release high-energy particles that travel only a few cell widths, delivering concentrated radiation to cancer cells while sparing surrounding healthy tissue. The TheraPb phase 1 trial, a first-in-human study, evaluated both escalating doses and dosing frequency of the alpha-targeting RPT 212Pb-ADVC001.

The study included 22 participants with progressive mAPM-R previously treated with an androgen-receptor pathway inhibitor and taxane chemotherapy. Escalating doses of 60–200 MBq of 212Pb-ADVC001 were administered at prespecified intervals every six, four, two, or one week for up to six doses across seven dose-schedule cohorts. Researchers examined dose-limiting toxicities and adverse events to recommend doses for a phase 2 trial. They also evaluated PSA response, radiographic progression-free survival, and overall response rate.

No dose-limiting toxicities were observed, and the maximum tolerated dose was not reached. The most common treatment-related adverse events were dry mouth and nausea, and no serious adverse events occurred. Given these findings, the study committee selected 160 and 200 MBq as the recommended doses for phase 2 of TheraPb. In this early-phase study, 80 percent of participants had a PSA decline of 50 percent or more and the median radiographic progression-free survival was 11.2 months. The overall response rate was 100 percent.

"*Flexibility in dosing, together with the overall safety profile of 212Pb-ADVC001, further provides a rationale for evaluating combination strategies with other anti-cancer agents to maximize clinical outcomes,*" stated the authors.

JNM's Late-Breaking Fast Track is a highly selective, accelerated publication pathway reserved for high-impact, time-sensitive data of exceptional interest to the nuclear medicine and molecular imaging community. The track welcomes high-signal, practice-changing phase 2/3 clinical trials, as well as highly innovative, first-in-human phase 1 trials demonstrating profound scientific novelty and clinical urgency.

Source:
Society of Nuclear Medicine and Molecular Imaging

Journal reference:
Hansen, A. R., et al. (2026). TheraPb phase 1b: First-in-human dose-escalation and optimization study of 212 Pb-ADVC001 in PSMA-Positive metastatic androgen pathway modulation–resistant prostate cancer. Journal of Nuclear Medicine. DOI: 10.2967/jnumed.126.274089. https://jnm.snmjournals.org/content/early/2026/10/23/jnumed.126.274089

## Memberships

**Time to purchase your $15.00, 2027 PCS membership**
**Can be purchased at the monthly general meeting or**
**send an E Transfer to Prostate Cancer Support using**
**info@prostatecancersupporttbay.org**
**(no password required)**

Prostate Cancer Support Thunder Bay

**December 2026**

# Optimal prostate-specific antigen cutoff linked to improved prostate cancer survival

Wiley

August 10 2026

After treatment for metastatic prostate cancer, a drop in prostate-specific antigen (PSA) levels in the blood is an indicator that the treatment is working. A recent real-world study indicates that reaching a PSA level below 0.2 ng/mL is an indicator of improved patient survival. The study is published by Wiley online in CANCER, a peer-reviewed journal of the American Cancer Society.

Multiple phase 3 clinical trials have shown that a PSA level below 0.2 ng/mL is the best cut-off for determining a patient's prognosis. Real-world data are lacking, however, and physicians often use other metrics, such as percentage of PSA decline, to assess treatment response. To determine whether there is a PSA response target associated with the most favorable outcome in community-dwelling adults with metastatic prostate cancer, investigators analyzed Veterans Health Administration data on 4,890 patients who received testosterone deprivation therapy with or without other treatments in 2018–2023 for metastatic hormone-sensitive prostate cancer.

Over a median follow-up of approximately 2 years, 896 patients died. Patients whose PSA levels dropped below 0.2 ng/mL within 9 months of starting treatment were 54% less likely to die than patients whose levels did not drop this low, whether their PSA levels also decreased by at least 90% or not. Patients who had at least a 90% PSA decline but did not achieve a PSA of less than 0.2 ng/ml had no improvement in survival. The findings suggest that patients who do not experience a PSA drop below 0.2 ng/mL could be candidates for more aggressive treatments. Also, patients who received testosterone deprivation therapy plus another drug to further block testosterone were more likely to reach a PSA below 0.2 ng/mL.

*"These data show that we need to target a PSA below 0.2 ng/ml as our metric of success to optimize outcomes for our patients with metastatic prostate cancer."*

*Stephen J. Freedland, MD, corresponding author, professor of Urology at Cedars-Sinai and Staff Physician at the Durham VA Medical Center*

Source:
Wiley

Journal reference:
Freedland, S. J., et al. (2026). How low do you need to go? Association between various prostate-specific antigen response measures and clinical outcomes in metastatic castration-sensitive prostate cancer in the Veterans Health Administration data. Cancer. DOI: 10.1002/cncr.70494. https://onlinelibrary.wiley.com/doi/10.1002/cncr.70494

## IN PERSON MONTHLY MEETINGS AT 55 PLUS

**The multi purpose room has been booked for the third Thursday of every month from 7 PM till 9 PM**

## DONATIONS

Prostate Cancer Support Thunder Bay is a charitable organization that relies entirely on donations to remain in operation.

donations can be e-transferred to info@prostatecancersupporttbay.org

Prostate Cancer Support Thunder Bay

December 2026

## PCS THUNDER BAY

### CONTACT US AT

**1100 MEMORIAL AVE- SUITE 374**

**THUNDER BAY ONTARIO P7B 4A3**

**PHONE:**

807 627 0333

**EMAIL**

info@prostatecancersupporttbay.org

**WEB SITE:**

prostatecancersupporttbay.org

## Recently diagnosed with Prostate Cancer ?

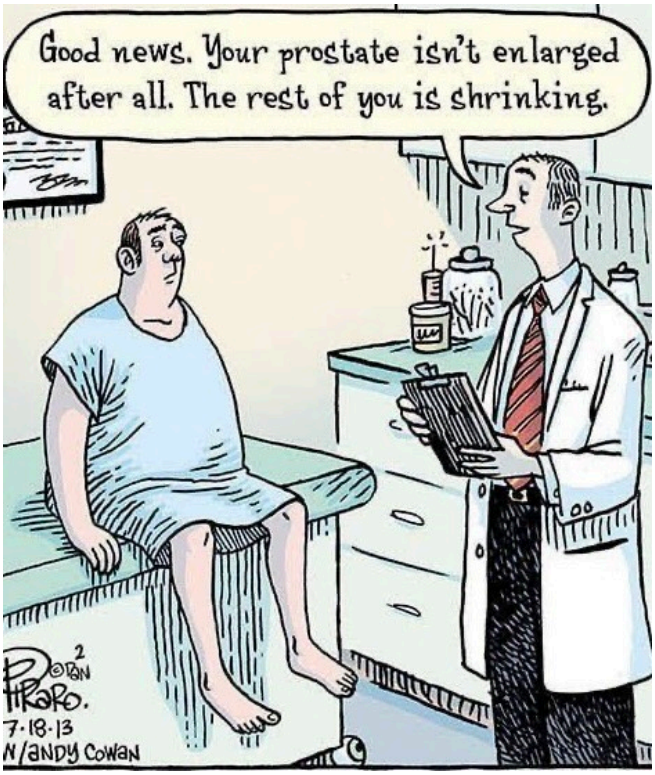
### NEED SOMEONE TO TALK TO?

**Please feel free to call anyone listed on the left side of the front page of this newsletter.**

**They have been where you are now and will be happy to listen to your concerns and questions.**

### Prostate Examiner Monthly News

**Please forward photos or information that benefits communication to Prostate Cancer Support Thunder Bay members to the attention of Mike Aldrich.**
**email: mraldrich@tbaytel.net**



Prostate Cancer Support Thunder Bay

December 2026

# **GET YOUR PSA TESTED**

**Its important**

We believe in it so strongly that

we will reimburse you for your PSA test !!!

The PSA test is a key step in early diagnosis of prostate cancer

**Early Detection Saves Lives**
**Get Informed!**

**Talk to your health care professional! Get your blood work done!**

**Send us the receipt**

**Address below or check us out on our website**

**Has been extended to December 31 2026.Available for men in NWO.**

**PCS Thunder Bay Members, please share the above message !**

**Inform your family, relatives, friends and neighbours to request a**

## PSA Test

**Awareness Support Research**


Telephone 807 627 0333

Email info@prostatecancersupporttbay.org

Web www.prostatecancersupporttbay.org

1100 Memorial Ave, Suite 374

Thunder Bay ON, P7B 4A3