



Tips for Living Well With Prostate Cancer

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Jeff Folloder:

Elizabeth, do you have any tips that you can offer our audience—caregivers for getting through this mess? This is not easy, and you're the one—again, you're the front line of this. So what can we do better?

Elizabeth Harris:

What I like working with Dr. Higano and Tanisha—her nurse practitioner—for is they look at the total person, not just the physical. We address the mental and emotional. Dr. Higano encourages her patients to go on vacation. They always send us pictures—the fish they caught, or where they are in the world—and we love seeing those. In fact, we're probably going to put that in the Team Higano website, where patients send in their pictures...

Jeff Folloder:

Living well.

Elizabeth Harris:

...they tell us of their adventures. And, we encourage them to talk.

I know it's hard to draw men out to talk, but support groups or sharing with their family members, or encouraging their family members to interact with them and be participants in their healthcare.

Jeff Folloder:

Outstanding. Rick, I'm going to ask you to give your best advice to the people who are probably quite afraid, very nervous, upset, and uncertain about what comes next. What kind of advice can you give them to get to your "living well" place?

Rick Dole:

Get yourself checked early, and believe it, and don't put it off. Don't put off getting tested. Now, to get—I feel happy. I'm in a good place in my life right now. That's just a series of events.

It's a mental attitude about life. I survived lots of things as a younger man, nearly getting shot down flying around in the Navy, and so on. But it's just knowing that every day brings a new adventure, and learn something.

Jeff Folloder:

Bill?

Bill Hayton:

Well, I think it's important to get connected to a clinic and a clinician that you have some confidence in. That's very reassuring. I feel like I've done that, and that I'm in good hands, and I've—you feel, at that point, that there's not a lot else you can do, other than the things that have been emphasized here, and that is maintain a healthy lifestyle, including exercise, diet, and so forth. But I just don't.

I've got prostate cancer, but I guess I don't—what do I want to say? I believe it, but I don't think about it very much.

Dr. Higano:

You're not going to let it ruin your life.

Bill Hayton:

You don't, right. I'm tempted to tell you what—what a radiation oncologist back at Ohio State said to me. I was talking to him about radiation therapy as the primary therapy, and longevity after you take the treatment, and so forth, and he looked at me and said, "Everybody's going to die of something," and that was shocking to me, but he was right.

Jeff Folloder:

Dr. Higano, are you hopeful? Are you hopeful for the future?

Dr. Higano:

Oh, yeah. Absolutely. Look, we're all going to be on this earth only X amount of time. I don't believe we're going to come up with the panacea to death, okay?

But I think that prostate cancer therapies right now are as good as they ever have been, and they're only going to get better. I especially am holding out hope for the immunotherapy approaches on top of the other progress that we've already made. I trained as a bone marrow transplant, so I have seen the potency of the immune system, followed by our own experiences with ipilimumab (Yervoy) and other immune treatments. So, of course, I'm hopeful. I wouldn't be doing this if I wasn't hopeful.

Jeff Folloder:

It's also great to see the smile when you say that. Dr. Beer, I'm asking you the same question: What makes you enthusiastic? What makes you know that things are going to be getting better for your patients?

Dr. Beer:

Well, first of all, they have been getting better, so I know they're going to get better because I've lived and breathed this. When I got started in the field, there were no life-extending therapies once the disease progressed on hormone therapy. We now have six, five of which have come in this decade.

So I've seen the change get from the lab to the clinic over and over again. I also see us really understanding the disease better and better at a rapid clip. Translating that is not something you can do overnight into patient care advances, but the genomics, the immune system—the knowledge there is just exploding, and I see the potential of that knowledge to continue to drive—and even accelerate—the progress that we've seen over the last decade.

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