

The logo for 'BOB tales' features the text 'BOB' in a large, bold, dark blue font, followed by 'tales' in a smaller, lowercase, dark blue font. To the right of the text is a red balloon with a white string. The background consists of light blue and green wavy lines.

BOB tales

Brotherhood of the Balloon Member Newsletter | **Nov/Dec 2024**

“The meaning of life is to find your gift.
The purpose of life is to give it away.”

—Pablo Picasso

Dear Members (a note from Deb Hickey):

When life gives you a second chance, a renewed sense of purpose often comes with it. For those who’ve faced the uncertain journey of cancer and come out the other side with their quality of life preserved, the experience can be *transformative*.

Proton therapy has given so many that second chance—allowing them not only to survive but to *thrive*. With this remarkable gift comes a profound desire to give back, to ensure that others can receive the same compassionate care and the promise of a future.

Our BOB community is full of people who understand this sense of gratitude better than most. You know what it means to face a challenge that could alter your life forever, only to find hope and healing. And that gratitude often translates into incredible acts of generosity and kindness. These acts come from a deep understanding that the true purpose of life is not just to receive, *but to give back*.

Loma Linda University Health’s *Stronger Together* campaign, for instance, focuses on advancing innovation in clinical care and academics to benefit future cancer patients. Through contributions to this campaign, supporters are not only fueling groundbreaking initiatives, but also helping ensure that others can access the same exceptional care—whether through proton therapy or other treatments available now or in the future.

True fulfillment in life comes from helping others. It’s not solely about making financial contributions—though those can be impactful—but about being there for one another in meaningful ways. It involves sharing our time, knowledge, compassion, and hope, and lifting up those who are struggling, just as we were once supported.

I truly believe the purpose of life is to *give*.

This month in our “In the News” section, we explore how an innovative AI test is revolutionizing treatment decisions for low-risk prostate cancer by providing personalized risk assessments, empowering patients to make informed choices. We also discuss the pitfalls of Medicare Advantage plans, where profit often takes precedence over patient care, leading to higher out-of-pocket costs and limited access to treatments. Additionally, new research indicates that a healthful diet may play a crucial role in preventing low-risk prostate cancer from becoming more aggressive, emphasizing the importance of dietary choices. And, as usual, there’s a lot more.

We wish all our members a happy, healthy holiday season! As you gather with loved ones in the coming weeks, may you find joy in their company and share moments of laughter and connection. We hope you enjoy delicious meals, stay safe, and find time to reflect on the many blessings in your life.

As always, we welcome any suggestions you have on improving the value of the *BOB Tales* to our members. Please send your feedback to DHickey@protonbob.com.

Deb Hickey



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New AI Test Guides Treatment Decisions for Low-Risk Prostate Cancer

In a recent [interview](#), Dr. Alicia Morgans, medical oncologist and clinical investigator at Dana-Farber Cancer Institute, spoke with Dr. Andre Esteva, CEO and co-founder of ArteraAI, about the expanded capabilities of the [ArteraAI Prostate Test](#). This AI-driven test, first introduced in our [June 2023 issue](#), is now validated for use in patients with low-risk prostate cancer. It helps doctors decide whether to monitor the cancer closely (active surveillance) or proceed with treatment by analyzing biopsy slides digitally to assess the likelihood of finding more aggressive cancer features later on.

The ArteraAI test offers personalized risk assessments for patients across all stages of prostate cancer and has been validated in multiple studies, with evidence published in top journals. It's now included in the NCCN guidelines and is covered by Medicare. The test shows that about 80% of low-risk patients have less than a 3% chance of distant metastasis, allowing many to be monitored comfortably without immediate treatment.

In the interview, Dr. Esteva discussed ArteraAI's partnership with [PathNet](#), which enables faster result delivery by integrating the AI analysis with pathology reports. This reduces waiting times for patients and improves clinical decision-making.

The discussion concluded with Dr. Esteva emphasizing the test's broad applicability and its ability to support treatment decisions for patients with localized prostate cancer.

news briefs

[Long Drives Limit Access to Proton Therapy for Rural and Low-Income Americans](#)

Over 16% of Americans must drive at least four hours to access proton therapy. Those in rural areas, older adults, and low-income individuals face the longest commutes, creating significant barriers to this advanced therapy.

Researchers at the University of Kentucky conducted a study analyzing drive times, revealing that the median travel time is around 96 minutes but much longer for non-Hispanic white individuals and rural residents. This lack of access not only limits treatment options but also hinders participation in important clinical trials.

Researchers noted that improving access to proton therapy is crucial for equity in cancer treatment, especially for vulnerable populations, and emphasized the need for awareness of these travel barriers among patients, clinicians, and policymakers to support informed decision-making.

Looking ahead, ArteraAI aims to make this technology more widely available by partnering with leading medical institutions across the U.S., including large cancer centers and community practices. Their goal is to empower clinicians, especially those managing active surveillance patients, with precise data that guide personalized care. As adoption grows, ArteraAI envisions a future where AI-driven tools become standard practice in prostate cancer care, improving outcomes and quality of life for patients.

Medicare Open Enrollment—Buyer Beware!

In our December 2022 issue of *BOB Tales*, we [highlighted the dangers of Medicare Advantage](#), noting that nearly half of eligible Medicare beneficiaries enrolled in these plans, largely due to aggressive marketing. Many seniors who switched from traditional, government-run Medicare to these for-profit private plans later regretted their decision. A major issue was the denial of necessary treatments, like proton therapy for prostate cancer, which traditional Medicare covered but Medicare Advantage plans often refused to approve. Much of this frustration stemmed from a common misunderstanding: while both fall under the “Medicare” umbrella, Medicare Advantage is run by private insurers focused on profit, making it fundamentally different from traditional Medicare.

Deceptive Marketing Schemes

As we reported in 2022, seniors continue to receive mailers that resemble official government forms, as well as seeing buses with signs promoting misleading Medicare websites.

[Immunotherapy Shows Greater Effectiveness in Black Prostate Cancer Patients](#)

A new study from Duke Cancer Institute reveals that black men with advanced prostate cancer experience greater survival benefits from the immunotherapy sipuleucel-T, partly due to unique ancestral gene variants affecting immune response. Published in *Cancer Research Communications*, the research shows that these genetic differences may enhance immunotherapy effectiveness in black men and highlights the potential for personalized cancer treatment based on ancestry to improve outcomes for all patients.

[New Proton Therapy Bill Passed in Virginia](#)

Virginia’s General Assembly has amended legislation to ensure that proton therapy for cancer is held to the same clinical evidence standards as other radiation therapies for insurance coverage. Effective January 1, 2025, carriers must consider Medicare, Medicaid, or physician recommendations sufficient for proton therapy coverage without requiring higher evidence standards.

Additionally, celebrities appear in TV commercials encouraging enrollment in Medicare Advantage plans, which may not include seniors' current doctors.

In response, the Centers for Medicare & Medicaid Services (CMS) have been working to curb these predatory marketing practices, stressing the need for clearer and more accurate information to help seniors make informed decisions. Here are some key measures they've implemented:

- **Marketing Guidelines:** New rules will require CMS approval for all marketing materials, prohibiting misleading advertisements.
- **Broker Compensation Limits:** A fixed payment structure for brokers aims to prevent incentives for recommending unsuitable plans.
- **Health Equity Inclusion:** Health equity experts will evaluate prior authorization policies to ensure fairness in marketing practices.
- **Improved Appeals Process:** Enhancements are being made to streamline the appeals process for denied services.

A Friend's Story

Bob and Deb have close family friends with a disabled adult daughter. They switched their daughter's plan from Medicare to Medicare Advantage, believing they were adding new coverage, such as vision, hearing, and dental insurance, while also saving money. While some of this was true, they weren't aware of the significant losses they would face. A couple of their daughter's doctors were no longer available, one of her expensive medications was not covered, and customer service support was clearly of lower quality. Hold times on the phone often exceeded 30 minutes, and when they finally got through, they struggled to communicate with representatives halfway around the world. At the next open enrollment period, they switched back to government-run Medicare.

Profits Over Patients

While Medicare Advantage might offer lower premiums upfront, patients often face significant drawbacks, including higher out-of-pocket costs, limited provider networks, and complex pre-authorization processes. This often leads to surprise bills and delayed care, often when they need it most.

Private insurers running Medicare Advantage plans have [faced accusations](#) of fraudulent practices like "upcoding," assigning patients more serious diagnoses to inflate bills and overcharge Medicare. This practice costs Americans over \$140 billion annually and drains the Medicare Trust Fund, jeopardizing the future of the program.

Moreover, Medicare Advantage plans come with a hefty administrative fee of 13-18.5%, compared to just 2% for traditional Medicare. These extra costs translate into profits for private companies rather than care for patients. Agents are incentivized to promote these plans through commissions, creating a sales-driven approach that prioritizes corporate profits over patient needs.

The rise of Medicare Advantage means that private corporations now influence the care of over 50% of Medicare beneficiaries.

The Debate Over Medicare for All

Some argue that to truly fulfill Medicare's promise, a shift toward "Medicare for All" is needed. This approach, they say, would eliminate profit-driven practices, allow patients to see any doctor, and remove barriers imposed by Medicare Advantage plans. Advocates believe it would provide comprehensive coverage for everyone without copays or deductibles, while reducing the administrative waste currently burdening the system.

Opponents, however, contend that Medicare for All would significantly expand government control over health care, raise taxes, and limit choices for those who prefer private insurance. They also argue it could lead to longer wait times for care and potentially impact quality.

As long as private insurers profit from Medicare Advantage, patients will continue to face hurdles, and taxpayers will bear the cost. Reforming the system is essential to ensure that Medicare remains a safety net, not a profit center for corporations.

- ▶ **BOB Comment 2024:** We certainly can't cover all aspects of Medicare Advantage versus government-run Medicare in one article. Some patients do benefit from Medicare Advantage plans, but many are harmed. Our intention is to alert our members to some important differences between the two, particularly how aggressive marketing techniques can obscure some disadvantages of switching to Medicare Advantage. It's essential to do your homework before changing plans, as marketing ads and salespeople often don't present the full story.

The good news is that you can switch between the two plans during the open enrollment period, which runs from October 15 through December 7 each year. Coverage changes take effect the following January 1.

Healthful Eating May Help Keep Early-Stage Prostate Cancer from Progressing to Advanced Stage

In a [new study](#) from Johns Hopkins Medicine and published in *JAMA Oncology*, researchers have uncovered compelling evidence suggesting that a healthful diet may play a critical role in preventing low-risk prostate cancer from becoming more aggressive. The research, considered the first of its kind, focuses on men who are practicing active surveillance instead of immediately undergoing treatment, which can come with unpleasant side effects.

The findings are particularly relevant for men seeking proactive ways to improve their health. Dr. Bruce Trock, a co-senior author and professor of urology and oncology, emphasized that many men diagnosed with low-grade prostate cancer are eager to know how lifestyle changes, especially in their diet, can impact their prognosis. With data collected over the past two decades, this study aims to provide actionable insights into dietary choices that may help slow cancer progression.

Previous studies have explored the link between diet and prostate cancer, but this research stands out for demonstrating a statistically significant correlation between a healthful diet and a reduced risk of grade reclassification. Dr. Christian Pavlovich, another co-senior author, noted that their study showed men adhering to a higher quality diet—unrefined, minimally processed foods such as vegetables and fruits, whole grains, healthful fats and healthful sources of protein—had lower rates of cancer progression.

Study Overview and Methodology

The research team evaluated 886 men (median age: 66) diagnosed with grade group 1 (slow growing) prostate cancer between January 2005 and February 2017. Each participant completed a validated food frequency questionnaire, which allowed researchers to calculate a Healthful Eating Index (HEI) score for each individual. The HEI serves as a benchmark for diet quality, based on how well dietary habits align with the U.S. Department of Agriculture's guidelines.

The HEI measures dietary quality by looking at the intake of specific foods: whole fruits, vegetables, whole grains, and lean proteins like fish and legumes. Diets with fewer

added sugars, saturated fats, and refined grains score higher, indicating a closer adherence to a healthy eating pattern.

The findings revealed that men with higher HEI scores experienced significantly lower rates of grade reclassification. Specifically, an increase of 12.5 points in the HEI score was linked to approximately a 15% decrease in reclassification to grade group 2 or higher and a 30% decrease for grade group 3 or higher.



Additionally, the study examined dietary inflammation potential through the Dietary Inflammatory Index (DII), which assesses whether a diet may contribute to inflammation—an important factor in cancer progression.

The DII takes into account the balance between pro-inflammatory foods—such as refined carbohydrates, red and processed meats, and sugary snacks—and anti-inflammatory foods, like fruits, vegetables, whole grains, and omega-3-rich sources like fish.

While lower inflammatory potential was noted in those with more healthy diets, researchers did not find a direct correlation between inflammatory diets and grade reclassification.

Study Limitations and Future Directions

Despite these promising results, the researchers acknowledged limitations, such as reliance on self-reported dietary data, which may introduce bias. Furthermore, the study predominantly included white men, suggesting that future research should encompass more diverse populations to validate these findings.

As the researchers move forward, they hope their work will provide practical guidance for men opting for active surveillance and seeking to enhance their dietary habits. This study serves as a vital reminder that what we eat can significantly influence our health, offering hope and direction to those navigating the complexities of prostate cancer.

Updated Findings: Blind Biopsy vs. MRI-Targeted Biopsy

A [recent study](#), published in *The New England Journal of Medicine*, suggests that skipping biopsies for men with negative MRI results could significantly reduce unnecessary prostate cancer diagnoses. These findings could mark a shift in how prostate cancer is detected and managed.

Study Overview

Launched in 2015, the Swedish study invited men aged 50 to 60 to undergo PSA screening and divided participants into two groups: a blind (systematic) biopsy group (6,578 men) and an MRI-targeted biopsy group (6,575 men).

In the blind biopsy group, men with a PSA level of 3 ng/mL or higher underwent an MRI, followed by a biopsy regardless of MRI results. If the MRI revealed suspicious areas, an additional targeted biopsy was performed. In contrast, in the MRI-targeted group, only those with suspicious MRI findings received a targeted biopsy. Follow-up screenings were offered every two, four, or eight years, depending on each participant's PSA levels.

The primary aim was to evaluate the detection of clinically insignificant prostate cancer, defined as ISUP (International Society of Urological Pathology) grade 1 disease.

Key Results

After nearly four years of follow-up, the study found that omitting biopsies for those with negative MRI results led to a substantial reduction in the detection of low-risk prostate cancer:

- **Clinically insignificant prostate cancer** was found in only 2.8% of men in the MRI-targeted group (185 out of 6,575) compared to 4.5% in the systemic biopsy group (298 out of 6,578). This marked a 57% reduction in such diagnoses (relative risk = 0.43).
- **Clinically significant prostate cancer** (ISUP grade ≥ 2) detection rates were similar in both groups—1.8% in the MRI-targeted group and 2.1% in the systemic biopsy group.
- **Advanced or high-risk cancers** (metastatic or ISUP grade 4 or 5) were slightly less frequent in the MRI-targeted group (15 cases) than in the systemic biopsy group (23 cases).

The study suggests that skipping biopsies for men with negative MRI results could avoid over-diagnosing low-risk prostate cancer without significantly increasing the risk of missing more dangerous forms of the disease. This approach may offer a way to reduce unnecessary treatments and focus medical resources on more serious cases.

Black Garlic: A Natural Weapon Against Prostate Cancer

A research team from the University of Cordoba and the Maimónides Biomedical Research Institute (IMIBIC) is investigating the potential of fermented black garlic extract as a treatment for prostate cancer. Their recent [study](#), which tested the extract on human prostate cancer cells in the lab, revealed promising results.



The team, known as the OncObesity and Metabolism group, focuses on finding natural compounds that could be integrated into diets to fight various types of cancer. Researchers Raúl M. Luque, María Loreta Libero, and Antonio J. Montero examined fermented black garlic extract due to its known anti-inflammatory properties observed in previous experiments with mice. Given the key role of inflammation in prostate cancer progression, they sought to evaluate its effects on human prostate cancer cell models.

“We tested the extract on different models of human prostate cancer cells and found that it significantly reduced indicators of tumor aggressiveness, such as cell proliferation,” said Antonio Montero.

Importantly, the extract did not harm normal prostate cells, suggesting it could be safely used as a dietary supplement without negative effects on healthy tissue.

The team also investigated how the extract impacts cellular mechanisms. Raúl Luque explained that the treatment altered critical cancer-related pathways, particularly those involved in inflammation. This anti-inflammatory action appeared to reduce the overall aggressiveness of the cancer cells, with the extract being especially effective in a pro-inflammatory environment.

“This compound could be a valuable option for preventing complications in patients at risk of progressing to more aggressive stages of prostate cancer,” Luque added.

Looking ahead, the researchers plan to test the extract’s preventive effects in clinical settings. This could include pilot studies with individuals who have a family history of prostate cancer or clinical trials in patients already diagnosed, to see if the extract can slow or stop the progression of the disease. The team hopes their findings will open new doors for using natural, diet-based approaches in prostate cancer management.



flashback

We’ve been producing BOB Tales newsletters for more than 23 years. During this time we’ve published articles that many new members haven’t seen, and some older members may have forgotten. So, we periodically re-run articles from past BOB Tales. This one from October 2007 – when we had only 3,064 members (we now have more than 10,000) – is titled:

Important ‘New’ (?) Finding from Johns Hopkins

We received a bulletin through our *Google Alerts* last month indicating that Johns Hopkins reported a significant new finding that, “should save men with early prostate cancer from making any irrevocable decisions too hastily.”

And, that new finding? *Having sex within 72 hours of your PSA test can produce a false reading.*

Hello... Isn’t this old news? We’ve been talking about this for five years, along with the fact that there are some conditions that can produce false readings for up to six weeks. It’s in Bob’s book.

This information was first published in the August 1998 *Journal of Laboratory Medicine*. Here are some other things that can cause false readings, from page 190 in Bob’s book. (Page 246 in the new edition)

Condition/Manipulation	Effect on PSA Increase	Persists Up To
Acute bacterial prostatitis	5-7 fold	6 weeks
Acute urinary retention	5-7 fold	6 weeks
Bicycle or horseback riding	0-3 fold	1 week
Prostate biopsy	Very variable	6 weeks
Prostate massage	Variable	6 weeks
Ejaculation	Variable	3 days
TURP (transurethral resection of the prostate)	Very variable	6 weeks



making a difference by giving back

From Cars to Cancer

Galen Bakewell, a 67-year-old car and motorcycle enthusiast, never expected to hear the words “cancer” following a routine screening. But when elevated PSA levels were found, a subsequent biopsy confirmed his fears. After consulting with a radiation oncologist at Loma Linda University Cancer Center, Galen opted for proton therapy.

“The lack of side effects compared to surgery was a no brainer,” Galen said.

Despite initial anxiety, Galen found the treatment manageable and stress-free. He’ll have regular monitoring over the next five years and has returned to enjoying his hobbies—working on his hot rod and motorcycle. He’s also become an advocate for routine PSA screenings. Galen’s story highlights the progress of targeted therapies in minimizing side effects and preserving quality of life. Read more about Galen’s journey and watch a special video [here](#).

As a pioneer in proton therapy, Loma Linda University Health (LLUH) continues to push the boundaries of cancer treatment. Looking forward, the team is excited about other advanced therapies, including theranostics, CAR T-cell therapy, and Boron Neutron Capture Therapy (BNCT).

Like proton therapy, BNCT is a highly targeted approach that spares healthy tissue, but works on a molecular level, using boron-containing drugs that selectively accumulate in cancer cells. Once these cells are “tagged” with boron, neutron radiation activates a reaction that destroys cancer cells from within, while leaving nearby healthy cells intact.

BNCT holds promise for treating difficult-to-target cancers, such as recurrent head-and-neck cancers, glioblastomas, liver cancers, and melanomas, particularly when tumors are located near critical structures where conventional treatments pose higher risks to surrounding tissue. By targeting cancer cells directly, BNCT reduces collateral damage and helps patients maintain a better quality of life during and after treatment.

Although still in early development, clinical trials for BNCT are expected within the next five years. With their expertise in proton therapy and particle accelerators, LLUH is positioned to lead this exciting frontier.

- ▶ **BOB Comment:** Our members’ experience with proton therapy has helped pave the way for future breakthroughs like BNCT. With each advancement, the possibilities for cancer treatment continue to expand, bringing new hope and the potential for improved patient outcomes.

As you consider your year-end giving, we ask that you reflect on the life-changing impact LLUH has had on so many—and the groundbreaking work they’re doing to advance cancer treatments and research. By making a gift to LLUH this season, you can help them continue their extraordinary efforts and extend access to even more patients in need. Together, we can help ensure that LLUH remains at the forefront of medical innovation, saving lives and improving the quality of life for countless individuals.

Giving Options

- **Online:** [Donate here](#). From the pull-down menu, choose where you'd like to direct your gift — 1) Cancer Center Vision; 2) Proton Research through the *James M. Slater Chair*; 3) Proton Research through the *Robert J. Marckini Chair*; or 4) Other (specify any area you'd like your gift directed in the space provided)
- **By Check:** Make your check out to "LLUCC." Specify where you'd like to direct your gift in the memo line — 1) Cancer Center Vision, 2) *Slater Chair*, 3) *Marckini Chair*, or 4) write "unrestricted" so LLUH can use it where it's needed most. Mail your check to: LLUH, Office of Philanthropy P.O. Box 2000, Loma Linda, CA 92354.
- **By Phone:** Call Regina Joseph at 909-558-5010.



health

Grandfathers' Workouts Boost Grandchildren's Brainpower

For years, studies have highlighted the cognitive benefits of exercise, but a recent study suggests that grandfathers who enhance their mental health through physical activity could also pass these advantages to their grandchildren.

Published in *The Journal of Neuroscience*, [this research](#) builds on earlier findings indicating that cognitive improvements from exercise can be transmitted from parents to their children. Scientists aimed to investigate whether these benefits could extend to the next generation, specifically grandchildren.

"We wanted to determine if these cognitive enhancements could impact grandchildren," the researchers explained.

To explore this, the team observed the behavior of male mice whose grandfathers had exercised compared to those from a control group of sedentary grandfathers. Remarkably, the grandsons of the physically active grandfathers exhibited similar cognitive benefits.

“Our findings showed that second-generation mice with active grandfathers had significantly better memory recall for both spatial and non-spatial tasks compared to those with sedentary grandfathers,” the researchers noted.

This discovery marks the first evidence of transgenerational inheritance of cognitive improvements resulting from physical exercise.

While these results are promising, further research is needed, particularly to include female mice and assess whether grandmothers can pass cognitive benefits to granddaughters. Future studies may even explore these effects in humans, potentially confirming that staying active not only benefits individuals but may also enhance the cognitive health of future generations.

Intense Exercise Boosts Seniors’ Brain Health

Exercise is widely known to benefit both body and mind, but new research suggests that high-intensity interval training (HIIT) might be especially powerful for keeping older adults’ brains sharp. A [study](#) published in *Aging and Disease* reveals that just six months of HIIT can enhance brain function for up to five years, far outlasting the benefits of less intense workouts.

High-intensity interval training (HIIT) is a form of exercise that alternates between short, intense bursts of activity and brief recovery periods. HIIT workouts can incorporate a range of exercises, including treadmill running, cycling, kettlebells, dumbbells, jump rope, or bodyweight movements.



Researchers from the University of Queensland in Australia tracked 151 adults aged 65 to 85, splitting them into three exercise groups: an HIIT group doing near-max effort treadmill sprints, a moderate-intensity group doing brisk walking, and a low-intensity group focusing on balance and stretching.

After six months, participants underwent cognitive tests, blood tests, and high-resolution brain scans focusing on the hippocampus—key for memory and learning. The results were clear: those in the HIIT group showed significant, long-lasting cognitive improvements. Even five years after the program, many still had better brain function, despite some not maintaining the exercise routine.

“Six months of high-intensity interval training is enough to flick the switch,” noted Perry Bartlett, PhD, from the Queensland Brain Institute.

The researchers aim to dig deeper into how biomarkers and genetics influence individual responses to exercise. But one message is already clear: encouraging older adults to stay active could have immediate and substantial benefits.

“If we can change the trajectory of aging and keep people cognitively healthier for longer through something as simple as exercise, we could significantly reduce the personal, economic, and societal tolls of dementia,” Bartlett emphasized.

While past research has shown that regular exercise boosts overall health, including brain function, this study highlights the particular value of high-intensity workouts. For example, previous studies, like one focusing on tai chi, found that consistent physical activity improves memory in seniors. But it’s HIIT that might offer the biggest long-term brain boost.

Sauna Sessions May Lower Dementia Risk

Two studies from Finland indicate that regular sauna use may help reduce the risk of dementia and Alzheimer’s disease.

The [first study](#), conducted in 2016 by the University of Eastern Finland, followed over 2,300 healthy men aged 42-60. It found that using a sauna two to three times weekly lowered dementia risk by 22%, while four to seven sessions a week reduced Alzheimer's risk by 66% over 20 years.

A larger, [subsequent study](#) led by Paul Knekt at the Finnish Institute for Health and Welfare tracked nearly 14,000 individuals aged 30-69 for up to 39 years. Those using a sauna nine-12 times a month had about half the risk of developing dementia compared to less frequent users.

Dr. Deepak Nair from OSF HealthCare finds these results encouraging, especially since there are few proven strategies to delay dementia. He notes that saunas could complement exercise and lifelong learning, the primary methods for reducing dementia risk.

Regular sauna use may also support cardiovascular health, which could further protect against dementia due to the interconnected nature of heart and brain health. Dr. Nair advises consulting primary care doctors before starting sauna use, as individual health needs vary. While saunas can be part of a broader health strategy, there's no single solution for preventing cognitive decline.

Overall, the research suggests that a few sauna sessions each week could benefit both brain and heart health, warranting further study.

No Link Between Cellphone Use and Cancer Risk

A comprehensive review supported by the World Health Organization (WHO) finds no increased risk of brain or other cancers from cellphone usage, [as reported by Reuters](#). An international panel of experts from 10 countries analyzed thousands of studies from 1994 to 2022, narrowing it down to 63. Their conclusion: radio frequency waves from wireless devices, including cellphones, do not raise brain cancer risk, even for heavy users.

The National Cancer Institute states that the low-level radiation emitted by cellphones is too weak to cause DNA changes that could lead to cancer. The study also found no increased risk for other cancers, including pituitary and salivary gland cancers and leukemia in both adults and children.

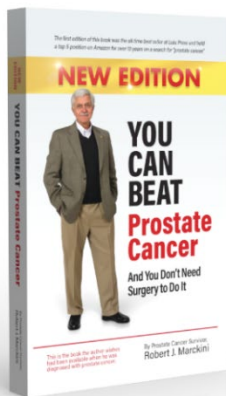
While the WHO classified radio frequency radiation as a possible human carcinogen in 2011, this new analysis considers a broader range of studies conducted since then, prompting the WHO to update its stance. Similarly, the U.S. Food and Drug Administration found “insufficient evidence” linking cellphone radiation to increased cancer risk.

Brain cancer remains rare, with the American Cancer Society reporting a lifetime risk of less than 1%. Approximately 25,400 cases are diagnosed annually in the U.S., leading to about 18,760 deaths. The WHO’s updated findings are expected to be released early next year.



the book

You Can Beat Prostate Cancer: And You Don’t Need Surgery to Do It – *Second Edition*



Still Strong on Amazon!

Bob’s book continues to significantly impact people’s lives, as evident by the feedback received on Amazon and by the many daily email messages we receive.

On Amazon, the book is *still* holding strong in the No. 2 position on a list of more than 6,000 books on prostate cancer. And, the first and second editions have a combined 776 reader reviews, averaging a five-star rating.

Empowering Others Through Shared Experiences

In response to hearing the words, “you have cancer,” many people instinctively turn to the internet, seeking treatment options and survivor stories to ease their fears. Bob wrote his book as the resource he wished he had during his journey. After thorough research and interviews with numerous patients and medical professionals across various treatment

methods, he aimed to help men navigate this challenging process. While he ultimately chose proton therapy, his goal was not to promote a specific treatment, but to empower men to take charge of their health and explore all available options.

If Bob's book eased your fears or provided vital information for your treatment choice, please help others discover it. When many turn to the internet upon diagnosis, Amazon is often returned within the search results. And with more than 2 billion visitors each month, more than 90% of shoppers rely on reviews to guide their purchasing decisions, especially for books that can provide essential support during such a significant life change.

Please take a moment to [write a review](#). *Thank you!*



on the lighter side

Last Month's Brain Teaser

How many ways can you make change for a dollar?

Answer: 292 or 293! And if you'd like to see all of the options, click [here](#).

Winner: Mike Fry of Poway, CA, is the October brain teaser winner! Mike sent in *one of two* correct answers (292). The discrepancy arises from different interpretations or methods of counting combinations of coins.

292 combinations: This figure typically accounts for the distinct combinations of quarters, dimes, nickels, and pennies that sum to exactly 100 cents without considering any specific order of coins or any duplicates in the counting method.

293 combinations: This number may arise from including all permutations or variations of the combinations, including configurations that may seem redundant or not intuitive, but still count as a unique way to make change based on specific rules (for example, starting with a specific coin).

When Mike emailed his answer to Deb, he wrote: *Just as you predicted, this one completely sucked me in, and I have four pages covered with numbers and letters. My wife thinks I'm crazy!*

Congratulations, Mike! Your signed copy of Bob's book is in the mail.

New Brain Teaser

On which day of the year do the fewest people die?

Send your answer to DHickey@protonbob.com for a chance to win a signed copy of Bob Marckini's second edition book, [*You Can Beat Prostate Cancer*](#).

Senior Wisdom

- Does anyone else have a plastic bag full of plastic bags, or is it just me?
 - Today's 3-year-olds can switch on laptops and open their favorite apps. When I was 3, I ate mud.
 - Tip for a successful marriage: Don't ask your wife when dinner will be ready while she's mowing the lawn.
 - So, you drive across town to a gym to walk on a treadmill?
 - If God wanted me to touch my toes, He would've put them on my knees.
 - Last year I joined a support group for procrastinators. We haven't met yet.
 - Lately, you've noticed people your age are so much older than you.
-

Bad Jokes

- My boss told me to "dress for the job you want, not for the job you have."
So, I went into the office as Batman.
- Why can't dinosaurs clap their hands? Because they're extinct.
- Who won the neck decorating contest? It was a tie.
- How much does a chimney cost? Nothing — it's on the house.
- Did you know corduroy pillows are in style? They're making headlines.
- What do you call a criminal landing an airplane? Condescending.



odds & ends

Did You Know...?

There are about 91,000 types of insects in the United States. And, if you think that's a lot, there are about 1.5 million insect species in the world.

The sun and moon are not the same size. While they might look the same size from Earth, the moon is 400 times smaller than the sun.

Almonds are part of the peach family. They're not nuts, by rather something called "drupes."

Deaf people use sign language in their sleep. During one case study, a 71-year-old man with severe hearing impairment was observed using fluent sign language in his sleep.

There's a planet mostly made of diamond. The Super-Earth Planet, 55 Cancri 2, is twice the size of the earth, likely made of diamond and graphite, and is 41 light-years away.

Maine is the only state name with one syllable. How come we never noticed this before?

Quote of the Month:

"Old age is like a plane flying through a storm. Once you're aboard there's nothing you can do about it."

—Golda Meir



final thought

Heartfelt Thanks to Our Community of Support

We couldn't close this end-of-year issue without expressing our deep gratitude to the people and organizations who support our mission. Your generosity and commitment make this work possible—without you, none of it would exist. Thank you for being the heart of all we do.

Thank you to our members for your unwavering devotion to “the cause.” Your willingness to share your knowledge and passion for proton therapy, your constant feedback, and your messages of gratitude mean so much to us. We appreciate the news stories and information you pass along for the benefit of others, the thoughtful questions you ask on behalf of loved ones, and the time you volunteer to support newly diagnosed men and their families. Thank you for buying extra copies of Bob’s book, *You Can Beat Prostate Cancer*, to share with others, for forwarding our newsletter to those who might find it valuable, and for your generous contributions to proton research.

Our **deepest thanks** to the late Dr. James M. Slater, Dr. Jerry Slater, and the Loma Linda University Cancer Center for pioneering proton therapy for prostate cancer and other diseases more than 30 years ago, allowing tens of thousands to not only overcome cancer, but also preserve their quality of life. We are also immensely grateful for your steadfast support of the Brotherhood of the Balloon, your encouragement, and your steadfast faith in our mission.

Our **heartfelt thanks** to the senior management at Loma Linda University Health for your ongoing support of our efforts in countless ways. Your guidance and commitment to our shared mission continue to uplift and inspire us.

Thank you to all the proton centers for recognizing the profound benefits of proton therapy and for your commitment to advancing this technology. Your efforts have made it possible for thousands more patients to access this life-changing treatment.

Thank you, Jennifer Maggiore and the National Association for Proton Therapy, for your dedicated efforts in raising awareness and educating others about proton therapy. Your support of our organization and your role as a valuable resource are truly appreciated.

Thank you, Dr. Nancy Mendenhall, at the University of Florida Health Proton Therapy Institute, for your tireless leadership in advancing the COMPPARE trial, which compares proton therapy to IMRT for prostate cancer. Your dedication to this vital research is inspiring. We extend our gratitude to all the stakeholders, physicians, scientists, statisticians, advisers, and patients whose collaboration and commitment have made this groundbreaking study possible. Your contributions are paving the way for improved treatment options and outcomes for countless individuals.

Thank you, Bob Hawley, for your timely, thorough, and professional reviews of our monthly newsletter. Your insightful feedback and dedication to excellence not only elevate our content, but also ensure we consistently deliver valuable information to our readers. We are truly grateful for your support.

We **greatly appreciate** the outstanding contributions of Nancy Chansavang and the LLUCC Web team in assisting us with the protonbob.com website. Your commitment to ensuring that all our systems operate seamlessly, combined with your prompt and thoughtful responses to our many questions, has had a profound impact on our operations.

We are **grateful** to Larry Becker, Kelsey Culler, and the entire LLUCC marketing, PR, and legal team for their thorough and timely editorial reviews of our monthly newsletter. Your attention to detail and dedication greatly enriches our communication efforts, ensuring that we convey our message effectively and thoughtfully.

We **deeply appreciate** Rachelle Bussell, Randy Possinger, Judy Chatigny, Rathyna Krumme, Erica Gomez, Lauren Oliphant, Araceli Cisneros, Alexandra Blasy and Pauline Deeb for your steadfast support in helping us grow our membership and ensuring our members feel valued.

Finally, though Dr. J. Lynn Martell has been retired from LLUH for many years, we must express our **heartfelt gratitude** to him. From the very beginning, he recognized the extraordinary potential of our group and provided encouragement and support throughout the years. We owe much of our success today to Lynn and his faithful belief in our mission.

With the help of these people, we're making a difference: Our members serve as well-informed ambassadors for proton therapy, introducing hundreds of men each year to this vital treatment option. We actively combat misinformation about proton therapy and advocate against insurers attempting to deny reimbursement for proton treatments. Through the collective efforts of our members, we've raised more than \$15 million, primarily directed toward advancing proton therapy research, and now supporting LLUH's new cancer care and research initiatives. We take immense pride in our group and are profoundly grateful for you and the support of our members and all who champion our mission.

Happy holidays and low PSAs to all,

Bob Marckini and Deb Hickey



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