

BOB Tales

Monthly Newsletter to Members | March 2013



“*Success has nothing to do with what you gain in life or accomplish for yourself. It's what you do for others.*”

—Danny Thomas



Dear Members:

People often shake their heads in disbelief when I tell them that being diagnosed with prostate cancer was one of the best things that ever happened to me. It's true, though I wouldn't have guessed it at the time.

Prostate cancer introduced me to some of the most incredible caregivers on the planet, starting with the folks at Loma Linda. “To Make Man Whole” is their mission, and they do this magnificently. Prostate cancer also gave me the opportunity to become close and personal with an extraordinary technology called proton beam radiation therapy; connect with some very talented people in the proton community; and, most recently, speak at the first annual NAPT conference in Washington DC.

My diagnoses also prompted the start of a “ministry” through a group with the unlikely name, the Brotherhood of the Balloon. Through the “BOB,” my wife and I have made many good friends over the years and every week we communicate with new friends—all brought together by a cancer diagnosis.

I've also had the honor and privilege to serve on the Loma Linda Proton Advisory Council, helping to raise money for proton research. Through the Council, I have seen first-hand, the extraordinary potential of the proton particle and had the opportunity to spend time with other grateful, former proton patients who give generously of their time and resources as a way of saying thank you.

I've often said that people who gravitate to proton therapy tend to be highly intelligent, analytical, and incisive. Many are high achievers who have left their mark on the world by giving something back. An excellent example is this month's featured member. His story reads like a fictional novel: A Jew, born in Iraq during a time of great turmoil, exiled to Israel after all his family's possessions were “appropriated,” building a new life from nothing, seeking higher education, emigrating to the United States, and devoting his life to serving and saving children. His life certainly embodies the message in the opening quotation. It is an honor to have someone of this caliber in our group and, especially, to call him my friend.

As I approach my 70th birthday next month, I find myself reflecting more and more on the past 12 ½ years. And, there is very little I would change . . . certainly not those words I heard at 11:05 a.m. on August 10th 2000, “You have prostate cancer.”

Bob Marckini



Membership: **6,362:** We added 67 new members last month.

Members, you are doing a great job spreading the word about proton therapy. One of the questions on the BOB member registration form has to do with how the individual learned about proton therapy and whether or not they have spoken with one of our members prior to making their treatment decision. More than 85% of new members identify a BOB member as having either introduced them to proton therapy or having helped with their decision. Way to go!

In This Issue:

- A recap of the 1st annual NAPT Conference, Washington, DC / NEW prostate cancer report released
- Top 10 cancer centers moving toward proton—what does that tell you?
- Myth #6: The only sure cure for prostate cancer—remove the prostate
- Featured member’s unbelievable story of struggle, freedom, and change
- BOB reunions planned for Dallas, TX; Oahu, HI; Lake Tahoe, NV; Las Vegas NV; and Redlands, CA
- Heart surgery and prostate surgery: some parallels
- Does proton therapy for prostate cancer increase risk of hip fractures?
- Prostate cancer survivors: A case for taking vitamin D₃ and avoiding walnuts, pecans, flax oil, and DHEA

News Report



1st Annual NAPT Conference Held in Washington, DC

**NPC
2013**

This was an important event. The National Association for Proton Therapy (NAPT), headed-up by a tireless and dedicated executive director, **Len Arzt**, held its first annual national conference February 11-14, 2013 in Washington, DC. One hundred twenty participants were expected to attend, but more than 200 registered for the event.

Attendees included representatives from all proton centers in the U.S., both clinical and administrative, proton researchers, design and construction firms, the medical insurance field, hospitals and medical centers considering proton therapy, as well as consultants, and the news media. The interest in proton technology and the excitement about the future of proton therapy during the conference was palpable.

The agenda for the conference was full, to say the least. There were speakers from all proton centers and panels with lively discussions on topics including the proton therapy marketplace, clinical trials underway, new applications for proton therapy, the future direction of pediatric proton therapy, challenges in planning, developing and operating proton centers, the economics of proton therapy, prostate cancer treatment studies, surveys and success stories, advances in technology and software, cloud-based patient reported outcomes, and building the proton therapy brand.

Bob Marckini participated in one of the panels and spoke about the history, mission, and impact of the Brotherhood of the Balloon. [Bob's 15 minute talk is here on YouTube.](#)

One of the highlights of the conference was the release of the BOB member survey report which was analyzed and presented by a health and economics consulting firm, [Dobson DaVanzo.](#)



Here are some of the reported results:

- 2000 members responded, an astonishingly high response, according to Dobson DaVanzo.
- Respondents spanned the treatment time period of 1991 to 2010, or 20 years, also significant.
- 99% reported they made the best treatment decision
- 96% were satisfied or extremely satisfied with their proton treatment
- 92% reported their quality of life was better than, or same as before treatment.
- 95.1% reported their cancer was in remission.
- Proton-only patients had statistically similar bowel, urinary, and hormonal quality of life as a control group of men who were never treated for prostate cancer.
- Patients who had treatments in addition to proton had lower scores than those who were proton only.
- Lower sexual scores were mostly associated with those patients who received hormonal therapy in addition to proton therapy.
- Respondents who were treated with photon therapy (X-rays) in addition to protons reported lower bowel, sexual, and hormonal scores.



[Click here to watch Joan DaVanzo's nine minute presentation on the BOB survey results.](#)

You can also click on the following links to read the [Executive Summary](#), the [Press Release](#), and the entire 23-page [Final Report](#) on the NAPT website.

Bob said, "The NAPT conference was a huge success, and paraphrasing a line from one of my favorite movies, next year, 'I think we're going to need a bigger room.'"

New Proton Centers

Seattle Cancer Care Alliance (SCCA) Proton Center Treats First Patient

Last week the SCCA Proton Therapy Center in Seattle, Washington treated their first patient. There are now 11 operating proton centers in the U.S.

Georgia Proton Center Breaks Ground

Construction crews have broken ground in Midtown this month to build a new proton treatment center. This facility is a joint venture between Emory University and Advanced Particle Therapy LLC of San Diego, and is scheduled to open in 2015.

Top Ten Cancer Centers Moving Toward Proton


U.S. News & World Report regularly compiles a [list of the top cancer hospitals in the United States](#), ranked by factors such as reputation, level of nurse staffing, and relative death rate. The current list of the ten best cancer hospitals is below:

1. MD Anderson Cancer Center
2. Memorial Sloan-Kettering Cancer Center
3. Johns Hopkins
4. Mayo Clinic
5. Dana-Farber Cancer Institute
6. University of Washington Medical Center
7. Massachusetts General Hospital
8. University of California, San Francisco Medical Center
9. Duke University Medical Center
10. Stanford Hospital and Clinics

Let's look at them one at a time:




 **MD Anderson:** We all know that MD Anderson made the leap. They built their proton center in 2006 and have treated thousands of patients since.

 **Memorial Sloan-Kettering** has announced plans to build a proton center as part of a consortium of five Manhattan hospitals. So #2 is joining the ranks.

 **Johns Hopkins:** Every month we receive e-mails from members who are angry because Johns Hopkins fails to mention proton therapy as a treatment option in their comprehensive bulletin on prostate cancer. Our response, typically is, "They don't mention it because they don't have it." But that's changing. Johns Hopkins Sibley Hospital has announced plans to build a proton treatment center in Washington, DC. When this is completed, you can bet proton therapy will be listed as a prostate cancer treatment option in their literature.

 **Mayo Clinic:** Not to be outdone, they are building two proton centers—one in Minnesota and one in Arizona. Both are under construction and are scheduled to open in 2015-2016.

 **University of Washington Medical Center** has partnered with the **Seattle Cancer Care Alliance** in building a new proton center in Seattle.

-  **Massachusetts General Hospital** has a proton center that's been up and running for 12 years.
-  **University of California, San Francisco** has a low energy proton center and cannot treat prostates, but they do treat many other tumors with protons.
-  **Duke, Stanford, and Dana Farber** have not announced plans to build proton centers ... yet. But who knows what's in the works?

When seven of the top ten cancer centers embrace proton therapy, even with its high construction costs and many critics, it says a lot about the technology.

There are now 11 proton centers operating in the U.S. with nine more under construction and 10 more in the planning stages.

Map of Proton Therapy Centers

In Operation, Under Construction, In Development & Announced



Special: Mythbuster Series



The 10 Myths about Proton Therapy

Myth #6: My doctor tells me that the only way to be sure I'm cured is to have the prostate removed from my body. With proton therapy, the prostate is left behind, so my chance of a recurrence with proton is higher, right?

This is the sixth in a series of articles on *the Ten Most Common Myths about Proton Therapy*.

This is one we hear quite often. Many people are of the mistaken belief that it's true, having the prostate removed guarantees a cure. And it would be true if 1) you were 100% sure the cancer was confined to the prostate and, 2) if the surgeon did not leave behind any part of the prostate.

But the fact is, in a large number of cases, the cancer has escaped the prostate into the tissue surrounding the prostate. This escape of cancer is almost always microscopic and thus cannot be seen by the surgeon, causing cancer to be left behind. Also, it is not uncommon for part of the prostate to be left behind following surgery, especially with the nerve sparing technique. If this tissue contains cancer cells, then again, you still have cancer.

Even with early stage, "garden variety" prostate cancer, there is good chance there are microscopic cancer cells in the tissue surrounding the prostate. These cancer cells left behind after surgery are the seeds for the re-growth of the cancer.

Two Examples

Let's say your PSA is 5.2, your Gleason score is 3+3=6, and your stage is T1c. The Partin tables show that there's a 67% chance your cancer is organ confined. This means there's a 33% chance there is cancer in the tissue surrounding your prostate. The tables also show there is a 3% chance of seminal vesicle involvement. Surgery doesn't remove the tissue surrounding the prostate and usually not the seminal vesicles.

Now, let's assume your PSA is the same, 5.2, but your Gleason score is 7 and your staging is T2b. In this case, the Partin tables show a 25% chance of organ confined disease (75% chance of cancer in the tissue surrounding the prostate), and an 18% chance of cancer in the seminal vesicles.

One significant advantage of proton therapy is that the tissue surrounding your prostate is treated as well as the seminal vesicles. So, in our opinion, the chance of destroying all the cancer is greater with proton therapy than with surgery.

One Last Point

When Bob was in treatment almost 13 years ago, about 5% of the patients being treated at Loma Linda were men who had previously had their prostates removed surgically. About 350 members of our group (5.4%) had surgery to remove their prostates. They were not cured because cancer was left behind after surgery, and they chose proton for salvage treatment. So, clearly, having the prostate removed surgically does not guarantee a cure.

We believe your chances of a cure are better with proton therapy because it is designed to eradicate cancer cells where they are found: In the prostate, seminal vesicles, and tissue surrounding the prostate.

Add to that the fact that proton therapy is painless, non-invasive, carries no risk from infection or anesthesia, does not require a catheter, and generally leaves the patient with a better quality of life after treatment ... and the treatment decision becomes quite easy.

Myth #6 ...



PSA 24, Gleason 8, 10-Year Prostate Cancer Survivor Speaks Out on Myth #4

Bob received the following e-mail message from **Pastor Fred Agnir** (Wesley Chapel, Florida) following our January *BOB Tales* newsletter:

Thank you ever so much for this issue of BOB Tales. I loved its focus on the busting of [Myth #4](#) (Proton therapy is not recommended for patients with a high Gleason score), because I am a living example for being PSA 24 and Gleason 8 at diagnosis. I just celebrated 10 years post-treatment at Loma Linda and am doing great. I expressed my excitement at reaching this milestone in our Christmas letter. Here is the first paragraph:

As we write our usual year-end family chronicle, we start with a prayer of thanksgiving to God for all the blessings that we have received throughout life. We can't help but recall that ten years ago at this time, we were in far-away Southern California where we spent several weeks while Fred underwent treatment for advanced prostate cancer at Loma Linda University Proton Treatment Center. We remember the mixture of happiness and fear that we felt then—happiness that we found the perfect place for and type of treatment for Fred, and fear in not knowing what the future would hold. Today, all fear is gone as Fred's illness is under control. As he approaches his 74th birthday early next month, he loves to joke that he has stopped worrying about not living long enough and is now worried about living too long!!

Since I'm on your "High Gleason Score Reference Call List" I receive calls about once a month from newly diagnosed men with aggressive cancers. I enjoy my role as proton evangelist, talking with them, consoling them, and giving them hope ... just as you did for me ten years ago.

Making a Difference by Giving Back



Why Not Join the Heritage Society?

Bob was talking with one of our members this month and this fellow was raving about his quality of life many years after treatment. He also mentioned that his business was doing very well, and things in his life were all moving in the right direction.

Bob asked him if he remembered Loma Linda and proton research in his annual giving, and he said he did. Bob then asked if he had considered including LLUMC in his estate plan. He hadn't, and Bob shared that people who include Loma Linda in their estate plans are automatically qualified to join the Heritage Society. The Heritage Society exists to thank individuals who have included Loma Linda in their estate plans and to also inspire others who are planning for the future to remember Loma Linda.

Bob and Pauline have remembered Loma Linda proton research in their estate plan. They notified Loma Linda of this and as a result, were enrolled in the Heritage Society.

There is no requirement to specify the amount designated to proton research in your estate plan. Any deferred estate gift qualifies you to become a member of the Heritage Society. This is a terrific way of giving back.

If you'd like to learn more about estate plan giving and the Heritage Society, contact **Todd Mekelburg** via e-mail: tmekelburg@llu.edu or phone: 909-558-4553.

Spotlight on Members



Featured Member: [A Story About Struggle, Freedom, and Change](#)

Dr. Yitzhak Bakal was born in Baghdad, Iraq in 1934. He lived in a Jewish ghetto and went to a Jewish school where he learned French, Arabic, and some biblical Hebrew. “Growing up in Baghdad was fraught with danger,” he recalls. There was constant discrimination and physical threats by Muslim bullies who enjoyed torturing younger people who were of different religions and ethnicities. As minorities, Jews were also regularly attacked and scapegoated by a government that was supposed to be protecting them.

Fears were intensified when the few legal rights of Jews were dismissed in 1940 due to a revolt by a group of Nazi sympathizers who toppled the Iraqi government. As the Nazi followers came into power, their anti-Jewish propaganda influenced the Iraqi government, eliciting new attacks on Jews that led to loss of lives and property. But as traumatic as those times were for Yitzhak and his family, they didn't reach the boiling point until 1948 when Israel became a state and Jews were openly unwanted in Iraq. In 1950, Iraqi Jews were told they could leave the country on the condition they give up their citizenship and all possessions.

[A Move Toward Freedom](#)

Although Baghdad had been the Bakal family's home for generations, they fled to Israel, penniless and unsure about how they would survive. Though times were difficult, the family held together with a strong determination to become part of, and contribute to, their new country.

At that time, Israel was struggling to absorb survivors of the Holocaust and it lacked the resources to accommodate refugees pouring in from Arab countries. As a result, Yitzhak, his parents, and siblings lived in tents in harsh and difficult conditions where refugees were assigned. Living as free people in a welcoming country, however, compensated for the challenges they experienced, and it gave them hope and the will they needed to survive.

[Yitzhak's True Calling](#)

For as long as he can remember, Yitzhak had been interested in helping children. At the age of 16, while working to establish his life in a new land, he began volunteer work with struggling teenagers. This led to a job as counselor working with at-risk children in a group home. From his own personal experience, he understood the cost of having no voice, as well as the power and healing that came from participating in the governance of your own community.

The Army

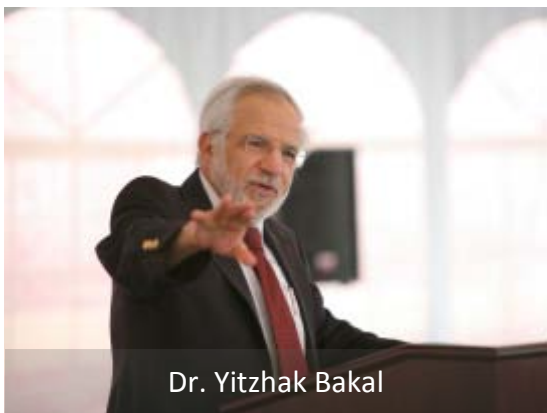
Yitzhak served active duty in the infantry from 1954-1957. “We intercepted infiltrators coming from Egypt or Jordan who were attacking non-military targets such as busses with school children,” Yitzhak said. His job was to prevent these attacks and destroy the enemy before they could inflict more casualties on innocent people.

While in the army, he was put in charge of 20 recalcitrant soldiers, Yitzhak engaged them to help shape how they would accomplish their tasks rather than ordering them to act in fear of punishment. It worked! This experience had a great impact on his thinking and his ultimate career path.

Making a Difference in the Lives of Children

When he was discharged from the army, Yitzhak enrolled at Hebrew University in Jerusalem. Concurrently, he counseled troubled kids, continuing to hone his understanding of how to reach and positively motivate young people. In 1964, Yitzhak traveled to the U.S. to do graduate work in psychology and social sciences, finishing his doctoral program at Columbia University and the University of Massachusetts.

Yitzhak met his wife, Elaine, during the summer of 1966 while he was directing counseling at an Upward Bound program. They married, had two sons, and were later blessed with three grandchildren.



Dr. Yitzhak Bakal

Initiating a New Era of Treatment for Youths

When in the late 1960's the Commonwealth of Massachusetts was cited for gross neglect of its adjudicated youth living in decrepit training schools, Yitzhak joined a group of reformers to improve the system as Assistant Commissioner in charge of institutions for delinquent youth in the Department of Youth Services. As his team began their work, they quickly realized that the destructive institutions were unfixable. They decided to close them and create a more effective way to handle young people in state care.

The act of closing the reform schools created a great deal of controversy in Massachusetts and across the country, setting the stage for nationwide reform that ushered in a new era of community-based treatment for youths. Yitzhak wrote about the process of reform and is the author of many texts, including the classic, [*Closing Correctional Institutions*](#), and frequently lectures, trains, and consults throughout the world.

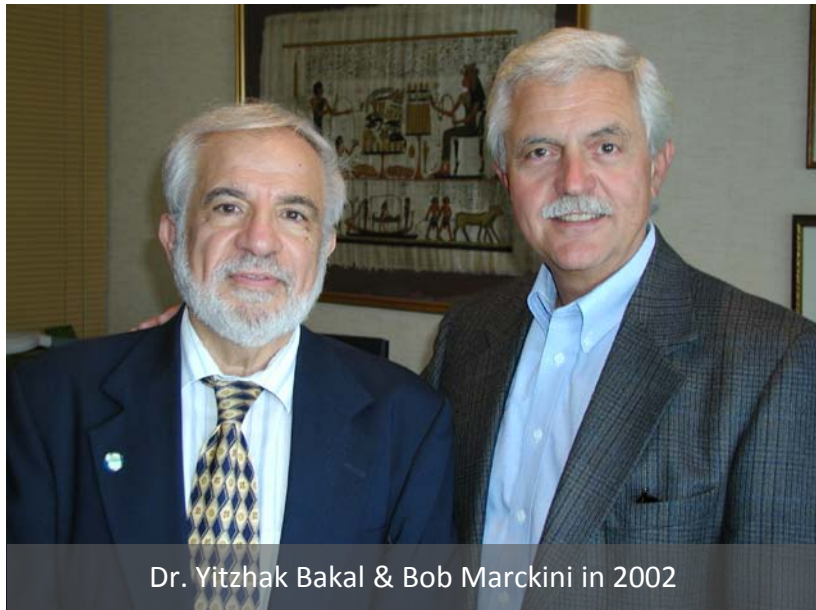
NAFI

In 1974, Dr. Bakal founded [*North American Family Institute \(NAFI\)*](#) to pioneer community-based care to troubled young people. As its chief executive officer, he wanted the organization to embrace the same realization that has guided his own growth—that adversity offers the impetus to be transformative, that it can turn very difficult situations into rich opportunities to improve one's own life as well as the lives of others. Today NAFI operates over 90 schools and programs in nine states. Each year thousands of troubled young people enter their care. NAFI has developed continuums of care that keep those youngsters from turning negative and destructive; helping to transform their adversity into good for themselves and their communities.

“The Most Challenging Year” of Yitzhak’s Life

Considering all that Yitzhak has been through, you wouldn’t think being diagnosed with prostate cancer would be a big deal. But he describes it as the most challenging year of his life, at least until he discovered proton therapy.

It was February of 2001, when Yitzhak learned he had prostate cancer. “It was a period of high anxiety,” he recalls, as he sought the best course of treatment. His urologist recommended surgery, but Yitzhak continued his research. That’s when he met **Bob Marckini**. Bob describes Dr. Bakal as, “One of the smartest, most compassionate, and most interesting people I’ve ever met.”



Dr. Yitzhak Bakal & Bob Marckini in 2002

Yitzhak completed his proton therapy at Loma Linda in June 2001. He considers his treatment choice one of the best decisions of his life. He was especially enamored with the “Make Man Whole” mission at Loma Linda and the mission of the Brotherhood of the Balloon, which he felt resonated so well with the “normative community” approach he used in his ministry. While a patient, Yitzhak enjoyed working with LLUMC staff sharing his perspective and insights on ways to build a positive healing community. He said of his proton treatment, “It was much easier than I expected and the result was excellent.”

Life After Proton Treatment

Now, more than eleven years after his proton treatment, Yitzhak leads an active life, walking three to four miles a day, and he’s as excited and energetic as ever about the work he continues to do at NAFI helping young people and their families. “I’m so glad I didn’t take my urologist’s advice,” he says.

Member Feedback

Seth Rucker (Prescott, AZ) sent us an update on his life five years post-treatment:

My last PSA was in August. The number is 0.2. This has been constant for 2 years. I am very active in hunting and fishing around the world with no side effects from the treatment.

Eugene (Gene) Armstrong (Vaughn, WA) sent us an update on his post-treatment PSA:

I just had my 6 year prostate cancer check. DRE was good and PSA is now 0.14. It’s never been that low, ever. Thank you, Loma Linda!!!

Charley Mapa (Fort Mohave, AZ) sent us a message via the [Proton BOB Facebook page](#):

I experienced a great “coincidence” yesterday. Gwenda and I went to the Hilo, Hawaii Post Office to mail some things. Ahead of us in line, an elderly woman was looking for instructions on how to mail a large flat rate priority box. As the line was long, the clerk simply referred her to the packaging materials in the lobby. As I saw the confused look on the woman’s face, my old Postmaster genes kicked in. I asked Gwenda to mail our items and went to offer the woman my help. She thanked me profusely and then muttered something about her son who was at LLUMC in California. I asked if he worked there. She said no—he was there for cancer treatment. “Really?” I asked. I then told her that I was at LLUMC a year ago for prostate cancer treatment. She told me that her son was also being treated for prostate cancer and that she was very worried about him. I was able to assure her that he was getting the best treatment and could not be in a better place. I then helped her with her package and told her that I would pray for her son and that he would be fine. She thanked and blessed me, and then went about her business.

Consider the odds. Only a few hundred men from all over the world enter that treatment center for proton treatment each year, and here I was in this out-of-the-way place in Hawaii meeting the mother of one of those men. I walked up to her to offer her help in mailing a package and then God gave me the grace to be able to offer her comfort. I’ll take that “coincidence” any day!



Take the Show on the Road

Many of our members routinely use the BOB PowerPoint presentation to spread the word and educate others about prostate cancer awareness, detection and prevention, and promote proton therapy with family and friends, in their neighborhoods and communities, and in the media.

Below are a few excerpts from messages we’ve received from members about their use of the BOB PowerPoint presentation:

“I have been using the BOB PowerPoint presentation to deliver presentations to Kiwanis clubs, Health and fitness centers, and staff meetings here at work. It is amazing to me how the range of knowledge and questions about a man’s prostate and checking for prostate cancer varies so much from person to person.”

“I made additions of my own numbers and experiences to the presentation and it was very useful. In fact, in just the last month, two of my friends had significant increases in their PSA and they called me for my opinion. The first thing I did was send them the PowerPoint.”

“I presented the PowerPoint to a group at work. Of the 29 that attended 4 were females who were there for a spouse’s benefit or a male relative. I even received a few e-mails after my presentation saying that the information had convinced them to stop procrastinating and to schedule their physical for a DRE and PSA. Thank you for making available this resource that allows PCa survivors like myself to help others.”

The BOB PowerPoint presentation is available to all members. If you want a copy, just write to DHickey@protonbob.com and we’ll e-mail it to you.

Seeking Hypo-fractionation Clinical Trial Patients

We are looking for more BOB members to be included on our hypo-fractionation reference list. If you underwent the proton therapy hypo-fractionation clinical trial and are willing to e-mail or speak with potential proton patients who are interested in this shorter treatment protocol, please send an e-mail to DHickey@protonbob.com.

Did You Use a Lawyer?

Did you win a proton insurance appeal with the help of an attorney? If so, please send his/her name, address, and phone number to DHickey@protonbob.com so that he/she may be able to help prospective proton patients who are currently fighting insurance denials. Thank you.

Events



Loma Linda Comes to You/BOB Reunion, Dallas, TX

March 17, 2013: A *Loma Linda Comes to You* meeting and BOB reunion will be held in Dallas, TX from 2 – 4 p.m. at the Cooper Clinic, 12200 Preston Road. **Dr. Lynn Martell** and **Dr. Richard Hart** will be representing Loma Linda University Health. Additional information will be e-mailed and mailed to members in the Dallas/Ft. Worth area.

RSVP: Contact Jo Anna Codington at 909-558-8660 or jcodington@llu.edu.

Loma Linda Comes to You/BOB Reunion, Oahu, HI

April 5–8, 2013: A *Loma Linda Comes to You* meeting and BOB reunion will be held in Waikiki, Oahu, HI. Activities include:

- Golf
- Snorkeling
- Swimming
- Hiking
- Surfing
- Horseback riding
- Outrigger rides
- Bus tours
- Reunion dinners/meetings
- A visit to the Polynesian Cultural Center

RSVP by March 22, 2013: Contact Pam Figueroa at pfigueroa@llu.edu or Spyder Wright at trinitytime@aol.com for more information.

More Loma Linda Comes to You/BOB Reunions

April 21, 2013: Los Angeles South Bay/North Orange County area, CA; **April 28, 2013:** Las Vegas, NV; **April 30 – May 2, 2013:** Redlands, CA; **June 13, 2013:** Portland, OR. More information will follow.

6th Annual Proton Golfers Alumni



July 29–August 1, 2013: The 6th Annual P.G.A. golf tournament and festivities at Genoa Lakes Golf Club and Resort in the Lake Tahoe/Carson Valley Area will take place this summer. Stay Sunday through Thursday nights at the Carson Valley Inn. The event is open to all alumnus and guests; golfing is not required.

For more information including fees, resort contact information and important details; [click here to view the event flyer](#). RSVP by May 1, 2013: **Stephen Weitzman**: Home: 775-267-4600, Cell: 909-437-5899, s.weitzman@live.com.

Health & Nutrition



Importance of Vitamin D₃

Vitamin D₃ is produced in the skin by vertebrates in reaction to ultraviolet B light from the sun. Studies have shown that this nutrient can boost the immune functions. The immune system is responsible for fighting and preventing various kinds of diseases in the body including prostate cancer. This vitamin is also known for its anti-inflammatory properties. It can help you to treat and prevent skin disease like acne and psoriasis. For those living in cold climates in the winter months it is especially important to take vitamin D₃ regularly. Talk with your doctor to determine if taking vitamin D₃ supplements is right for you.

Can Men Get Osteoporosis? Another Case for Vitamin D

According to RealAge.com, osteoporosis isn't just a woman's problem. Many men experience bone loss and brittle bone problems. An estimated 12 million men in the U.S. are at risk of osteoporosis. Calcium and vitamin D help protect you. So do weight-bearing exercises like lifting weights and hiking. Also, eating zinc rich foods can help men with brittle bones. A lack of zinc in the body can result in lethargy, slow wound healing, brittle bones, and hair loss. Zinc rich foods include crabmeat, baked beans, chicken, turkey, and cashews.

Should PCa Survivors Avoid Walnuts, Pecans and Flax Oil?

According to prostate cancer expert, **Dr. Charles "Snuffy" Myers** latest [Prostate Forum newsletter](#), you should avoid them. Myers contends that while walnuts, pecans, and flax oil contain omega 3 fat, which is important to general health, the omega 3 they contain is ALA (alpha linolenic acid) fat. And ALA has been linked to the development and progression of prostate cancer. He does feel that omega 3 intake is important, but that this particular fat should come from fish.

Bottom line: "ALA is an inferior omega 3 fatty acid for human nutrition and may enhance the risk of prostate cancer," according to Dr. Myers.

Do Not Take DHEA

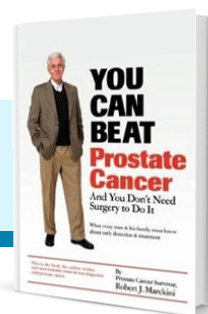
Reporting from the annual ASCO (American Society of Clinical Oncology) meeting in Wyoming, **Dr. Charles Myers** posted a [video warning that taking DHEA could very likely fuel the growth of prostate cancer](#).

There are lots of false marketing claims on the Internet reporting that DHEA can “restore your youth,” or “raise testosterone levels and sex drive.”

According to Dr. Myers, information presented at this year’s ASCO conference shows that DHEA converts to dihydrotestosterone which has been known to fuel the growth of cancer.

So, beware of DHEA marketing claims and avoid this supplement, as it may contribute to prostate cancer growth.

The Book



A reader and prospective proton patient wrote the following e-mail message to Bob:

I just read your book and I have gone from feeling lost to having hope. Exactly as described in your book, my urologist only recommended surgery which would be my last choice. I have BPH and my prostate is 88.9 grams and for that reason, my urologist says that radiation would be unwise. The nurse at Loma Linda told me that despite my large prostate, I am a good candidate.

Below is a quote that one of our Calling Campaign volunteer callers recorded in his Call Report after speaking with a recent proton therapy “graduate.”

Bob Marckini’s book saved my life.

BOB member, **Andrew Sokol** (Culver City, CA), sent us the following message:

My Internet research led me to believe that proton was a good (maybe the best) treatment for me, and Bob’s book reaffirmed that belief and provided much more information that helped me finalize and feel good and confident about the decision to go with proton treatment. ... For those that don’t have time, or aren’t inclined to meet with and talk to dozens of doctors and former patients, Bob’s book is a great resource.

Here are excerpts from the latest reviews posted on Amazon:

★★★★★ A must read, February 28, 2013, by **John Swanson**

I would advise all men struggling with the disease of prostate cancer to study everything they can get their hands on before selecting a treatment. If you can’t study everything, there is one book available through Amazon.com that is a must read: Bob Marckini’s book “You Can Beat Prostate Cancer.” Bob is a 10-plus year survivor of prostate cancer and his book proves him to be an articulate and intelligent supporter of proton radiation therapy ... I read Bob’s book after I finished my proton treatment at Loma Linda University Medical Center. I couldn’t have said it better than Bob has in his book. As I said, it’s a must read if you’re dealing with treatment options. You’ll be glad you did.



THIS BOOK COULD SAVE YOUR LIFE AND YOUR MARRIAGE, February 25, 2013, by Hilton CW111

“You Can Beat Prostate Cancer and You Don’t Need Surgery To Do It” is a compelling and a “must read” for men facing prostate cancer. And, while you are at it, buy two copies because your wife will steal your copy. Seriously! Bob has done the legwork of wondering when, where and how to get the answers to the questions and options available ... He has done your “due diligence” for you ... Bob’s book lets you and your wife sleep in perfect peace at night, confident that you have made the right [treatment] choice.



You Can Beat Prostate Cancer, January 25, 2013, by ed

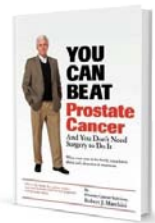
This book provides a practical approach for dealing with [prostate cancer]. After reading it, I feel I am well prepared to deal with the issues if I have prostate cancer. It was easy to understand and clearly explained the hard choices one has to make in this confusing world. Thank you, Mr. Marckini, for taking the time to share you own experience so others could benefit!

Was Bob’s book helpful to you?

Please help us to spread the word and educate others about proton therapy. If you found Bob’s book to be helpful in making your proton treatment decision, please post a review on Amazon.

Once you are logged into your Amazon account, [click here](#) and click the “Create your own review” button. NOTE: Reviews can be just a few sentences—it only takes a few minutes. And, don’t forget to rate the book from 1 to 5 stars! Don’t have an Amazon account? No problem. [Sign up here—it’s free.](#)

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Buy the book from the [iTunes store](#) for \$9.99 for your iPhone, iPad, or iPod Touch in iBook format.

The hard copy version of *You Can Beat Prostate Cancer* is available online at [Amazon](#), [Barnes & Noble](#) and [LuLu Press](#).

Proceeds from book sales are used to help fund BOB efforts and to support proton therapy research.

Ask about our bulk discount for hard copy books for anyone interested in spreading the word about proton therapy: DHickey@protonbob.com.



Heart Surgery—Prostate Surgery: Some Parallels

Julian Whitaker, M.D. has long been an advocate of alternatives to conventional medical treatments. His Whitaker Wellness Institute is in Newport Beach, CA. In a recent [*Health & Healing Newsletter*](#) he wrote an article, “Heart Surgery: Look Before You Leap.” In the article he noted:



Neil Armstrong

Neil Armstrong stepped onto the moon and made history on July 20, 1969. On August 25, 2012 he died of complications from heart surgery.

Dr. Whitaker’s position is that too many people are jumping into surgeries of all kinds, including heart surgery, when alternative, non-invasive treatment procedures are available. Sound familiar?

As with all surgeries, risk increases with age. In the case of heart bypass surgery, studies show the death rate within 30 days of the procedure in octogenarians is nine percent. This means that one in 11 is killed by an operation that’s supposed to save lives.

Dr. Charles Myers, noted prostate cancer specialist, has stated that in the case of prostate cancer surgery, more men with early stage disease die from the surgery than die from prostate cancer.

And what about the other surgical side-effects, such as excessive bleeding, kidney failure, heart attacks, strokes, memory loss, and other cognitive problems. “These are exceptionally common,” according to Dr. Whitaker.

Dr. Whitaker’s advice is to always get a second opinion if your doctor recommends heart surgery (we would add, ANY surgery).

In Neil Armstrong’s case, Dr. Whitaker says, “This is more than the loss of an American hero. It’s yet another example of a disgusting debacle that plays out hundreds of thousands of times a year. Neil Armstrong died from a surgery that, in the vast majority of cases, is medically unnecessary, far more likely to do harm than good—and should never have even been considered for a man of his age. In my opinion, it’s medical malpractice at its worst.”



Dick Clark

Last year we lost another American Icon, **Dick Clark**. He too died of complications from surgery. In his case it was prostate surgery.

Dr. Whitaker may be a bit strong with his words, but he is right. Too many people are accepting their first doctor’s recommendation and opting for surgery when, in many—if not most cases—it’s not only unnecessary, it may even be criminal.

Scary Lesson

A friend of one of our members was making inquiries about proton treatment for his suspected prostate cancer. He hadn't been diagnosed yet, but his PSA bumped up sharply and his doctor suspected prostate cancer.

Before scheduling his biopsy, he spoke with another doctor who asked him a few questions. One was, "When did you have your last digital rectal exam (DRE)?" His answer: "Just before they drew blood for my PSA test."

"Repeat the PSA test" the doctor said. He did, and his PSA dropped from 6.8 to 1.8. False alarm.

To our members this should sound unbelievable. Most of us know that you never have blood drawn for a PSA test right after a DRE, because stimulating the prostate in any way can, and usually does cause PSA to rise, giving you a false reading. All doctors (urologists and primary care physicians) should know this. But some don't. We've heard of many false alarms like this, and some stories are far worse.

Once again, the message in Bob's book is—especially in the case of prostate cancer—the patient needs to take control of his own diagnosis by educating himself, asking the right questions, choosing the best doctors, and getting second and third opinions.

Does Proton Therapy Increase the Risk of Hip Fractures?

It is widely known that proton therapy for prostate cancer reduces the dose of radiation to the rectum and bladder. But, because the beam is directed through the hips, some radiation is deposited on the femoral necks. Could this result in a higher incidence of hip fractures in men treated with protons?

From 2006 to 2008, 382 men who were treated for prostate cancer with protons at the University of Florida Proton Therapy Institute (UFPTI) were closely followed and evaluated after treatment using the WHO Fracture Risk Assessment Tool (FRAX). The median follow up was four years. And during that time there was no statistical difference in hip fractures when compared to expected rates of untreated men.

What about the probability of hip fractures five, ten, or twenty years after proton treatment? We are not aware of any scientific studies that have looked at this, but we do have considerable empirical evidence. Our group represents more than half the men who have had proton therapy for prostate cancer. We receive considerable feedback from members and we are not aware of anything out of the ordinary with regard to hip problems. In future surveys, however, we will ask specific questions on hip related issues.

Educate the Guy Behind You in Traffic



You never know who is looking at your bumper—you could save a life. Spread the word about proton therapy with a BOB bumper sticker. Just send \$6.00 to **Bob Hawley**: P.O. Box 45, Mt. Angel, OR 97362 and he'll mail you one. Or, e-mail Bob at a502sfga@yahoo.com.

All proceeds go to the **Dr. James Slater** Chair for proton therapy research.

On the Lighter Side



Last Month's Brain Teaser

Rhonda will go see the ballet, but not the opera. Her favorite number is eight and she doesn't like nine. She likes salmon, but not trout. She hates Mondays and likes Wednesdays.

Question: Does she use a comb or a brush?

Answer: A comb. Rhonda likes words with silent letters, like her name.

Winner: BOB member, **Duane Hill** of Beaumont, Texas was the first to submit the correct answer and explanation to last month's brain teaser. Congratulations, Duane! We hope you enjoy your signed copy of Bob's book.



New Brain Teaser

One hundred politicians are attending a political convention. You know that the politicians are either corrupt or honest—nothing in between. There is at least one honest politician in the group. If you randomly choose two politicians at least one of them will be corrupt.

Question: How many politicians are corrupt and how many are honest?

Answer next month: The first to send an e-mail to DHickey@protonbob.com with the correct answer will receive a signed copy of Bob's book. Don't cheat by using the Internet!

Warm Milk

In a convent in Ireland, the 98-year-old Mother Superior lay dying. The nuns gathered around her bed trying to make her last journey comfortable. They tried giving her warm milk to drink but she refused it.

One of the nuns took the glass back to the kitchen. Then, remembering a bottle of Irish whiskey that had been received as a gift the previous Christmas, she opened it and poured a generous amount into the warm milk.

Back at Mother Superior's bed, they held the glass to her lips. The frail nun drank a little, then a little more and before they knew it, she had finished the whole glass down to the last drop.

As her eyes brightened, the nuns thought it would be a good opportunity to have one last talk with their spiritual leader. "Mother," the nuns asked earnestly, "Please give us some of your wisdom before you leave us."

She raised herself up in bed on one elbow, looked at them and said, "Don't sell that cow."



Final Thought

How the World Has Changed

Here’s how it was in the U.S. 100 years ago:

- The average life expectancy for men was 47 years.
- Death during childbirth was common for women.
- Fuel for the popular Ford Model-T was sold only in drug stores.
- There was no TV or radio.
- There were no antibiotics, so every cut or wound was potentially serious. Cuts were treated with mecuricome or iodine.
- Only 14% of homes had a bathtub and 8% of homes had a telephone.
- There were only 8,000 cars in the nation, and 144 miles of paved roads.
- The maximum speed limit in most cities was 10 MPH.
- The tallest structure in the world was the Eiffel Tower!
- The average U.S. worker made between \$200 and \$400 per year.
- The average U.S. wage was 22 cents per hour.
- More than 95% of all births took place at HOME.
- Ninety percent of all doctors had no college education.
- Sugar cost 4 cents a pound. Eggs were 14 cents a dozen.
- Most women washed their hair once a month and used Borax or egg yolks for shampoo.
- The five leading causes of death were—pneumonia and influenza, tuberculosis (consumption), diarrhea, heart disease, and stroke.
- The American flag had 45 stars.
- The population of Las Vegas was 30.
- Two of every 10 adults couldn't read or write and only 6% of Americans graduated from high school.
- For the year, there were about 230 reported murders in the entire U.S.

Can you imagine how it will be 100 years from now?

Low PSAs to all,

Bob Marckini and Deb Hickey

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