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Us TOO[®]
PROSTATE CANCER
EDUCATION & SUPPORT

HOTSHEET

October 2006

US TOO'S SNEAKERS@WORK DAY WILL BRING HIGH VISIBILITY TO PROSTATE CANCER – IT'S ABOUT TIME!

JUNE 15, 2007



THE DAY FOR NATIONAL PROSTATE CANCER AWARENESS & ACTION

Sneakers@Work Day on June 15, 2007 aims to make millions of Americans aware that Prostate Cancer kills nearly as many men as breast cancer kills women. You know that the statistics are scary and now many more will know too.

AWARENESS is key. **EARLY DETECTION** is best. **ACTION** is critical.

Sneakers@Work Day is a sweeping cross-country workplace-based fundraising event just prior to Father's Day, which will bring major attention to this devastating silent killer among men. Any company who participates will be wearing a badge of good will and support for men, across the country and the world. This groundbreaking launch of a new campaign is certain to become as large as the Breast Cancer Awareness one, Lee Denim Day.

Sneakers@Work Day is easy:

- Companies pledge support
- Employees are encouraged to wear sneakers to work
- Each employee donates \$5.00
- Every participant receives a pair of

blue sneaker laces (blue represents prostate cancer as pink represents breast cancer)

We expect that within a very short time, thousands of companies and their hundreds of thousands of employees will know that Prostate Cancer is the #2 cancer fatality for men, that 30,000 men will die of the disease this year. That without public awareness Prostate Cancer will remain life threatening when it does not have to be. Our goal is to enroll at least 2,500 companies in the next few months. Make this your goal!

Action is Key! Commitment is critical. Sneakers@Work Day **can only succeed with your help and involvement**. Enroll your company, your wife's, son's, daughter's company, friend's company. Get local service clubs—Lions, Rotary, Elks, Kiwanis, Chamber of Commerce and others--to help. **SPREAD THE WORD**. Without companies making an active commitment to participate, awareness cannot grow, and we cannot accomplish for men what has been accomplished for women and Breast Cancer.

Encourage everyone you know to join Sneakers@Work Day. Join the fight. Make a difference. For more information, visit <www.ustoo.org> and click on the Sneakers@Work logo, or call Dan Reed at 630-795-1002 or <dan@ustoo.org>.

US TOO INTERNATIONAL PARTICIPATES IN COMBINED FEDERAL CAMPAIGN

For the first time ever, Us TOO International is now eligible to receive Combined Federal Campaign funds as a new member of the Health Service Charities of America (HSCA).

HSCA represents human service charities in workplace fundraising drives, and has participated in the Combined Federal Campaign, individual state and municipal campaigns, and private sector corporate campaigns.

All federal employees, including military personnel, will be participating in the 6-week Combined Federal fundraising Campaign from September 15 to December 15, 2006, and are able to complete pledge cards to make donations to their charities of choice.

Please share the Us TOO CFC number within your chapter and network of friends: CFC# 2865.

Thank you!

US TOO INTERNATIONAL

has received Charity Navigator's highest rating for sound fiscal management. Less than a quarter of the charities in America receive this exceptional rating.



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LOWER PSA THRESHOLD FOR BLACK MEN

African-American men with early, non-palpable prostate cancer have greater tumor volume than white men with similar prostate specific antigen (PSA) levels, a study shows. This suggests that the threshold for PSA should be lowered in black men. The widely used PSA blood test is used to look for early signs of prostate cancer. The traditional PSA cut off value is 4 ng/mL.

Based on the current findings, this value should be lowered to 2.5 ng/mL in African-American men "to increase the likelihood of finding cancers that are highly curable," Dr. Curtis A. Pettaway from The University of Texas M. D. Anderson Cancer Center, Houston, Texas told Reuters Health. The lower cut off value is especially important in African-American men less than 65 years of age and otherwise healthy, Pettaway said.

He and colleagues investigated whether there are pathologic differences by race in men with nonpalpable prostate cancer detected by elevated serum PSA levels alone. They found that African-American men had higher Gleason scores -- a measure of tumor aggressiveness -- than white men did, despite having similar PSA levels and preoperative prostate biopsy scores.

The Gleason score was upgraded after prostatectomy for 49 percent of the African-American men, compared to only 26 percent of white men. On average, specimens from African-American men had higher total tumor volumes and higher tumor volumes within given PSA strata than did specimens from white men. Their results were published in the July 1, 2006 issue of the journal *Cancer*.

The detection of higher tumor volumes in African-American men despite adjusting for serum PSA level suggests that, even in men with early disease, "the opportunity for cure after surgery may be lower among African-American patients if the same serum PSA threshold for biopsy is used for all races," the investigators explain.

"African-American men should be educated about prostate cancer and should consider getting tested beginning at age 40," Pettaway advised.

Reuters Health, 9 August 2006

US TOO ACHIEVES NATIONAL HEALTH COUNCIL STANDARDS OF EXCELLENCE COMPLIANCE

Us TOO International, a member voluntary health agency (VHA) within the National Health Council, recently achieved compliance with the Council's Standards of Excellence. Us TOO was recognized at the September Voluntary Health Agency Committee meeting for their efforts to adhere to the highest standards of transparency, accountability and ethical behavior.

VHAs that meet the standards are entitled to use a special logo (below) acknowledging that fact on their printed materials and web sites. The online version links to a special section of the Council's web site that lets visitors know that these VHAs have demonstrated superior results in achieving their missions and upholding the public trust. Through their adherence to these standards, the Council's VHA members derive enormous credibility with constituents, donors and the general public.

The Council's Standards of Excellence cover the areas of governance, personnel policies, programs, fundraising, finance, accounting/reporting and evaluation. They are aligned with the standards of the Better Business Bureau/Wise Giving Alliance, a watchdog agency that donors rely on for information about worthy charities.



Standards of Excellence

US TOO AT RUDY GIULIANI, CYTOGEN NASDAQ OPENING BELL CEREMONY



L to R: Us TOO New York representative Rob Dublin, Michael Becker, CEO of Cytogen, Rudy Giuliani, and Us TOO New York representative Jack David Marcus.

On September 1, 2006, the Us TOO New York support group chapter of Us TOO International helped to kick off *Prostate Cancer Awareness Month* at a very exciting event sponsored by Cytogen Corporation and featuring a presentation by former New York City Mayor and prostate cancer survivor Rudy Giuliani.

The event held at The NASDAQ Stock Market heralded the opening of the trading day and includes guests from many other leading patient organizations including the American Cancer Society, the American Urological Association and the Prostate Cancer Foundation.

The event also launched Cytogen's annual "Screen, Stage and Support" campaign designed to help patients, families and caregivers to learn about the role of proper diagnosis, treatment and support for men affected by prostate cancer.

This year Us TOO New York representatives Jack David Marcus and Rob Dublin stood on the NASDAQ stage alongside Michael Becker, CEO of Cytogen, and Mr. Giuliani. Mr. Marcus and Mr. Dublin also had a chance to share their perspectives as prostate

cancer survivors with Mr. Giuliani in a special meeting prior to the event.

In his presentation, Mr. Giuliani noted that 235,000 cases of prostate cancer will be diagnosed this year and that one in every 34 men will die from the disease. He spoke eloquently about the fact that disease awareness and a regular check up probably saved his life.

Cytogen launched "Screen, Stage and Support" during *Prostate Cancer Awareness Month 2001*. Us TOO has been a supporter of this effort.

Through media interviews, patient education materials and free screening events with leading cancer organizations, the program helps men learn about the importance of early detection, proper staging and diagnosis, and the need to support people living with prostate cancer. During the ceremony, Mr. Becker spoke about Cytogen's commitment to developing effective products to both treat and detect prostate cancer.

With Mr. Giuliani as guest speaker, this year's ceremony attracted significant levels of media attention. Thousands of people all over the world saw this special event on television and cable networks including Bloomberg,

Bloomberg Brazil, CNBC, Fox News, KTVU, CNBC India, NDTV (New Delhi India), ROB TV (Report on Business Canada) & New Tang Dynasty TV.

PSA TEST HAS HIGHER ACCURACY TO DETECT PROSTATE CANCER IN PATIENTS TAKING FINASTERIDE

Finasteride increases prostate-specific antigen (PSA) testing's ability to detect prostate cancer, a study in the August 16 *Journal of the National Cancer Institute* reports.

Finasteride is a drug prescribed for men whose prostates have become enlarged. The drug decreases prostate swelling and helps men with urinary problems. However, an increased number of high-grade tumors in men taking finasteride in the Prostate Cancer Prevention Trial (PCPT) has some physicians worried about the effect of the drug.

Ian M. Thompson, M.D., of the University of Texas Health Science Center in San Antonio, and colleagues examined the PSA test's ability to detect prostate cancer in the PCPT in men taking finasteride or a placebo. The group studied the PSA test's sensitivity and diagnostic accuracy for both groups.

The authors found that finasteride changed the diagnostic characteristics of the PSA test so that it detected prostate cancer with higher sensitivity and accuracy in men in the finasteride group than men in the placebo group. They suggest that the increased detection of high-grade prostate cancers in the finasteride arm of the PCPT may be related to the drug's ability to improve the PSA test's performance and not to its induction of high-grade disease.

The authors write, "This bias would be expected to contribute to greater detection of all grades of prostate cancer with finasteride."

Journal of the Nat'l Cancer Institute
15 August 2006

DESPITE RAIN, BIG TURN-OUT FOR 2ND CHICAGO PROSTATE CANCER RUN WALK EVENT

Sunday, September 10 was a gray day with light rain, yet nearly 1,000 people came out to Chicago's Grant Park along the lakefront to participate in the 2nd Annual Greater Chicago Prostate Cancer Run, Walk 'n Roll. The 5K run and 3K walk and is the only run/walk in the Chicagoland area dedicated to prostate cancer, and is co-sponsored by Wellness Place, a Palatine-based cancer resource center, and Us TOO International, a worldwide prostate cancer education and support network headquartered in Downers Grove, IL.



"Through awareness and early detection we hope to continue fighting prostate cancer in the city."

At the race, the event's emcee was WGN news anchor and prostate survivor Robert Jordan.

"Unfortunately, far too many men still die each year from prostate cancer," Jordan said. "The good news is that catching the disease in its earliest stages helps. It saved my life."

"We hope this event really gets people talking," said Wellness Place Co-founder Myrna Porter, RN, a Barrington resident and wife of a prostate cancer survivor. "The more information people have, the more lives that can be saved."

(Continued on page 5)

Proceeds from the event will be used to fund public awareness programs to educate men and their families about prostate cancer and the importance of early detection and treatment for long-term survival.

Support of this event and cause extended throughout the city. Illinois Governor Rod R. Blagojevich, Chicago Mayor Richard M. Daley and Senator Barack Obama were honorary chairpersons.

"My goal is to make Chicago a safer and healthier city by working together in partnership with organizations like the Greater Chicago Prostate Cancer Run Walk 'n Roll to promote good health," said Mayor Richard M. Daley.



(L) Terry Mason, MD, City of Chicago Health Commissioner and (R) Robert Jordan, WGN news anchor, event emcee, and prostate cancer survivor, talk about the importance of prostate cancer awareness to the crowd

CHICAGO PROSTATE CANCER RUN WALK EVENT

(Continued from page 4)

Attendees enjoyed live music featuring popular Chicago cover band R-Gang, numerous activities for children and a free lunch. The Illinois and Chicago Departments of Public Health worked together to provide free PSA testing onsite – 40 men participated.

Fundraising and walking teams were made up of co-workers, family and friends, and area Us TOO chapters including Don Johnson and Mercy Hospital chapters. All attendees and sponsors promised to return next year.

Thanks to all the event participants and sponsors for chasing the rain away with their smiles! Special thanks go to presenting sponsor TAP Pharmaceutical Products, Inc.



Us TOO Board member Don Lynam (far L), President & CEO Tom Kirk (L in yellow) and other men register for complimentary PSA tests at the Wellness on Wheels van supplied by the Illinois and Chicago Departments of Public Health

DEALING WITH PROSTATE CANCER SECOND HAND BY BRADLEY FOSTER

Having experienced prostate cancer first hand I can attest to the shock of the diagnosis, the fear of staring death in the face, the anger of “why me?”, the grief of possibly having my life shortened, the sadness of realizing how alone I am facing the uncertainties of treatment and recovery.

Prostate cancer is a disease that affects not only its victims but also those close to them. It’s a cruel ordeal for men, but it’s often made worse for their partners when they refuse to talk about it. Partners experience the same feelings of anger, fear and grief as their husbands, but when men refuse to openly discuss their feelings, their partners also feel helpless, frustrated, resentful and guilty. Unresolved feelings between a couple can seriously impair the communication in their relationship at a time when they need each other the most.

As we know, most men avoid talking about personal issues and even the most willing of us shut up tighter than clams when it has to do with our sexual health. To compensate we men get busy with technical matters and are usually willing to discuss the merits of surgery versus radiation or laparoscopic versus brachytherapy treatments as if we were talking about lawn mowers at Canadian Tire. When hit by the careen-

ing bus of irrationality and uncertainty, we retreat to the safety of logic and a rational choice of technology.

So what can you do if your spouse has opted to go through prostate cancer hell without you? Seeing cancer as a challenge to overcome rather than as an insidious disease eating away at your spouse is a good start. My advice is to support yourself and realize that thousands of women in Canada have gone through the same test as you. At times the dark thoughts and feelings can be overwhelming but try to take it one day at a time realizing that with time things will become clearer and less uncertain.

Find out if there is a prostate cancer support group in your area. If so ask if it has a spousal support group. Many prostate cancer support groups offer help and advice to the partners of men with prostate cancer. (see the sidebar for more information). Scan the web for on-line forums where you can find support from women in your position.

It is important to talk to someone knowledgeable who can help you work through feelings that come up for you. Health care professionals, therapists, coaches, or religious leaders are there to help support you in your time of need. Your doctor or lo-

cal hospital may also be able to direct you to someone who will listen.

Every September is prostate cancer awareness month. If your spouse has received a diagnosis or is at risk, this is an excellent time to make yourself aware of the rich sources of information and support available to you and your partner. Don’t think twice to reach out.

Bradley Foster survived prostate cancer and is a better person for it. He now helps others by coaching men and their partners through the ordeals of cancer. He can be reached at <bfooster@giantstepscoaching.com> or by phone at (416) 537-7282.

LOOKING FOR SUPPORT? WANT TO TALK WITH OTHER PATIENTS?

Attend a local Us TOO chapter support group meeting. Visit <www.ustoo.org> and click on FIND A CHAPTER NEAR YOU under “Chapters & Support Groups” menu or call toll-free (800) 808-7866.

Join *Prostate Pointers*, Us TOO’s online patient and caregiver discussion communities – 14 different topic groups are listed at <www.ustoo.org/Prostate_Pointers.asp>.

LOW-RISK PROSTATE CANCER PATIENTS FACE OVERTREATMENT

Many low-risk prostate cancer patients are being overtreated and might fare better if doctors monitored the cancer until treatment was necessary, a new study reports in the August 16th issue of the *Journal of the National Cancer Institute*¹.

Past recommendations for early-stage prostate cancer patients involved prostate removal rather than monitoring the cancer's progress until treatment is necessary. But more recently, cancers are being detected at earlier stages, and reports that low-risk patients are being treated aggressively have made researchers suggest such treatment may not be the best solution. New studies suggest that aggressive treatment does not improve survival benefits and may harm patients' health.

John T. Wei, M.D., of the University of Michigan in Ann Arbor, and colleagues identified 71,602 men over age 70 diagnosed with prostate cancer between 2000 and 2002. They determined how many men were treated with various therapies, including surgery and radiation, and how many times the "wait and see" approach was used.

The authors identified 24,825 men with lower-risk prostate cancers, 13,537 of whom underwent immediate treatment with radiation or prostate removal. Assuming waiting for treatment would have been the best approach for these cancers, the authors found that 10% of patients were overtreated with prostate removal and 44% with radiation therapy. Wei and colleagues suggest waiting until treatment is necessary may reduce overtreatment for patients with low risk prostate cancer.

They write, "Efforts to reduce overtreatment should be a clinical and public health priority."

Contact - Nicole Fawcett, 734-764-2220, <nfawcett@umich.edu>.

Citation:

1. Miller DC, Gruber SB, Hollenbeck BK, Montie JE, Wei JT. *J Natl Cancer Inst* 2006;98:1134-1141.

jncimedia@oxfordjournals.org
Journal of the Nat'l Cancer Inst.
6 September 2006

RADICAL PROSTATECTOMY EFFECTIVE FOR SOME MEN WITH HIGH-GRADE PROSTATE CANCER

Men with lower PSA values and fewer positive biopsy cores are most likely to benefit from radical prostatectomy for high-grade prostate cancer, according to researchers.

"This retrospective analysis provides support for the widely held hypothesis that certain patients with high-grade prostate cancer can be identified who may be cured with local therapy alone," said Dr. Mark Hurwitz from Harvard Medical School, Boston, MA.

In the August issue of *Urology* (*Urology* 2006; 68:367-370), Dr. Hurwitz and colleagues note that they assessed surgical outcomes for 168 biopsy Gleason 8 to 10 patients to investigate whether some patients have better outcomes after radical prostatectomy than others.

When the patients were stratified according to PSA level and percent positive biopsy cores into 6 groups, the authors report, there were no significant differences in clinical stage or Gleason score among the groups.

However, patients with both a PSA value of 10 or less and less than 50% positive biopsy cores had better 5-year biochemical control rates (67%) than patients with higher values (23%), the researchers note.

The authors conclude that "the ability to identify men with high-grade disease who are likely to harbor organ-confined or minimally extensive disease based on pretreatment prognostic factors may allow for selection of patients in this group who can receive short-term -- or even no -- androgen suppression without impacting on treatment outcome."

Reuters Health, 6 September 2006

SERUM ANDROGEN LEVELS IN BLACK, HISPANIC AND WHITE MEN

Litman HJ*, Bhasin S, Link CL, Araujo AB, McKinlay JB, and the BACH Survey Investigators

J Clin Endocrinol Metab,
doi:10.1210/jc.2006-0037

Submitted on January 9, 2006; Accepted on August 3, 2006

Context: Racial/ethnic differences in androgen levels could account for differences in prostate cancer risk, body composition, and bone loss.

Objective: To investigate racial/ethnic variations in testosterone, bioavailable testosterone, dihydrotestosterone (DHT), sex hormone-binding globulin (SHBG) and dehydroepiandrosterone sulfate (DHEAS) levels.

Design: The Boston Area Community Health (BACH) Survey was a multi-stage stratified cluster random sample, recruiting from 2002-2005.

Setting: Community-based sample of Boston.

Participants: Black, Hispanic or White, aged 30-79 yr, competent to sign informed consent and literate in English/Spanish. Of 2301 men recruited, 1899 provided blood samples (538 Black, 651 Hispanic, 710 White).

Intervention: Data obtained during in-person at-home interview, conducted by bilingual phlebotomist/interviewer.

Main Outcome Measure(s): Testosterone, bioavailable testosterone, DHT, DHT/testosterone ratio, SHBG, DHEAS.

Results: With or without adjustment for covariates, there were no significant differences in testosterone, bioavailable testosterone or SHBG levels by race/ethnicity. DHEAS levels differed by race/ethnicity before covariate adjustment; after adjustment this difference was attenuated. Before adjustment, DHT and DHT/testosterone ratios did not significantly differ by racial/ethnic group. After adjustment, there was evidence of racial/ethnic differences in DHT ($P =$

(Continued on page 8)



SEEKING COMMITTEE VOLUNTEERS FOR 2007 ONLINE AUCTION

Since we were so excited by the response to the first online auction, we would like to do it again next year!

We are seeking volunteers to assist in obtaining donated items for the 2007 auction. You can be anywhere in the country to participate. The group will interact via phone and email.

If you are interested, please contact Pam Barrett, Director of Development, at pam@ustoo.org or 630-795-1002.

Stay up-to-date on the latest prostate cancer patient solutions, information, events, and news @ WWW.USTOO.ORG

ABOUT US TOO CONTACT US SITE MAP SEARCH go

Us TOO International Prostate Cancer Education and Support Network is a 501-c-3 nonprofit, grassroots organization started in 1990 by prostate cancer survivors for prostate cancer patients, survivors, their spouses/partners and families. [More...](#)

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Us TOO PROSTATE CANCER EDUCATION & SUPPORT

GREATER CHICAGO RUN, WALK in ROLL PROSTATE CANCER

SNEAKERS @ WORK THE DAY FOR NATIONAL PROSTATE CANCER AWARENESS & ACTION

Someone to talk to... who understands!

NEWS & EVENTS	GET INVOLVED	CHAPTERS & SUPPORT GROUPS	ABOUT PROSTATE CANCER	HELPFUL RESOURCES
<ul style="list-style-type: none"> Register now for Us TOO University patient education program in Columbia, SC, Fri, Sept 29 FREE blue ribbon lapel pins during September! Register by Sept 1 to save \$30 for Int'l Conf on PCa, moderated by Snuffy Myers, MD September is Prostate Cancer Awareness Month 	<ul style="list-style-type: none"> Make a Donation Volunteer Start a New Chapter Corporate Sponsors Advocacy Raise Awareness: Order your prostate cancer blue wristband and NEW hat today! 	<ul style="list-style-type: none"> Find a Chapter Near You Online Communities: Prostate Pointers Support for Companions & Families 	<ul style="list-style-type: none"> Overview & Statistics Early Detection Newly Diagnosed Treatment Options Post-Treatment Issues Experienced a Relapse Advanced Disease Clinical Trials & Studies Emerging Treatments Special News for African 	<ul style="list-style-type: none"> Monthly Newsletter: The HotSheet Prostate Cancer NEWS You Can Use Free Us TOO Publications <ul style="list-style-type: none"> Audio/Video Archives Other Links Chapter Leader Resources Media Room Visit Our Store



FREE BLUE RIBBON LAPEL PIN OFFER HUGE SUCCESS!!

As of Friday, September 15, 2006, 150 people have ordered more than 4,500 free blue ribbon lapel pins during Prostate Cancer Awareness Month!

“Originally the offer was to giveaway a maximum of 3,000 pins, but the response was so great, we went back to our sponsor and asked if they would be willing to increase their support so we could fulfill all requests,” said Pamela Barrett, Us TOO Director of Development. Special thanks to sponsor **Valera Pharmaceuticals** for initially supporting AND extending this offer!

JUNE 15, 2007

SNEAKERS @ WORK

THE DAY FOR NATIONAL PROSTATE CANCER AWARENESS & ACTION

Participate in our **WORKPLACE GIVING** program to support prostate cancer patient education and support efforts!

Visit www.ustoo.org for more information or contact Dan Reed at 1-800-808-7866 or dan@ustoo.org

Hold a Closest To The Pin Contest at your golf club this fall to benefit Us TOO and Arnie's Army!

Visit www.ustoo.org for more information or contact Dan Reed at 1-800-808-7866 or dan@ustoo.org

Proceeds from all items sold benefit Us TOO's FREE programs, support services and educational materials for prostate cancer patients and their families

**LIVE FREE WEBCAST /
TELECONFERENCE
ON PROSTATE CANCER
RESEARCH & TRIALS
OCTOBER 5TH**

Participate via the Internet or the telephone on Thursday, October 5, 2006 at 7:30 pm – 8:30 pm, Central Daylight Time, for “Expanding Treatment Horizons in Prostate Cancer: Building Awareness of Current Research and Clinical Trials.”

This teleconference / webcast will feature Daniel J. George MD, Medical Oncologist at Duke University Medical Center and Mark A. Moyad, MD, MPH, Department of Urology, University of Michigan Medical Center.

Sponsored by Us TOO International, HealthTalk, sanofi-aventis and Novacea. Register at <www.healthtalk.com/USTOO> or call (800) 234-6080.

ANDROGEN LEVELS

(Continued from page 6)

0.047) and DHT/testosterone ($P = 0.038$) levels; Black men had higher DHT levels and DHT/testosterone ratios than White and Hispanic men.

Conclusions: As there are no racial/ethnic differences in testosterone levels, normative ranges need not be adjusted by race/ethnicity for androgen deficiency diagnosis for men aged 30-79. Further investigation is needed to determine whether differences in DHT levels and DHT/testosterone ratio can help explain racial/ethnic variations in prostate cancer incidence, body composition, and bone mass.

New England Research Institutes, Watertown, MA, Section of Endocrinology, Diabetes, and Nutrition, Boston University, School of Medicine, Boston Medical Center

* Address all correspondence to: <hlitman@neriscience.com>.

**DISCOUNTS TO FCRE /
US TOO CONFERENCE
EXTENDED**

The Foundation For Cancer Research and Education (FCRE) and Us TOO International have announced that they will continue providing, at least until October 1, the discounted registration fees for the International Prostate Cancer Conference to be held at Reston, Virginia, October 19-22, 2006.

The Discount registration fee of \$100.00 is extended to October 1, 2006. (Additionally, it will only be \$95.00 if you sign up over the Internet).

Conference attendees can obtain a registration brochure through their Us TOO support group or by going to the FCRE website for information and a list of the speakers <http://www.cancer-foundation.org/conference_101906.html> or by calling 718-522-7512 and speaking to Jessie Myers or Rod Schecter.

The conference will be moderated by Snuffy Myers, MD.

US TOO INTERNATIONAL: OUR MISSION

Communicate timely, personalized and reliable information enabling informed choices regarding detection and treatment of prostate cancer.

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