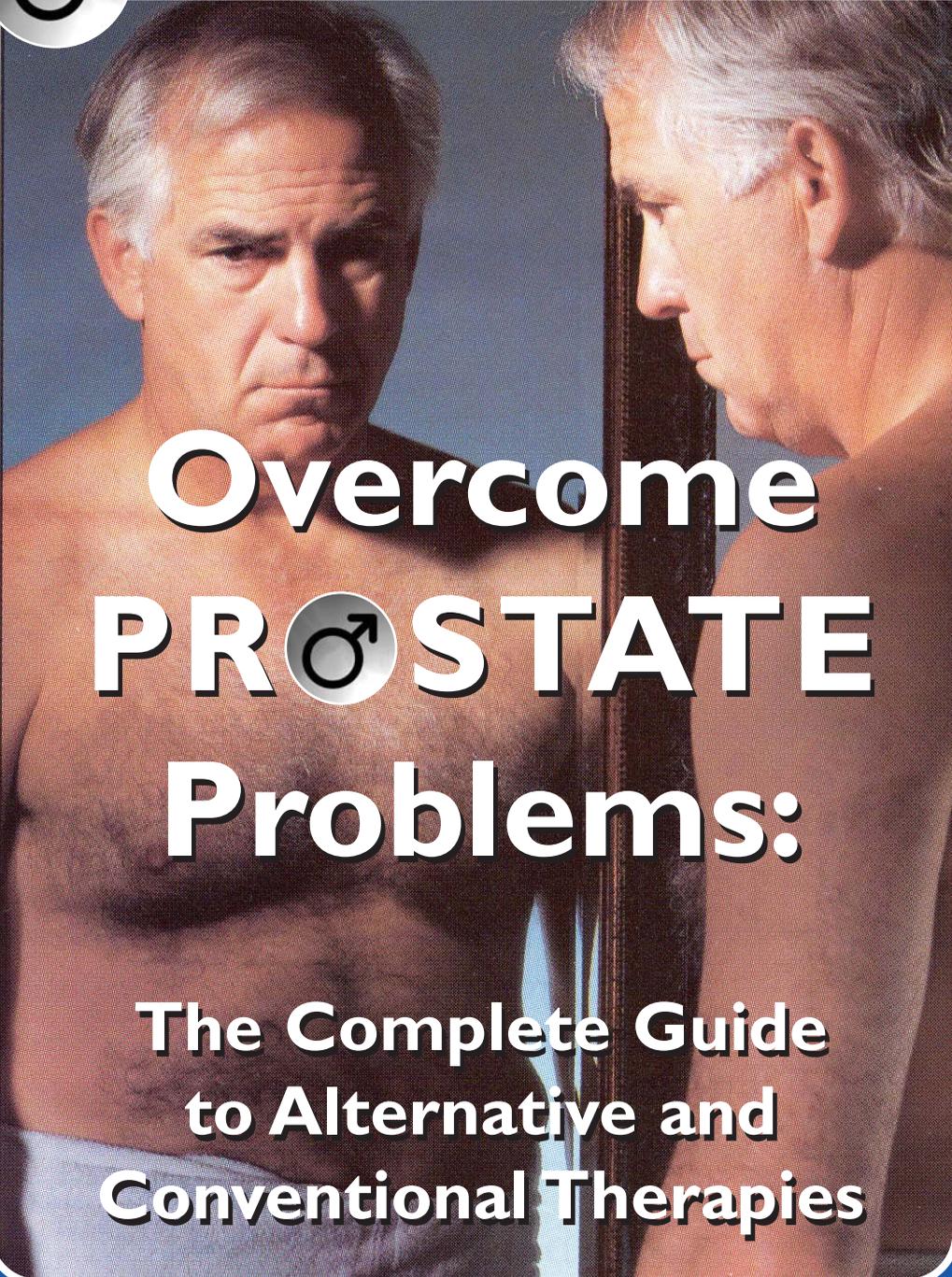




The Prostate Health Manual

A photograph of two middle-aged men with grey hair looking at their reflection in a mirror. The man on the left is looking directly at the camera with a serious expression, while the man on the right is seen in profile, looking at his reflection. The background is a plain, light-colored wall.

**Overcome
PROSTATE
Problems:**

**The Complete Guide
to Alternative and
Conventional Therapies**

OVERCOME PROSTATE PROBLEMS

**The Complete Guide
to Alternative and
Conventional Therapies**

Foreword.

Men do not like talking about their health problems. It's probably because of that 'macho exterior' we hide behind, because we do not like admitting our vulnerabilities.

In this day and age it is about time that we started talking about one of the key health issues men face, especially as we reach middle age. After all, prostate health is the key to preserving sexual potency and our virility.

Thank goodness for books like this, national press and periodical magazines, that now regularly publish articles on this major problem men face as we age. No longer do we need the macho shield, because there are excellent and comprehensive sources of information available – such as this book - that even if we are still a little inhibited by discussing prostate problems between ourselves, our wives and partners, with the facts and solutions such as you will find in this book you cannot ignore the symptoms of prostate ill-health.

In this book Karen has covers the diagnosis of the three prostate problems - Prostatitis, Benign Prostatic Hyperplasia (Prostate Gland Enlargement) and Prostate Cancer. She follows that with discussing some forty conventional tests and solutions for these conditions followed by recommended Lifestyle changes for each condition.

A truly up-to-date work that also has a comprehensive section of Useful Addresses and is a must read for all middle aged men in particular, and should be read by young men also to minimise their future prostate problems.

Dr Peter Young

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CAUTION - Please Read Carefully.

This book has been written for information purposes only, accurate diagnosis by your GP is essential. If on medication or have a serious illness, always consult your GP before taking supplements or following restrictive diets, medical advice should be sought before any self-help technique is applied.

People with epilepsy should not take evening primrose oil or use certain essential oils including: fennel, rosemary, hyssop, etc. if in doubt or suffer from any illness always consult an aromatherapist before using essential oils.

* Do not take more than recommended doses of supplements (dosage on label).

* It is not recommended to take high doses of easily absorbed zinc above 50 mg (elemental dose), on a regular basis, without a practitioner's supervision (a high elemental zinc dosage over a long period can unbalance the system).

* Do not take supplements containing zinc with meals, zinc may interfere with iron absorption. It is best taken with a snack in-between meals. Soya and zinc or zinc rich foods should not be taken together.

* Doses of 'high potency' Vitamin E, fish oils and certain herbs i.e. garlic supplements, *Ginkgo biloba* etc. should not be taken 3 weeks before surgery, always consult a nutritionist, practitioner, or medical herbalist for details. It is unwise to mix high doses of the 'high potency' supplements as above without a practitioner's supervision.

* It has also been reported that eating fruits from the solanaceae genus of plants (i.e. potatoes, tomatoes, sweet peppers, aubergines) within 2 weeks of an operation may slightly delay recovery from the anaesthetic.

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Chapter 1

What is the Prostate and its Function?

WHAT IS THE PROSTATE GLAND AND ITS FUNCTION?

The prostate gland is only found in the male body, and is situated just below the bladder, in front of the rectum, surrounding the urethra; a small tube that carries the outflow of urine. The prostate goes through many changes during the course of a lifetime, from pea-size at birth to the size and shape of a walnut in late teens. It weighs around 20 grams, in an average adult between the ages of 20 and 45. The prostate is made up of three main layers, consisting of glands, muscle and fibrous tissue. The glands manufacture and store the seminal fluid, which includes proteins (prostate-specific antigen), zinc, enzymes and citric acid. The fluid's main function is to activate the sperm. The prostate muscle pumps this fluid out as ejaculation occurs. A healthy prostate allows free flowing, painless urination along with normal sexual function and fertility.

Figures show that up to 9 out of every 10 Western men will suffer from some kind of prostate discomfort during their lifetime

Around the time a man reaches his mid forties, the prostate begins to naturally enlarge, mainly through cell proliferation, and may not cause any problems at all. Testosterone levels begin to decrease and a once essential enzyme - 5-alpha-reductase, which is stored within the prostate, starts to vigorously turn testosterone into the more potent androgen, dihydrotestosterone (DHT). A healthy prostate will expel enough DHT to maintain a comfortable size. Unfortunately, with high levels of stress, poor diet and the effects of pollution, hormones can become unbalanced, and may lead to an abnormal build up of DHT. This extra DHT can further increase the size of the prostate up to the size of a lemon, bringing on uncomfortable symptoms (see BPH), and can contribute to hair loss. Men who have low levels of DHT also have little or no BPH symptoms.

Zinc is known to inhibit the production of 5-alpha-reductase and is a co-factor in the body's ability to excrete excess levels of DHT.

This is probably a contributory factor in what is now known as the 'Male Menopause', and although different hormones are involved, it can be

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just as traumatic for a man at this time as it is for a woman going through the menopause. A woman learns from an early age to communicate her fears and feelings, invariably a man does not. In fact, studies suggest that a man is usually too embarrassed to even discuss his symptoms with his own GP, not realising that if cancer is present it is vital to have an early diagnosis, and it could even be a life-saver!

The irony here is that many studies suggest that a large number of cases could have been alleviated, or even avoided, simply by modifying the diet to include healthier foods and Essential Fatty Acids (EFAs); or regularly taking good quality supplements, including zinc, magnesium, vitamin E, vitamin B6, selenium and amino acids. This is particularly important if a relative has a history of prostate problems, and it is essential to start early. Teenagers who are sexually active should choose foods that are naturally rich in zinc, especially pumpkin seeds, sardines (oily fish), lean beef etc. or take at least a good quality zinc supplement, one that is easily absorbed by the body, the RDA is currently 15mg for an adult. It is important not to take too much zinc, without practitioner guidance.

At the beginning of this century the incidences of prostate problems amongst world population were virtually non-existent. This is the case today for incidences in Asia, Africa, Latin America and Japan. In the West we are seeing prostate problems increasing at an alarming rate and they can begin at a much earlier age. At the same time the normal fertility rate is decreasing. Recent scientific studies suggest that both are related to pollutants and poor unbalanced diets that are short on essential nutrients.

The Japanese notably eat a healthier diet; more fish, less fat with very little saturated fat, and many more vegetable based products. Japanese men have a lower incidence of prostate cancer, but those who have lived most of their lives in the West and have consumed a typical Western style diet have the same likelihood of prostate cancer as American men. Likewise, African-Americans are highly

WHAT IS THE PROSTATE GLAND AND ITS FUNCTION?

susceptible to prostate cancer, but it is more of a rarity in Africa. Prostate cancer is the second highest cancer killer of men living in the West.

Research has shown that men who eat their meat rare are less likely to develop prostate cancer. The chemical composition of meat changes when it is cooked at very high temperatures and the resulting toxic substances give a 40% increased risk of developing cancerous tumours in the prostate. **NB: However, it must be said that not all meat is safe to eat rare.**

It is interesting that the only other species known to suffer prostate problems on a large scale is 'man's best friend', the dog. He also consumes a typically poor Western diet, far removed from natural feeding habits. Unlike most cats, the normal household canine relies totally on man for his nutritional intake, with over-cooked meat (mainly tinned or highly processed), additives, wheat, hardly any exercise and subjected to the same household pollutants (stale air and cleaning products) as his master.

Proof positive of a lifestyle related illness?

Studies do point to this, even incidences of hereditary prostate cancer appear to be aggravated by a typically Western lifestyle, lacking in good nutrition. The results of many population studies confirm that a change to healthier eating and drinking habits is now, more than ever, of the utmost importance.

It really is simple to change your lifestyle and the more you stick to a mainly vegetarian, high nutrient diet the easier it becomes. The body will eventually stop craving those high fat, high carbohydrate foods that are abundant in an unhealthy western diet, and you will start to feel better and much more alert. And remember, Emotional

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Freedom Technique (EFT) can help you to deal effectively with the stronger cravings.

Chapter 2

Prostate Problems

Overcome Prostate Problems

There are 3 main ‘disorders’ that can affect the prostate gland:

- 1 - Prostatitis, usually caused by an infection
- 2 - Benign Prostatic Hypertrophy/Hyperplasia (BPH)
- 3 - Cancer of the prostate

It is important to have a qualified diagnosis before beginning any self-help technique. Prescribed medication should not be stopped, without your doctor's permission.

1 PROSTATITIS

Both acute and chronic (recurring) prostatitis can be caused by a bacterial or viral infection that directly affects the urinary area. There is evidence to suggest that prostatitis could also be fungal (the yeast *Candida albicans*), or an allergy, although some mainstream doctors would argue against the latter two. In some cases, it may have been sexually transmitted. The emerging bacterial infection *Chlamydia spp.* (which causes damage to fertility in women) can cause prostatitis in men and is highly contagious. Having a catheter, stent or balloon fitted can also increase the risk of infection. In quite rare cases a stone (calculus) may have formed in one of the ducts.

Until recently Chronic Idiopathic Prostatitis was not thought to have a microbial cause, so treatment was often for relief of symptoms, not cure. In 1998, a study carried out in Louisiana suggested that because infection can be deeper within the prostate, microbial infections in seminal fluid is not always immediately evident.

Ref: Domingue GJ Sr, Hellstrom WJ. Prostatitis. *Clin Microbiol Rev.* 1998 Oct;11(4):604-13

Prostatitis can affect a man at any age. The first signs are similar to the onset of BPH, frequent and uncomfortable urination with cramp like sensations. There may be a discharge from the penis, and in very severe cases, blood may be passed. With ‘acute prostatitis,’ flu like symptoms are also quite common - a high temperature and shivering is often accompanied by aches and even sharp pains, particularly between the legs, rectum and lower back areas. Medical diagnosis

Prostate Problems

should be sought as soon as possible. These symptoms could also signal, BPH, Prostatitis (a thick fluid congestion at the centre of the prostate), or a more serious problem - prostate cancer. For recurring chronic prostatitis, a biopsy may be offered to find the cause. Stress may also be a contributory factor to the symptoms.

Medical treatment is often strict rest, antibiotics or anti-inflammatory drugs and a change of diet, with large amounts of filtered water, herb teas and vegetable juices (especially cranberry juice). No alcohol and, some doctors maintain, no sexual activity during and up to a week after symptoms disappear. Other doctors will advocate ejaculating 3-4 times per week, it is best to follow your own doctor's advice for your particular case. Remember: if taking a PSA test while suffering from prostatitis the reading is likely to be higher than normal. You must tell your GP before taking the test.

It is important to talk to your GP about current treatments and the side effects.

2. BENIGN PROSTATIC HYPERPLASIA - BPH

BPH affects the centre of the prostate, the swelling presses against the urethra, so the first sign is usually an 'irritative' or 'filling' feeling with a frequent and urgent desire to urinate. Initially there may be little or no pain. The sleep pattern may be disturbed by dreams of passing water, because prostate enlargement is often detected by the subconscious mind. If symptoms last for more than a few days, a GP must be consulted for diagnosis, kidney damage is a possibility if symptoms are left unchecked and it may prevent the need for early surgery. The techniques used for diagnosis are the same for prostate cancer, page 20.

<p>A complete stop in the flow of urine is a medical emergency see your doctor / specialist, ASAP.</p>

Overcome Prostate Problems

BPH symptoms can slowly increase, and are then classed as 'voiding' or 'obstructive', these include a delay in starting to urinate, a weak flow rate and irregular urine dribbling. Control of urination may be difficult and any effort made by straining to physically increase the flow will often be in vain, and can result in either a dull ache, burning sensation or a sharp pain. Pain in the lower back, pelvis or upper thigh areas; abdominal bloating; sudden, unexplained weight loss, may be evident. Many of these symptoms can also be caused by certain medications or prescribed drugs (antihistamines or decongestants can slow urine flow in cases of BPH), also kidney stones, bladder infections etc. can give similar symptoms to BPH. It could, however, be the onset of a more serious condition, cancer. Medical diagnosis is important, even more so if there is a family history of cancer or if over 50 years old. There is no current conclusive evidence to suggest that BPH will result in prostate cancer, the two invariably affect different areas of the gland.

The prostate does naturally enlarge with age and may not cause a problem, but if symptoms affect the quality of life, drugs can be prescribed to increase the flow and to ease any pain. Alpha-blockers and 5 alpha reductase inhibitors are the usual prescription for an enlarged prostate. Figures suggest that they may only delay surgery; they are not a cure. Alternatively, supplements containing saw palmetto, amino acids, Beta-sitosterol, and EFAs have been shown to help in some cases of prostate enlargement with a painful, weak flow rate, especially if taken long term with a good nutritious diet. But no supplements should be taken without an initial diagnosis of symptoms.

Below the age of 40 only 10% of men have BPH; this figure rises to 88% by the age of 80.

Prostatic stents (flexible or non-flexible tubes) inserted into the urethra, can be used for patients unable to undergo major surgery. A small 'balloon' inserted, to increase the flow rate, is not now commonly used because of the high failure rate and the risk of infection. For progressive BPH that has turned into Benign Prostatic Obstruc-

Prostate Problems

tion (BPO) surgery or heat treatment (laser, microwave or electric current) may be the only option. Advances in surgical techniques are being made all the time. Ask your GP about all of the options available in the UK, if you are not given a good choice, seek a second opinion.

Remember: if taking a PSA test while suffering from BPH the reading is likely to be higher than normal. You must remind your Urologist / GP that you have BPH, before taking the PSA test. Supplements can also affect a PSA reading.

You cannot assume that once surgery on the prostate such as TURP has been carried out, further operations and treatments may not be required. The prostate gland can continue to enlarge despite previous treatments and this may need further surgery or treatment.
--

3. PROSTATE CANCER

Incidences of prostate cancer amount to about one third of cancers diagnosed in men. Up to 30,000 new cases are diagnosed each year. It is important to see your doctor if you suspect something is wrong, on no account should you just sit and worry about it or try to go for alternative treatments until you have had a medical diagnosis.

During the appointment, the doctor will ask about a family history of cancer and will initially give a PSA test, which is a simple blood test, and sometimes, a flow test. If there is further cause for concern a digital rectal examination (DRE) may be required. Then, depending on the outcome, he may arrange a transrectal ultrasound (TRUS) guided biopsy. Treatment will depend on the results of the initial tests. Although the PSA test is not conclusive, because an abnormally high reading can be caused by other factors, it can still save lives. You must not ejaculate 3 days before the test, and you must inform your doctor of any supplements (herbs or vitamins) you are taking. He will probably advise to stop taking the supplements before the test, because they can affect the reading. If a doctor, other than your own GP, is giving the PSA test he should know which drugs you have

Overcome Prostate Problems

been prescribed and prostate tests you have already had, if any.

Thymosin β 15, a protein made by cancer cells, which stimulates cell migration and helps to advance the spread of prostate cancer, is being studied for its ability to detect prostate cancer. When the PSA and thymosin β 15 tests were combined, the combination detected prostate cancer more often than PSA testing alone, with far fewer false-positives.

If cancer is discovered, it is important to find out which type of cancer it is:

Type I (galloping or tiger - high grade), is aggressive, the cells in the prostate begin to quickly grow, divide and ultimately spread to other parts of the body. At first, only the prostate is involved, but if left untreated it may spread to the bones and surrounding tissue, causing severe pain, disability and death.

Type II (grumbling or pussycat – lower grade), surgery may not be necessary because the growth of the cancer is slow and contained within the prostate, unlikely to become life threatening. The doctor, depending on the patient's age, will probably 'watch and wait' with regular check-ups in case the cells do become mobile.

There are around 30,000 new cases of prostate cancer in the UK alone every year (200,000+ in the US). The incidences have increased over 75% in the last 15 years. The good news is that the mortality rate in prostate cancer cases is actually decreasing by about 4% per year.

The doctor will need to determine the stage the cancer has reached: T1-First stage too early to feel by manual examination, T2 - second stage small and still contained within prostate gland, T3 - third stage just broken through the prostate or T4 - spread to another part of the body.

Cancer that has not spread and is lower grade the choice is often 'watch and wait', until the symptoms affect the quality of life, especially if the patient is over 70. If the patient is younger or has

Prostate Problems

high-grade cancer, removal or radiotherapy will be offered. Modern medical procedures can involve hormone or combination therapy as an option too.

Once prostate cancer has been diagnosed the sufferer and his family will have some tough decisions to make. Now is the time to look at all the options, both conventional and integrated treatments. Talk to your GP, or find a doctor of integrated medicine, they are usually more willing to listen to their patients and they will ensure that you are not misled, when it comes to alternative treatments.

What is the best treatment? There is no easy answer, all you can do is find out as much as possible and talk to your GP, get a second opinion if you are not happy. Advances in screening, patient awareness, and improved treatments such as, hormone therapy, laser, keyhole and robotic surgery mean that the choice has never been better. And all this plays a part in the quality of life and survival of patients too.

See Chapter 3 - pages 25 to 36, to get an idea of the treatments currently available. Seek further information from your doctor about their risks and side effects. If the procedure is available and it is suitable for your case, it should be your choice. It is your life and you must demand the treatment you need.

Chapter 3

Conventional Treatments

Overcome Prostate Problems

On 14th October 2003, the Department of Health and the Welsh Assembly Government formally requested the National Institute for Clinical Excellence to prepare a guideline for the NHS in England and Wales for the clinical management of prostate cancer, to supplement existing service guidance. The report should offer more choice, and better quality treatment for prostate cancer sufferers. NICE estimates that the guideline will be ready in 2008.

Bipolar Plasma Kinetic Vaporisation PKVP See Transurethral Electro vaporisation TUVVP

Brachytherapy (Internal Radiation): small radioactive 'seeds' are injected into the prostate, giving either a low dose or high dose radioactive treatment to the tumour, but minimising damage to the healthy surrounding tissue. Low dose brachytherapy (for localised prostate cancer): permanent seeds are injected via the perineum and give radiation over several weeks or months and remain in the prostate permanently (NICE Guidance issued July 2005). For High dose brachytherapy: radioactive seeds are inserted via a catheter, again through the perineum, and give higher radiation for a short time, the catheters are then pulled out leaving no radioactive material behind. Both treatments can be on an outpatient basis, but there is still a medium risk of impotence or incontinence. It may not be as effective for advanced prostate cancer as full removal. It is important to find a surgeon with experience of this technique; ask him about his success rate. External radiation can also be offered with brachytherapy. NB: This can increase the PSA reading for up to 2 years after treatment. See 3DCRT below.

New computer software has been introduced to make brachytherapy more precise, which reduces the risk of side effects.

Chemotherapy

Chemotherapy is not usually used for cases of prostate cancer. But recent clinical trials have been quite encouraging. The cases suitable

Conventional Treatments

are usually those who have had the cancer spread and are no longer responding to hormone therapy. Docetaxel (Taxotere™), licensed in Europe is one such drug used. However, it is not currently available as a standard NHS treatment. NICE is still evaluating it, but talk to your doctor, he may be able to prescribe it for you if he thinks it is suitable. Atrasentan, a new anticancer drug, is being studied in America in combination with Docetaxel and prednisone, two drugs used in chemotherapy. The results so far are encouraging. NICE estimates that treatment guidance will be available in 2008.

Conformal Radiation 3DCRT: a new technique which targets the area more successfully through three-dimensional imaging (CT, MRI, or PET scanning) and focusing the radiation beam so that it is unlikely to hit surrounding organs. It is reported to give fewer side effects. In September 2002, the National Institute for Health and Clinical Excellence (NICE) recommended that it should be available to all suitable prostate cancer sufferers. What doctors don't know at present is whether it is better than conventional radiotherapy at controlling prostate cancer in the long-term. Clinical trials are underway to establish this.

Cryosurgery: Targeted Cryoablation of the Prostate (TCAP) freezes and destroys cancerous cells in the prostate. New techniques involving improved ultra-sound and radiology skills make this a minimally invasive alternative to surgery. Advances in temperature control and monitoring can diminish the burning of surrounding healthy tissue. It is available in the US and in UK at the Royal Surrey County Hospital in Guildford. In May 2005, NICE issued guidance for cryosurgery in recurrent cancer. In Nov 2005, NICE gave guidance on using cryosurgery as a primary treatment for prostate cancer. It is usually used for smaller prostates and only when the cancer is in a specific area of the prostate.

Cytoscopy: a small lens in a tube is inserted into urethra, while numbed, to view area, a transurethral resection etc. can be carried out at the same time, if necessary.

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Da Vinci System is high-tech surgical technique using robotic surgery is set to revolutionise prostate operations. Usually up to 50% of men undergoing prostate surgery will suffer from varying degrees of impotence and urinary incontinence, because of damage to nerves and surrounding muscle. The Da Vinci system is different, it uses three computerised arms, which are extensions of the surgeon to give much better precision. It is still early days, but approximately 90% of prostate cancer patients still have urinary and sexual function. The operation is available on the NHS, and also privately (approximately £15,000) from The Princess Grace Hospital in London. See Information at the back of the book page 184.

Digital Rectal Examination DRE: the doctor inserts a gloved finger into the rectum, via the anus, to assess size and shape of the prostate.

Drug Treatment for BPH

Alpha-blockers work by relaxing the muscles at the neck of the bladder and in the prostate, which reduces pressure on the urethra and so helps increase the flow of urine. It is not a cure for BPH, but helps to alleviate a few of the symptoms. Surgery may still be necessary later on. Common side effects are tiredness, dizziness and headaches.

There is some evidence that suggests combining alpha-blockers and finasteride may be more effective in relieving and preventing the symptoms of progressive BPH than the two drugs alone.

5-alpha-reductase inhibitors work by inhibiting the production of DHT, the hormone that contributes to BPH. Unlike alpha-blockers, 5-alpha-reductase inhibitors seem to reverse BPH to some extent and so may delay a need for surgery. But the side effects are: impotence, loss of sex drive, ejaculation disorders, testicular pain, male breast tenderness and enlargement, lip and face swelling, rash and itching. Finasteride (Proscar™) is the most commonly used

Conventional Treatments

drug, but the patent is set to run out in June 2006, so Proscar (Merck) will not be the only finasteride product available. NB: The World Anti-Doping Agency has banned the use of finasteride for athletes, fearing it could be used as a masking agent.

High Intensity Focused Ultrasound (HIFU) for prostate cancer is carried out under a general anaesthetic. A rectal probe incorporating an ultrasound scanner and a HIFU treatment applicator is inserted to monitor and define the area to be treated. A beam of high intensity ultrasound is focused on the target and the resulting temperature destroys the targeted tissue. Guidance was issued by NICE to GPs in March 2005. (For BPH - High-intensity focused ultrasound using timed bursts of ultrasound waves to create coagulation of a targeted area of tissue is used in the US).

Hi-Art™ - see TomoTherapy

Hormone Treatment / Therapy HT: is used to shrink tumours by stopping the production of testosterone and can put prostate cancer into remission, even if it has spread. In some cases it may only be a temporary measure, but it can be used in conjunction with radiotherapy. HT also seems to be a good option for many older patients. A new class of gonadotropin-releasing hormone antagonists is soon to be available. Although most hormone therapies for prostate cancer initially raise testosterone levels, a member of this new class of drugs called Abarelix does not. In fact, recent research suggests that it works more quickly on prostate cancer. Also in this class are: degarelix, ganirelix and cetrorelix (which are not currently used for prostate cancer). They may not be available on the NHS; however, your doctor can request them if he thinks they are suitable for your case. Some doctors believe that intermittent hormone treatment is better long term than given continuously.

*Pituitary down-regulator injections: goserelin, see Zoladex, given every 4 or 12 weeks, inhibits a leuteinising hormone from the pitui-

Overcome Prostate Problems

tary, which in turn lowers testosterone levels, and can be given in conjunction with anti-androgens to stop an initial flare-up of hormone levels and symptoms. NB: Some oncologists consider that blocking testosterone intermittently, instead of fully, may be preferable long-term.

Hypophysectomy: removal or destruction of the pituitary gland, this may be carried out in place of drugs to treat some cases of prostate cancer.

Intensity Modulated Radiation Therapy IMRT: is a specialised form of conformal radiation therapy for prostate cancer, using a computer-controlled machine to target the area and assess dosage levels. The radiation can follow the contours of the tumour, so fewer side effects are usually experienced. It enables high doses of radiation to be precision guided with less surrounding tissue damage than was previously possible. It is beneficial for tumours that are hard to get at by conventional surgery. IMRT also allows the distinction between cancerous cells and healthy tissue. Comparisons with 3DCRT report significantly better dose distributions in some cases. See TomoTherapy - Hi Art (Image Guided Intensity Modulated Radiation Therapy).

Laser Ablation of Prostate VLAP: a laser energy treatment for BPH. VLAP improves symptoms of BPH and is now a viable minimally invasive treatment as long as the surgeon is experienced in the use of lasers. It is always worthwhile to check his record. The renewed interest in the use of lasers is due to the more user-friendly solid-state lasers, such as the holmium:YAG (NICE guidance issued November 2003), frequency-doubled neodymium:YAG, the higher power potassium-titanyl-phosphate lasers and diode lasers have made the technology more attractive for clinical use. The silica optical fibre delivery systems, for use in flexible endoscopes, have also promoted the development of new laser procedures. It may be worth asking if the urologist has the latest experimental lasers such

Conventional Treatments

as the erbium:YAG, Thulium, and Thulium fibre lasers, which may provide more precise incision of soft tissues, and more rapid prostate ablation.

Potassium-titanyl-phosphate (KTP) laser vaporisation for photoselective vaporisation of the prostate (PVP) at 80 W is an especially effective treatment option for older, seriously ill patients or those on oral anticoagulants. The National Institute for Health and Clinical Excellence (NICE, May 2005) issued full guidance to the NHS in England, Scotland and Wales on KTP laser vaporisation for the prostate for benign prostatic obstruction (BPO). So your GP should have the full details and information on this procedure. When its long-term track record is published it is likely to overtake TURP as the Gold Standard in conventional techniques for progressive BPH.

Orchidectomy: a removal of testes to reduce hormones and slow cancer growth.

Photodynamic Therapy (PDT) is now available for the treatment of prostate cancer. It is offered in the UK as a private treatment (The Dove Clinic) and may be obtainable on the NHS, for further details contact your GP. Photoflora, which has fewer side effects and does not stay in the body for as long as the conventional drugs such as Foscan, is now used by some doctors as the activating medium. It can be given orally and works by selectively collecting in the cancer cells so that the laser can target them by focusing a light beam through minute optic fibres. There is less surrounding nerve damage, side effects are usually minimal with urination disturbed for only a short time. Progress is monitored by blood tests. With Foscan the patient remained light sensitive for up to 1 month afterwards, but Photoflora, which is based on chlorophyll, usually clears from the body in 48 hours. This is offered at the Dove Clinic in Hampshire. See Integrated Medicine in useful addresses at the back of book. NB: See Sonodynamic Therapy

Photoselective Vaporisation of the Prostate (PVP)

For BPH. See Potassium-titanyl-phosphate (KTP) Above

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Prostate Specific Antigen Test PSA: is used to detect cancer. Prostate Specific Antigen (PSA) is a protein manufactured by prostate tissue. When the prostate swells, because of cancer or inflammation, the ducts that secrete PSA become clogged and more and more PSA is leaked into the bloodstream. The PSA test measures the blood level of this protein.

PSA is measured in nanograms per millilitre (ng/ml). Up to 4 ng/ml readings are usually considered within the desired range. With Up to 2.5 ng/ml being the optimum 'good' reading. If the reading is 4-10 ng/ml it is considered an intermediate risk. Over 10 ng/ml the risk is considered high. The higher the PSA reading the more likely it is that the patient has prostate cancer. But because certain people have a naturally raised PSA score, or are prone to BPH or take supplements and vitamins the FREE PSA reading should be taken into consideration also. NB: For very high PSA readings a FREE PSA test is not normally carried out, because a very high reading usually means cancer is present. Because the PSA test has never been entirely reliable, further investigation to confirm the presence of prostate cancer and its grade will follow.

The FREE PSA test determines the amount of PSA circulating freely in the blood and how much is bound to other proteins (Complexed PSA). If the elevated PSA level comes mostly from FREE PSA, then the elevated level is most likely to be from some other source than prostate cancer.

NB: AVOID Ejaculation 3 days prior to the PSA test, or a false 'positive' reading may result. Unfortunately, there are other conditions that also give a false positive reading: BPH, prostatitis, bladder infections, and trauma to the area have all been known to elevate a PSA reading in some individuals.

In the decade leading up to 2001, it was clear that there had been a marked increase in cases of prostate cancer, this was followed by a plateau, which was probably associated with the PSA screening as more cases were being diagnosed throughout that period. However, the regular use of PSA screening is still questionable. To determine this, large-scale clinical trials are currently underway.

Conventional Treatments

PSA-related findings so far include:

- Relative five-year survival rates for prostate cancer patients were 99%
- 10-year survival rates were 95%
- Excess mortality compared with the general population was as low as 1 percent and 5 percent within five and 10 years following diagnosis.

Concerns about the efficacy of the present PSA test have led to new advances in detecting marker proteins that is set make the test more efficient in the future.

Radical Prostatectomy: removal of the entire prostate gland and localised cancer. The removal is via the abdomen (retropubic) or from the area behind the scrotum. A catheter / drainage tube, usually fitted temporarily. Your GP and surgeon will advise on aftercare and discuss risks of impotence and incontinence. Surgical techniques are improving and there are ‘nerve sparing’ procedures, but damage to the surrounding nerves is still a possibility. Check the surgeons’ record before surgery. **Laparoscopic Radical Prostatectomy (LRP)** via two keyhole abdominal incisions, pioneered by consultant urologist Chris Eden (Hampshire UK), allows the prostate to be removed with minimal damage to the surrounding area, less recovery time and significantly fewer side effects. In October 2003, NICE issued guidance on LRP for localised prostate cancer. See the ‘Da Vinci System’ which seems to have a high success rate with fewer side effects.

Radiotherapy (External Radiation): mainly used for older men, with prostate cancer, who cannot undergo major surgery. A finely focused external beam of radiation targets the cancerous tumour, a 30-session course is usually needed and in most cases, it can be carried out as an outpatient procedure. There is a risk of varying degrees of impotence and incontinence. Discussion with your GP and /or counselling answers questions, allays fears and assesses risks. Sometimes used in conjunction with brachytherapy. See Conformal Radiation 3D CRT, which may be a better option for some cases.

Overcome Prostate Problems

Sonodynamic Therapy (SDT) is the use of non-thermal, low-level ultrasound to destroy cancerous tumours and selected malignant cells. Ultrasonic cavitations generate free radicals from the breakdown of water molecules, and allows deeper penetration into the body than would normally be possible. Sonodynamic therapy is carried out using a simple therapeutic ultrasound machine with a specially designed treatment head, known as a maniple, which is applied over the affected area where ultrasound gel has been placed on the skin. Sometimes, Photodynamic therapy is combined with Sonodynamic therapy. This is offered at the Dove Clinic in Hampshire. See Integrated Medicine Page 183

Stent – a short tube that is inserted into the urethra to help improve the flow of urine. However, it can become blocked, so is really only suitable for men who cannot have surgery or other suitable treatment. But, improvements are being made all the time, biodegradable, temporary, self-expanding and self-reinforcing stents are becoming available and may offer a better solution for some people. There may still be a risk of long-term incontinence.

Terahertz Pulse Imaging (TPI™) a diagnostic technique recently demonstrated at Addenbrooke's Hospital, (Cambridge, UK) uses terahertz radiation, which lies in the far infrared range of the electromagnetic spectrum to form images that distinguish between healthy tissue and basal cell carcinoma. TPI has potential to spot early stage cancers much more effectively than anything available at present.

TomoTherapy Highly Integrated Adaptive Radiotherapy (HI-ART™) is a new radiation therapy option for prostate cancer available in America, Italy, Belgium and the Cromwell Hospital in London (one of the first private centres in the UK to offer this treatment). It combines an advanced form of image guided IMRT, with improved accuracy and delivery system to the tumour. It is said to reduce radiation exposure to surrounding tissue. Available in the UK as a private procedure, but may become available on the NHS in the near future. If you feel that this is the treatment for you, talk to your GP.

CONVENTIONAL TREATMENTS

Transrectal Ultrasound Scan TRUS: in certain cases a specialist may need to view the prostate via a magnetic resonance imaging probe, which is passed into the rectal cavity. TRUS can also be used for guidance during a biopsy etc.

Transurethral Electro vaporisation TUVP: a grooved rollerball electrode (vaportrode) rapidly heats tissue, vaporising it, turning it to steam, until it creates a suitable sized cavity. A catheter is fitted.. In a number of cases it is said to be superior to TURP. Fewer side effects and recovery time are reported. NICE issued guidance to GPs in October 2003, so it should be a treatment of choice for benign prostatic obstruction, if suitable.

Bipolar Plasma Kinetic Vaporization PKVP- although the generator and the resecting loop are different to the monopolar system, the resection technique is very similar. PKVP has the advantage of less blood loss and less heat damage to surrounding tissue. But, there is little clinical data that shows the long-term advantage over TUVP.

Transurethral Incision TUIP: a deep cut is made down the prostate to increase urine flow rate. (TULIP a procedure, similar to TUIP but uses an ultrasound-guided laser incision). A review of nine studies found that TUIP favoured TURP for BPH, on hospitalisation times, complications, post-op bleeding, and complications over 12 months. The only way TURP came out best was that men who had TURP had a maximum flow rate. The mean age in the TUIP studies was 60-70 years, mean prostate size was 30gms or less.

Transurethral Injection of Absolute Ethanol into the enlarged prostate gland (BPH) resulting in coagulative necrosis (chemical-ablation), has been studied in Japan and the US. Also, in initial trials, Botox (botulinum toxin A) injections into the prostate have had some surprisingly good results on benign prostatic hypertrophy (BPH). With some men experiencing a 50% reduction in prostate size.

Transurethral Microwave Thermotherapy (TUMT) is a treatment option for an enlarged prostate (BPH), but not for very enlarged prostates. The urologist inserts a catheter containing an antenna that

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emits microwaves to destroy some of the prostate tissue without damaging the urethra. TUMT can be done as an outpatient treatment. It takes about 1-2 hours to complete. The majority of patients do consider that TUMT works, but 1 in 4 men have only partial relief of symptoms. Night-time urination and dribbling urine may not be alleviated. TUMT may not work immediately and a catheter may have to be fitted initially. Some doctors think that this may be preferable to treatment with alpha-blockers.

Transurethral Radiofrequency Needle Ablation: minimally invasive procedure for BPH. The system delivers a low-level radio-frequency through 2 needles to heat the interior of the prostate, but leaves the nerves, muscles and membranes unharmed. The procedure allows gradual shrinkage of the prostate, which reduces the pressure on the urethra. A catheter may have to be fitted for up to three days. Used extensively in America (US), in the UK it is available privately or on the NHS at St Bartholomew's Hospital, West Smithfield, London. In Oct 2003, NICE issued guidance on the procedure, so it should be available nationwide. Talk to your GP about the risks.

Transurethral Radiofrequency Thermotherapy: because of the higher than normal rate of complications it is not recommended by NICE, there are now better treatments available. It was performed by inserting a catheter into the bladder via the urethra (under local anaesthetic), which delivers radiofrequency to heat the prostate tissue for a period of up to 3 hours.

Transurethral Resection TUR or TURP: Because of the long-term track record of TURP it is considered the Gold Standard of prostate operations for BPH, and is usually carried out under a general anaesthetic, with a hospital stay of 1-2 days. An instrument called a resectoscope containing a light and lens, which is used to view the operation, is passed into the urethra. A loop of wire at the end of the resectoscope is used to shave off sections of the enlarged prostate. There is no surgical incision. This tissue is then flushed from the system. Make sure that you are aware of all the complications

CONVENTIONAL TREATMENTS

including impotence and incontinence risks. For full initial details a leaflet can be downloaded from http://hcd2.bupa.co.uk/fact_sheets/pdfs/turp.pdf

* It is important to talk to your doctor, surgeon or oncologist etc., to find the right treatment for your circumstances, ask questions, demand the kind of care **you** need. New drugs and treatments are being tested all the time, which can greatly improve the chance of leading a normal life. If your GP hasn't heard of them find one who has, it's your life! A new JAMA study (Journal of the American Medical Association) suggests that professionals have broadly contrasting views on treatments, what one recommends another would not. Complementary therapies may also be used in conjunction with treatment to help minimise discomfort. If you cannot find a doctor who is sympathetic to complementary therapy alongside conventional medicine, change your doctor.

See Integrated Medicine / Useful Addresses Page 182.

Chapter 4

Studies Show....

Overcome Prostate Problems

*** A Marker for Prostate Cancer**

It could be only a matter of time before a vaccine (hTRT) for certain cancers, including prostate cancer, is available. Scientists from the University of California and the Pasteur Institute in Paris have made an exciting discovery. They have activated the body's own immune cells (CTL) to target 'over-expressed' 'telomerase', a growth enzyme that is present in most cancer cells, and to zero in on tumour cells. It is in prostate carcinomas at a high rate (84%), but it is absent in benign prostatic hyperplasia and in most somatic tissues. The results so far on cancerous prostate blood cells, in vitro, have been encouraging.

*** Puffer Fish Toxin could Save Lives**

Scientists have discovered a toxin (tetrodotoxin) from a Japanese delicacy 'the puffer fish', which may help to prevent needless deaths from prostate cancer. The toxin turns 'mobile' cells to 'static' which do not move away from the prostate and are unlikely to cause death. Professor Djamgoz, Imperial College London, instigated research with specialists at Liverpool University and Hammersmith hospitals, and it could be the basis of many life saving drugs.

*** A Simple Urine Test for Prostate Cancer**

A breakthrough has been made by Scientists in America, they have found a way of detecting prostate cancer cells, in the earlier stages, using a simple urine test. They have found a gene mutation that occurs in 90% of prostate cancer sufferers, but not in cases of BPH or normal prostate function.

*** Amino Acids and Zinc Inhibits DHT**

The inclusion of a good zinc compound and amino acids (especially glycine, L-alanine and glutamic acid) in the diet has been shown to inhibit the formation and build up of DHT within the prostate, allowing it to function normally in most cases. An extract from a journal published by the Maine Medical Association, USA in 1958 reported that a clinical trial consisting of 45 men (aged between 37 to 75)

* **Broccoli and Green Leafy Vegetables are Good for the Prostate**

Eating vegetables from the *Cruciferae* family of vegetables (cabbage, broccoli, turnip-tops etc.) can protect some men from prostate cancer. Scientists at the Fred Hutchinson Cancer Research Centre in Seattle found that those who ate 3 or more servings of vegetables every day, particularly broccoli and cabbage had a 48% lower risk than those who ate 1 or less servings. It is also concluded that eating a mixed, balanced diet with many different types of vegetables was obviously the best dietary change to make. The findings have been published in 'The Journal of the National Cancer Institute'. **Steaming is by far the best way to cook broccoli.**

* Tomatoes, broccoli and selenium consumed together have a synergistic effect and offer more protection than eating them alone.

* **Fish Oils Benefit an Enlarged Prostate**

Omega 3 (*W*-3) oils, eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) from oily fish, may be effective in the treatment of an enlarged prostate. These oils have also been implicated in lower incidences of cancer. Even though *W*-3 oils are found in flax seed oil in the form of ALA, which converts to *W*-3 within the body, the most benefit is from eating whole flax seeds and not the oil.

*A 3-1 mix of Omega 6 (*W*-6) over Omega 3 (*W*-3) should be taken daily for a healthy body and mind, oils should be refrigerated and used fresh. *Certain polyunsaturated EFAs (linoleic acid-Omega 6), found in seed oils – corn, safflower & sunflower oil etc., stimulate prostate cancer cell growth in vitro. If prostate cancer has been diagnosed cut down or omit *W*-6 rich oils.

* **Let the Sun Shine In**

Researchers have found that staying in the sunshine for at least 15 minutes allows the body to make enough natural vitamin D(3) to protect some people from specific cancers, including prostate cancer. It can also protect against osteoporosis. A daily 20 minute walk in sunshine, will keep you fit and healthy too.

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* **Pomegranate Extract Kills Cancer Cells in vitro**

The juice extracted from pomegranates (*Punica granatum*) and their seeds has been shown to inhibit tumour growth in mouse skin, and also in human prostate cells in vitro. It is also a good extract to take to keep the heart healthy. Pomegranates are very high in polyphenolic compounds, which suggests the juice has more antioxidant capability than red wine or green tea.

* **Cadmium Should be Avoided at all Costs**

Cadmium has been found to increase prostate size probably by affecting DHT levels, it is in tobacco smoke and some enamel coatings on casseroles etc.

* **South Africa Plant Boost Immune System**

Research suggests that the 'South African potato plant' (*Hypoxis rooperi*) aka 'sterretjie' or 'Star Grass' will be the next 'alternative' treatment for BPH, and many other diseases including cancer. The highly concentrated Sterols and Sterolins isolated from the root increase the body's natural resistance to disease.

* **Watch Your Diet**

Researchers have found that a diet high in refined (white) carbohydrate, meat and saturated animal fat, but low in vegetable or fish protein and EFAs, seems to encourage the likelihood of prostate enlargement and even prostate cancer. **The restriction** of deep fried food, sugar, wheat and saturated fatty meat, **in favour of** vegetable based proteins, deep-sea fish, legumes, wholegrains, nuts, organic fruits & vegetables and unrefined EFAs can greatly benefit health.

* Swapping saturated animal fat for monounsaturated fat, as found in olive oil, avocados, nuts and nut butters has been favourably associated with higher survival rates in men with prostate cancer.

* **Full Spectrum Vitamin E is More Protective**

Full spectrum Vitamin E* (alpha & gamma tocopherol) has a protective effect against cancer and is a likely co-factor to lycopene.

*Full spectrum Vitamin E is available from raw, unrefined seeds and

Studies Show ...

nuts (not roasted) and their oils, whole grains, egg yolk, alfalfa etc.) Smokers and cancer sufferers should only take supplements of carotenoids and vitamin E with practitioner guidance.

*** Vitamin C Can Help to Minimise Urinary Tract Infections**

Vitamin C has been shown in many studies to be protective against cancer, studies also suggest that a high dose over a few days can help in cases of urinary tract infections etc. It is available in most fresh fruit and vegetables.

Dr Carl Pfeiffer of the BRAIN Bio Institution in New Jersey, USA has estimated that up to 15 mg of zinc can be lost in just one single ejaculation.

*** Zinc is an Important Mineral for Men**

Where the average menstruating female needs iron in her diet, men need a good supply of zinc. One of its benefits is that it plays a part in reducing the levels of a hormone - prolactin, this in turn inhibits 5-alpha-reductase, allowing testosterone to be utilised without a sizable build-up of DHT. If the diet is rich in cereals and especially soya beans, which contain fibre and phytic acid, the absorption of zinc is impaired, and because zinc is also an iron antagonist, it is best to take supplements of zinc in-between meals, with a light snack and vitamin B₆, a co-factor, which helps to increase its absorption into the system. Natural zinc sources are: eggs, lean beef (eaten in moderation), dark green leafy plants, i.e. raw spinach, cabbage, etc, seafood, seaweeds, oysters (use with caution i.e. Contamination with mercury and PCBs), shiitake mushrooms, etc.

A great deal of research concerning dietary habits and alternative remedies has been carried out in many countries over the last few years. For some reason, these have largely been ignored. If there is even a small chance of improving the quality of our lives, surely it is better to eat healthier and supplement our diets (in moderation), without it having to be scientifically proven beyond a shadow of a doubt before we make these changes!

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*** Know Your Fats**

Excessive saturated animal fat intake, is a major factor in the increase of prostate disorders. However, not all fats are bad, Omega 3 essential fatty acids, found mainly in oily fish, taken along with another amino acid, L-arginine, have been found to inhibit the spread of cancer cells 'in vitro'

NB: Men with herpes infections should not take L-arginine without practitioner guidance.

*** Why Isn't There More Information available?**

Studies, especially in the United States, Sweden and Japan, have shown that there have been significant improvements in prostate disorders, when eating a healthier balanced diet along with the addition of supplements. If the government began to take notice of these results and the medical profession advised all male patients, ideally from puberty, to consume recommended amounts of the different nutrients involved, I am sure that they would be pleasantly surprised by the amount of money and time they could save the NHS in operations, not to mention the huge drugs bill.

*** Whole Foods are Better than Processed Foods**

Many plant-based foods can be beneficial when forming a large part of the daily diet. The University Medical Centre in New Orleans found that countries that have a staple diet of whole foods/grains i.e. rice, maize, quinoa, and beans have lower rates of colon, breast and prostate cancers.

*** Cranberry Juice is Proven for Urinary Tract Infections**

Just half a cup of unsweetened cranberry juice or a teaspoon of cranberry powder (check dosage on label), taken daily, wards off urinary tract infections. Dr A. Soboto from Youngstown State University in Ohio demonstrated that harmful bacteria could be prevented from sticking to healthy cells, the bacteria is then flushed from the system without causing infection. Cranberry juice was seen to outdo low dose drugs by a factor of 10.

***Saw Palmetto's Cousin May Be Used for Prostate Problems**

The Cuban royal palm (*Roystonea regia*) is a member of the same family as Saw palmetto (*Serenoa repens*). Initial tests, to see if a lipid extract is as therapeutic for BPH as Saw palmetto, have proved interesting.

*** Omega 6 Fatty Acids Not Good for Prostate Cancer Sufferers**

The American Health Foundation research scientists suggest that lowering the dietary fat intake, to 15% of calories, would effectively reduce the intake of linoleic acid (omega-6 – corn, safflower, sunflower oil etc.), which stimulates prostate cancer cells in laboratory conditions (in vitro).

***Viagra Helps Prostatectomy Patients Achieve Erection**

Researchers have found that sildenafil (viagra) can help to improve potency in men who have had their prostate removed. But it works better in men who have had the nerve-sparing type of surgery. See your GP for advice.

*** Vitamin E Enhances the Good Effects of Fish Oils**

Vitamin E oil combined with fish oils high in Omega-3 EFAs enhances the good effect of the EFAs and can add to the shelf life of unstable oils.

*** New Research on an Endothelin Receptor Antagonist**

The endothelin axis is a group of endothelins (proteins made by cells that line the blood vessel walls) and their receptors that have been found to have a role in the progression of certain tumours. This new information has led to clinical trials of an endothelin-blocking agent, called an endothelin receptor antagonist, which may act as a pain killer when the cancer has spread to the bones. It is also hoped that it will inhibit the survival of the difficult to destroy cancer cells. Atrasentan (an endothelin receptor antagonist) has been shown to slow the rate of cancer progression in clinical trials in (hormone refractory or androgen independent) prostate cancer that has spread. The safety and efficacy of Atrasentan is also being studied in

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America, in combination with Docetaxel and Prednisone, two drugs used in chemotherapy, for prostate cancer that has spread to the bones.

*** A New Targeting Method for Prostate Cancer Cells**

Researchers in America have demonstrated that monoclonal antibodies can deliver anti-tumour therapies targeted directly to the tumour site, thereby minimising exposure of radiation or chemotherapy to normal cells. The antibodies are directed at the prostate-specific membrane antigen (PSMA). Unlike PSA, PSMA is a protein found on the cell membrane of nearly every prostate cancer cell, but not generally on normal, healthy cells. PSMA increases as the cancer progresses and becomes difficult to treat by hormone therapy. If the trials are successful it may lead to a new minimally-invasive targeting method for prostate cancer cells.

*** The Spanner™ Can Replace the Need for a Catheter**

Initial trials show that a temporary prostatic stent called ‘The Spanner’ (AbbeyMoor Medical, Inc.) is easily inserted and removed, remains anchored in position, and significantly improves the Q_{\max} (maximum flow rate), PVR (postvoid residual urine volume) and IPSS (International Prostate Symptom Score) while preserving volitional voiding and continence. It can be used after medical procedures such as TURP, TUIP, Brachytherapy etc. replacing the need for a temporary catheter.

*** Freezing Destroys Cancer Cells in the Prostate**

Targeted cryoablation focuses only on the cancerous tumour. Freezing gas is injected into the local area, forming ice crystals inside the cancer cells. As the ice melts the cancer cells die, but the healthy cells are unaffected. It is available in the UK with patient referral by a GP. Details at the back of the book, page 184.

*** A Test to Sort the Pussycats from the Tigers without Surgery.**

In June 2004: Scientists at the University of Liverpool, in partnership with the Institute of Cancer Research, announced the discovery of an overactive E2F3 gene in Prostate tumours. The E2F3 gene

produces a protein that controls cell division in healthy cells, but if this gene becomes overactive, too much protein is produced leading to cell proliferation and a tumour. This discovery will allow doctors to measure the aggressiveness of prostate cancer with a simple test, and cut out invasive biopsies that are not required. It will also open up new treatment options.

*** Botox is Not Just for Wrinkles**

Researchers in Rome injected Botox into the prostates of 15 men with severe BPH. As a control, 15 men were injected with a saline solution, also directly into the prostate. After two months the botox had considerably reduced the prostates from severe to a low moderate score. PSA levels also decreased, produced by less pressure on the ducts that secrete PSA. The researchers concluded that it is a safe, effective and well tolerated treatment.

NB: It should be noted that botox is essentially a neurotoxin and not enough is known about long-term effects.

***Vitamin D Lowers PSA levels**

Researchers in Canada investigated the effect of vitamin D (cholecalciferol), a biochemical precursor of calcitriol, on PSA levels. Fifteen patients, whose local treatments for prostate cancer had failed, were given 2,000 IU (50 mcg) of cholecalciferol daily and monitored prospectively every 2-3 months. In 9 patients, PSA levels decreased or remained unchanged after taking cholecalciferol. This was sustained for as long as 21 months. It was concluded that more studies were needed to confirm the therapeutic benefit of vitamin D in prostate cancer. Practitioner guidance would be needed for taking vitamin D at this high therapeutic dosage level.

***HRT Patch for Palliative Care?**

A pilot study in 2003 suggested that HRT patches to treat men with advanced prostate cancer improved the quality of life of the participants. Larger, randomised, controlled clinical trials are needed before the treatment is sanctioned.

Chapter 5

Complementary Treatments

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ACUPRESSURE / ACUPUNCTURE

The following points can be stimulated by slight pressure to the area, with fingers, an acupressure machine or a small tuning fork to send vibrations along the points, which stimulate the body's meridians. The patient and the acupressurist should imagine blue and gold healing energies entering the body at each point for maximum effectiveness. No cure is claimed but symptoms have been reduced. Moxibustion may also be suitable, ask your practitioner.

Only a qualified acupuncturist should attempt acupuncture with needles.

1. EAR POINT - on the small fold of skin above the ear opening (attached) close to the cheek bone - apply pressure with thumb and forefinger
2. KNEE - behind the knee in the middle of crease at the back of the leg.
3. ANKLE/HEEL - a point lying halfway between the inner anklebone and the top most part of the heel (in the centre of a slight hollow).
4. ANKLE - a point that is approx. 10cms up from (3) the inner ankle point (see 3 above).
5. ANKLE - a point that is approx 5cms above the inner anklebone.
6. SPINE - two points approx. 7.5cms apart on the top of each buttock either side of the spine (near the base).
7. SPINE - two points approx. 7cms either side of the spine just below the waist area of the back.
8. PUBIC BONE - one point on the edge of the pubic bone in the centre, just under the stomach region.
9. PUBIC BONE - one point approx. 4cm up (still in centre) from point No 8.

Some people may find that acupuncture helps to alleviate the symptoms. This must be carried out by a qualified practitioner, the Yellow Pages will usually give you names of the ones in your area, or you

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can write to the Institute of Complementary Medicine or the Council for Acupuncture, addresses are at the back of the book. Page 181.

AROMATHERAPY & MASSAGE

The use of essential oils and massage to obtain relief from symptoms. See an aromatherapist for guidance, oils can be quite powerful.

- ❑ Juniper Berry oil (*Juniperous communis*) - a mild diuretic (Caution: kidney disease).
- ❑ Tea tree oil (*Melaleuca alternifolia*) - antiseptic, anti-inflammatory and immune stimulating.
- ❑ Cypress oil (*Cupressus sempervirens*) - good for circulation and mild diuretic

2 drops of each oil should be added to 30ml of sweet almond oil (*Prunus amygdalus var dulcis*), *mix well and massage into lower back and groin areas, avoiding sensitive skin. A daily massage of 10 minutes with a few drops of the above oil blend is said to be beneficial.

*Store in airtight dark glass bottle, use within 3 months.

AYURVEDIC HERBAL MEDICINE

Ayurveda is a way of balancing the body with natural herbs and therapies. It has been used for centuries in India and takes into account the three fundamental principles of nature - Vata, Pitta and Kapha, which govern the health of the body and the mind.

CHINESE HERBAL MEDICINE

A qualified practitioner will provide a specific formula to treat your individual condition. The principle of Chinese medicine is to assist the vital energy within the body and to treat on a holistic basis.

Gentiana - Panax Ginseng - Dianthus Superbus

These are some of the herbs that can be used, but each prescription is made for the individual, taking account of the Yin and Yang element, self treatment should be avoided. PC-HOPE is gaining recognition in most 'camps' as a Chinese herbal treatment for prostate cancer in USA.

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EMOTIONAL FREEDOM TECHNIQUE

Distressing memories can cause a disruption in the body's normal electrical system. EFT works by acknowledging your problem, accepting yourself with the problem and then letting it go; all this while tapping 5-7 times on a particular point to heal the electrical disruption.

First repeat a phrase relevant to yourself, some are listed below, but it can be anything from - I hate spiders to my mother never loved me, i.e. whatever happened that caused a problem in your life. First: say your phrase 3 times while tapping the karate chop (KC) point on the edge of your right or left hand, about 1cm below the bottom of your little finger, with all 4 fingers of your other hand. Next, do the listed tap points 5-7 times with the tips of your index and middle finger of your other hand, while saying the phrase once each time. Start tapping: between eyebrows (EB); on outer side of each eye (SE); under each eye at very top of cheek bones (UE); under nose (UN); on chin - under bottom lip (Ch); 2cm below collarbone, in middle (CB); Under arm, 9cm below armpit (UA); (on the same hand you tapped your KC point) on outside edge of thumb at base of the nail to the side facing your body (Th); Index finger - on side facing thumb, at base of fingernail (IF); side of middle finger (the side closest to thumb) at base of fingernail (MF); on ring finger (RF), same as MF, on inside of little finger (BF), same as MF; the last point is the KC point where you tapped 3 times initially.

For the next part, find your gamut point, which is on back of hand at midpoint, 1cm below base of little finger and ring finger. Next, you must do the 9 actions while continuously tapping the gamut point with 3 fingertips of your other hand and saying the phrase for each action. 1. Eyes closed. 2. Eyes open. 3. Eyes hard down to the right. 4. Eyes hard down to the left. 5. Roll eyes round in a wide circle to the right. 6. Roll eyes round in a wide circle to the left. 7. Hum 2 lines of a song. 8. Count to five. 9. Hum 2 lines of a song. Remember to say phrase and tap, while doing all 9 points. Then repeat all the tap points one more time, from EB right through to KC as listed above.

Complementary Treatments

Listed below, are some causes of stress later in life: Keep repeating only one phrase that is relevant to yourself at each tapping place - EB to KC.

- *Even though I'm not happy, I deeply and completely accept myself.**
- *Even though I work too hard, I deeply & completely accept myself.**
- *Even though I feel stressed, I deeply and completely accept myself.**
- *Even though I am angry with _____? I deeply and completely accept myself.**
- **Even though I have these hunger pangs. I deeply and completely accept myself.**

Think of some points relevant to your situation.

- * Even though I have 'this illness' (state name of illness). I deeply and completely accept myself.**
- * Even though I have this pain in my ---- (state where pain is). I deeply and completely accept myself.**
- * Even though my prostate is swollen, I deeply and completely accept myself.**
- * Even though I cannot sleep at night. I deeply and completely accept myself.**
- * Even though I have cancer. I deeply and completely accept myself.**

Emotional Freedom Technique (EFT) has some remarkable effects on stress and stress related issues. It really does work.

See: www.emofree.com for free details and free download book.

EXERCISE

Gentle, stimulating exercise is always beneficial, being a 'couch potato' has never helped anyone.

Walking: nothing too strenuous at first, take time to build up your pace, and walk in daylight where it is safe. Good country air and good companionship will also help you to relax.

Stretching exercises: gentle stretches involving all areas of the body can get those muscles working again, it is a good start. Workouts need not be strenuous, ask at your local gym, they could set a

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non-strenuous programme for you to begin with.

Swimming: another good exercise which can be non-strenuous, check with local swimming baths, even if you cannot swim, there are usually classes for 'water aerobics' and they are nothing like the normal aerobics, the water supports your weight so there is less stress on joints.

HOMEOPATHY

This is an holistic form of medicine that treats like with like. The treatments may be animal, vegetable or mineral in origin, but they are all diluted to such an extent that harmful side effects are not possible, even from the most toxic sources. A Homeopath may also be able to rid the body of excess levels of cadmium. There are over 2000 traditional remedies plus mineral tissue salts.

KINESIOLOGY

This is a manipulation technique, muscles are tested to see if an imbalance, or impaired function, exists within the body. This may be of help to some people. There is also nutritional support given within the treatment. Kinesiology can also test for allergies.

MAGNETIC FIELD THERAPY

This is gaining more and more converts since it is claimed that nearly 75% of BPH patients have symptoms relieved. It must be carried out by a qualified practitioner and involves placing a South Pole applicator into the rectal area and a North Pole applicator over the lower abdomen. A high intensity magnetic field is generated approximately 10htz.

NATUROPATHY

Naturopaths take into account the 'Triad of Health' a perfect balance between the body's structure, the biochemistry and the emotions. Muscle tone, deportment, massage, good nutrition, individual stress and negative feelings are all part of the holistic treatment. Good results have been reported on most types of prostate problems.

OSTEOPATHY

The Osteopath will be able to manipulate and massage the prostate to achieve relief, he should also explain how to do a cold rectal irrigation, which may help. If you have BPH, you may be able to obtain a referral from your own GP, if he thinks that your case warrants it. If your doctor refuses, and you are not happy with the reason, seek a second opinion.

PELVIC FLOOR (KEGEL) EXERCISES

Usually classed as a woman's exercise, many practitioners now regard this exercise as of benefit to the prostate. Pelvic Floor Muscles are layers of muscle at the base of your pelvis that stretch from side to side like a hammock and attach to the pubic bone and the coccyx (tail bone). The urethra and the rectum pass through this 'hammock' of muscles. They support the bladder and the bowel and play an important role in bladder and bowel control. Pelvic floor muscles can be weakened by continual straining due to constipation, frequent coughing / asthma, surgical procedures to the area. Being overweight and lack of fitness can also contribute.

To find your pelvic floor muscles:

1. Sit on the toilet with your legs relaxed. Tighten the muscles around the anus (as if trying to stop passing wind) without moving any muscles in your leg or tummy.
2. Next, pass urine, but in mid stream try to stop the flow. Remember these muscles and continue to exercise them as the urine flow stops. Do this just to find the right muscles. If you have found the correct muscles the base of the penis should either move slightly upwards or tighten around the base when you do the exercises. You should not stop the urine flow often, but just tighten these muscles in a count of 5 whenever you think about it i.e. while driving a car, walking or doing the washing up etc.
3. Now you have found the muscles, start exercising them. Tighten the muscles around your anus and along up towards your penis, feel them lifting up inside. Imagine a point inside

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your tummy and try lifting these muscles up to that point. Feel the muscles tighten around the base of your penis and the base rise slightly towards your abdomen, using your muscles.

4. Start in a count of 5, 1-2-3-4-5, with every number pull those muscles up one more notch. When you get to 5 wait for a count of 5, 1-2-3-4-5 then release them one notch at a time to a count of 5, 1-2-3-4-5. Do this at least 5 times per session.
5. Do these exercises every day for at least 10 sessions of 5.

Within 6 months, your pelvic floor muscles will have tightened and your sex life will have improved too - it gives greater sensation when you orgasm. See your practitioner for full instructions.

<p>Dr Dorey a specialist continence physiotherapist at Taunton's Somerset Nuffield Hospital and North Devon District Hospital, and a visiting research fellow at the University of West England, Bristol, found that when Viagra was compared with Pelvic Floor Exercises in 55 men with erectile dysfunction, for a period of 6 months, amazingly the results were the same.</p>

REFLEX MASSAGE

A practitioner should be consulted for the best results, it is said to relieve symptoms, the areas are usually as follows:

1. On each leg on the outside thigh a third of the way up between the knee and the hip. At no time should the massage cause pain.
2. Massaging the point at the base of the spine is said to reduce congestion. With gentle but firm pressure, do not press too hard.

REFLEXOLOGY

Pressure points on the soles of the feet are stimulated to allow the body's natural healing capabilities to work un-impaired. There have been good results reported, a qualified practitioner should be consulted.

Complementary Treatments

SITZ BATH / SHOWERS

Hot and cold sitz baths or hot and cold showers to the area are said to alleviate some of the symptoms by increasing circulation.

These should not be carried out if you have a history of heart disease or diabetes without your GP's knowledge and consent.

If the above seems a little daunting you can use a sponge or soft cloth: sponge behind the scrotum with alternative hot (for 60 seconds) & cold (for 30 seconds) water, ending with cold water. This is said to help with the fluid congestion of the prostate (Prostatosis), and should be carried out night and morning, until symptoms are relieved.

STIMULATING URINE FLOW WITH MASSAGE

To stimulate urine flow, apply a medium-hot hot water bottle to your lower abdomen (below your belly button and above the pubic bone). This is where the bladder lies. The heat relaxes muscles and aids urination. You can also massage lightly or place light pressure over your bladder to stimulate urination. NB: you must see your doctor initially to diagnose and advise on the problem.

YOGA

Yoga and yoga type therapies can be very helpful in alleviating discomfort. ' The Shoulder Stand ' and ' The Plough ' are both positions that are recommended but you should seek the advice of a qualified practitioner before you attempt them at home.

A list of contact numbers (UK) for selected therapies t the back of the book. Or put the selected therapy in the search box of your favourite search engine (www.google.co.uk) to find suitable web-sites.

Chapter 6

NATURAL REMEDIES FROM AROUND THE WORLD

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Amino Acids: Glycine, L-Alanine and Glutamic acid, many studies have shown a reduction in symptoms of BPH, a high percentage of men have had reduced night-time frequency of urination. All three amino acids are present in complete protein foods. Most amino acid supplements are extracts of soya beans. Dosage approx. 100 - 200mg of each, per day.

Apple Juice, fresh pressed with pips, has been used for hundreds of years, dating back to Hippocrates. It is an excellent de-toxifyer. 1-2 glasses per day only.

Barley Green (baby barley leaf) is reputed to be the most nutritious plant available, studies show that the extract is a potent prostate cancer fighter in-vitro.

Bee Pollen has long been associated with low incidences of prostate problems. Asian, third world native communities eat raw pollen and honey comb direct from the hive. Caution: products from the beehive may affect people prone to allergies.

Beetroot and its peel are packed with betalains, which are powerful anti-carcinoma antioxidants that help to sustain a healthy immune system. Beetroot should be eaten fresh and either juiced (along with the tops and peel), roasted whole or matchsticked and lightly stir-simmered. The seeds can be added to a sprouted seed mixture.

NB: Stored beetroot loses some of its beneficial constituents.

Borage Oil aka Starflower oil contains a high percentage of GLA (Gamma Linolenic Acid). Studies suggest that it can help the body to fight cancer and can be used in conjunction with certain cancer treatments. It is advised that cancer patients have medical supervision whilst taking starflower oil. CAUTION: Epilepsy

B-Sitosterol, a plant fat, which inhibits the growth of prostate cancer cells in-vitro. It is now available included in many prostate supple-

NATURAL REMEDIES FROM AROUND THE WORLD

ment formulae.

Cat's Claw (*Uncaria tomentosa*) strong anti-oxidant and immune stimulating. 20gms of bark simmered for 30 mins in 1 litre of filtered water, and taken throughout day. It is recommended that this should be followed for no longer than 3 months at a time. Initially slight diarrhoea, and nausea etc. may be experienced, reduce the dose for the first few days. Also available in tablet form.

Cernilton is a flower pollen extract and has been used as a treatment for prostatitis and prostatodynia, in Europe, for about 30 years. Several clinical studies have shown that it can alleviate symptoms due to infection and/or inflammation. Cernilton tablets are available from health food shops. Caution if prone to allergies. Dosage: See packet.

Cranberries, Blueberries etc. (fruit from the bilberry family - *Vaccinium spp.*) contain compounds that block the action of bacteria, which cling to the lining of the urinary tract wall. They are a good preventative of urinary infections, and also contain valuable phyto-nutrients and anthocyanidins. 50ml twice per day.

Dandelion (*Taraxacum officinale*) this common garden weed is a very valuable medicinal plant, all parts can be used. It is a liver tonic and a diuretic, eaten extensively in areas of Europe, the young leaves can be eaten fresh, or dried as a tea; the roots can be grated onto salads or dried, chopped and roasted as a coffee substitute. They are safe to use as a food, but be careful when gathering, make sure they have not been treated with weed-killer and avoid if growing near a busy road. Young plants have the best taste, older leaves/plants can be bitter.

Echinacea is an immune enhancing herb used particularly in the fight against viral infections. For dosage see container. Caution: Auto-immune disease.

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EFA (Essential Fatty Acids) are needed in everyone's diet, but the symptoms of EFA deficiency in men can be similar to the symptoms of BPH. For maintaining good health, a 3:1 ratio of W-6 over W-3 is suggested (for example: 15ml omega 6 to 5ml of omega 3), this can be modified to suit specific ailments. Oils should be unrefined, refrigerated, and used within 4 - 6 weeks (see label). It is suggested that, if cancer has been diagnosed, an optimum fat intake (with an increased omega-3 ratio) is 15% of total calories. Supplements of EPA, DHA (W-3), and Vitamin E can be added. **Only mono-unsaturated, oleic acid, n-9 oils (i.e. olive oil) should be used for heating or cooking.** Also, in cases of illness, practitioner guidance is advised.

ALA available from flaxseed oils should not be used. However, whole flaxseeds do offer some benefit by being included into a healthy balanced diet.

Evening primrose oil, starflower (borage) oil, etc. provide GLA: Gamma-linolenic acid, needed for many bodily processes, but may not be needed with adequate daily supplies of W-6 (linoleic acid) oils. CAUTION: Epilepsy.

Ellagic Acid, found in red raspberries and strawberries, is causing quite a stir in the scientific community, it has high cancer suppressing properties in-vitro.

Essiac (aka Flor*Essence) a herbal preparation used with good results for a wide range of problems. It is a blend of 8 herbs, a recipe that a tribe of Canadian Indians used for cancer. It has been improved and refined over the years. Many people have found it a very good de-toxifyer and healer. Can be used safely with most medications and supplements. Dosage: See container.

Flax Seeds not only contain W-3 'ALA' but also lignans, phytochemicals reported to protect against degenerative diseases.

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Garlic and Onions have long been known as an effective antiseptic. Both contain selenium and vitamin C, for good effect both should be eaten daily. In supplement form the aged garlic seems to be the most potent.

Ginkgo biloba helps circulation, and is used in some cases of sexual dysfunction.

Ginseng has been used in Asia for thousands of years; it is an adaptagen (it helps the body cope with stress) and is suitable for a wide range of ailments. Select good quality ginseng, old, wild roots are prized but commercially grown roots are acceptable, with at least 3% ginsenoside content for them to be beneficial. **Panax Ginseng** is the type most beneficial for prostate problems. Dosage on container. (All ginseng is unsuitable for people with high blood pressure). Ginseng lowers blood-glucose levels, so it should not be used by diabetics without medical advice.)

Goosegrass also known as ‘cleavers’ (*Galium aparine*). The dried plant may be drunk as a tea and the roasted seeds make an excellent coffee substitute. It is usually used in the treatment of cystitis and painful urination.

Green Tea (picked and used within 1 year and kept in a refrigerator) contains many health giving benefits, and is reported to fight cancer. It should be steeped in hot water for 30 minutes and drunk warm or cold, not hot.

Gymnema silvestre is a herbal extract from India; many Indian Herbalists (Ayurvedic) have used this in a remedy for the treatment of prostatitis.

Hazelnuts from selected trees contain small amounts of paclitaxel a chemical that fights cancer and is found in yew trees. Eating them would probably not make a difference, but they taste good and

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contain a good proportion of EFAs

Homeopathic Remedies: Sabal (from saw palmetto) - For an enlarged prostate with difficult and painful urination. **Baryta** - For frequent urge to urinate, stream diminishing, and for men who suffer from impotence. **Thuja** - For a burning sensation at the neck of bladder along with urge to urinate.

Hydrangea Root (*Hydrangea arborescens*), has a long history of treating an inflamed or enlarged prostate, and especially painful urination.

Nettle (*Urtica dioica*), New research confirms that it is a valuable herb for prostate problems. It is a mild diuretic and can be eaten par-cooked, dried (tea) and roots, aka bazoton-r or *Radix urticae*.

Olive Leaf Extract is reported to have ‘anti-biotic’ properties, suitable for most infections. Dosage: 2-4 capsules per day or as stated on packet.

Olive Oil and Herbal Blend. Researchers at Columbia University NY found that a commercial blend of Olive oil, Chinese, European and Japanese herbs, turmeric, green tea, ginger and a herb only found in India could reduce the chances of developing prostate cancer by 80%. It is already used as an alternative treatment for arthritis, because of its potent anti-inflammatory action.

The results, published in the medical journal Nutrition and Cancer, seem to confirm the anecdotal evidence that the herbal mixture is a good contender in the fight against prostate cancer.

Parsley is a very well known garden herb in the UK, it is also the Dutch remedy for prostate problems, but is suitable for most urinary tract disorders. It is the seeds that have the most potent constituents, they should not be taken in large amounts, or by anyone suffering a kidney/bladder disease.

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PC-HOPE - is a blend of ten different herbal extracts, including chrysanthemum, licorice, sterolin, quercetin and saw palmetto. It replaces the PC-SPES that was an alternative treatment for prostate problems for a number of years. Unfortunately, it was found that PC-SPES was contaminated with prescription drugs and is no longer manufactured. PC-HOPE is a similar blend.

Studies found some benefits with the original formula, but more trials need to be completed.

- Lowers PSA levels
- Balances hormones
- Shrinks prostate tumours in some cases and reduces pain.

Proanthocyanidins (Oligomeric) or OPCs are extracted from grape seeds and skin, pine bark and from other sources, they are powerful anti-oxidants. They have been used in France and America for a wide range of diseases, including: eye problems, varicose veins, circulation problems, arthritis, inflammation and prostate disorders. Dosage with 85%+ proanthocyanidin is 50-200mgs per day.

Pumpkin Seeds, European studies have concluded that to eat a daily serving can help to alleviate BPH symptoms, and will probably delay the onset of more severe problems if introduced into the diet early enough. The high zinc, EFA and nutrient content (including B-sitosterol), of raw seeds is the reason why. Only seeds from a health food shop should be used, the seeds from a culinary pumpkin do not have the same properties. 25g serving raw seeds (unsalted) per day.

Pygeum africanum is an evergreen tree native to Africa. The powdered bark has, and is being used today for urinary problems. It has been shown that Pygeum can help with BPH or prostatitis and with sexual dysfunction. A high dose can cause side effects in susceptible people (sickness/diarrhoea). Some countries restrict use. The dosage of the lipophilic extract of *Pygeum africanum* standardized to contain 14% triterpenes / beta-sitosterol and 0.5% n-docosanol. The

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crude herb is not used, so should not be picked for use. Dosage: See Packet.

Red Chilies have been found to offer some protection against certain types of cancer. Stir-simmer broccoli florets, diced red chilies and tomatoes together in a little olive oil and a splash of water. Serve with a sprinkle of fresh chopped herbs and a pinch of cinnamon. Hot!

Saw-Palmetto was used by the American Indians for prevention and treatment of genito-urinary tract problems. The palm-like trees are indigenous to South-eastern USA, the purple berries contain the hormone-like compounds. Many studies have shown that regular use helps to alleviate BPH. Saw palmetto extracts 4:1 or higher, containing standardised 85%+ phytosterols (B-sitosterol), fatty acids, which inhibit 5-alpha-reductase, a contributing factor of BPH. Results can take up to 3 months for symptoms to subside. Dosage: see packs (at least 160mg X 2 per day). NB: Saw palmetto powder in a supplement may indicate a lower quality product.

Sea Holly (*Eringyum maritimum*) has been used for most genito-urinary irritations and infections, of particular benefit where inflammation is present. The fresh or dried root can be made into a tea.

Selenium - New research has shown that selenium is needed for a healthy prostate. In a recent trial, men taking 159 mcg per day had three times less risk of prostate problems than men taking 86 mcg a day. It is estimated that most men average a daily intake of just 30 mcg of selenium daily and are lacking in the optimum level of this vital mineral. NB: magnesium is also lacking in the Western diet.

Small Flowered Willow Herb (*Epilobium parviflorum*) is used throughout Europe as a medicinal Herb for prostate related problems. One cup morning and evening of the tea has good results.

Tomatoes contain a type of carotene called lycopene; according to recent research, this is a very good anti-oxidant. To fully maximise

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its absorption into the body the tomatoes should be lightly fried in olive oil. Research also shows that lycopene is especially beneficial for the healthy functioning of the prostate gland. Tomatoes should be eaten at least five times per week, if not every day, both raw and lightly cooked in olive oil. Tomato sauce, spaghetti sauce and tomato concentrate or puree is also beneficial. Vitamin E is a good co factor to lycopene. *Eating broccoli and tomatoes together give even more protection for the prostate than eating both alone.

White Tea (picked and used within 1 year and kept in a refrigerator) contains many health giving benefits, and is reported to fight cancer. It should be steeped in hot water for 30 minutes and drunk warm or cold, not hot.

Yogurt (Plain, Live and Unsweetened) is a 'probiotic' and is part of the diet in nearly all Middle-Eastern countries. It is said to help most urinary tract and yeast infections. Skimmed milk, goats or ewe's yogurt is available from most supermarkets. 2 tablespoons, 3 X per day added to diet is beneficial. **NB:** Always take a good probiotic after taking antibiotics. Some cases of recurring prostatitis have been avoided by loading the system with a strong probiotic for at least three months after taking prescribed antibiotics.

* Unless otherwise stated or prescribed by a practitioner, the usual dosage for each dried herb is approx. 1 teaspoon of herb to a cup of hot water, steep for a few minutes, strain and serve. Do not exceed 6 cups per day without the advice of a practitioner. Remedies should be taken on a regular basis, the speed of results (up to 4 months) can differ with each individual person.

The herbs in this chapter are relatively safe to use, but it is unwise to exceed the stated dose of any herbal supplement. If any unpleasant side effects, dilute or discontinue use. Likewise, do not take many 'high strength' herbal remedies all at once. People on medication or have a serious medical condition should check with their doctor, Herbalist or Homeopath before using any supplement or herb.

Chapter 7

HERBAL INFUSIONS JUICES AND DRINKS

HERBAL INFUSIONS JUICES AND DRINKS

I cannot begin this chapter on drinks without mentioning the many virtues of pure filtered water. The body is made-up of between 70% and 80% of water, but where does it get its top-ups from? The average person today, in the Western world, will consume just 2 glasses of water per day, if they are lucky. They usually prefer to drink tea, coffee, fizzy drinks, chocolate, juices and alcohol, most of these have a diuretic effect on the body, so depleting the body's valuable water supply. Alcohol has been shown to assist excretion of zinc and its co-factors and if taken in excess can contribute to a rise in the prolactin levels and so encourage an enlargement of the prostate.

The average healthy person should be drinking at least 3 litres of filtered or spring water per day, in addition to juices, to maintain the body's reservoir. **Try not to drink a lot of fluid after 7pm, it will all add to night-time urination.** Fluid intake should not be increased all at once, because of the strain to the kidneys, and should be gradually augmented over a period of 3 months. This is also advisable with any dietary change, i.e. if you cut out tea and coffee completely, over a 24-hour period you may experience some very nasty withdrawal symptoms, ease your body into any new health regime. Always follow your GP's advice, in cases of serious kidney/bladder disease he should advise on how much and of which fluids you should be taking.

Herb Tea: mix together, 50gms dried dandelion roots, 30gms dried stinging nettle leaves and roots, 20gms dried couch grass, 20gms chamomile flowers, 20gms lemon balm leaves, and 20gms dried cleavers. Store in an air-tight tea caddy. To make an infusion put 1 teaspoon in a heat-proof jug/pot and pour on 250ml boiling water, steep for 5 minutes, strain and drink. A little honey, concentrated apple juice or powdered stevia leaf can be added for sweetness. Fruit juice gives a pleasant, 'interesting' taste. The above tea will have a cleansing and diuretic effect; do not drink in large quantity if you have a serious kidney complaint. Do not exceed 6 cups per day. **NB:** All the above herbs will be available from a good health food shop

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or Herbalist.

Sunshine Juice Drink: mix together equal parts fresh pressed carrot and orange juices; add 5ml (or to taste) parsley leaf juice for every 250ml of juice. Serve chilled. Packed full of vitamins and valuable anti-oxidants.

Berry Swush: liquidise (or juice in a juicer) a handful of fresh (preferably organic or home grown) berries of your choice, i.e. black grapes, red

currants, black currants, bilberries, raspberries, strawberries etc. add filtered water to taste and either stevia or apple concentrate if a sweetener is needed.

With all the *pesticides & fungicides contaminating the food chain, it is advisable to buy fresh, organic, unadulterated fruit & vegetables when planning a healthy diet. (***These chemicals have been directly linked to health problems. Remember supermarkets who are making £millions from stocking intensively farmed produce are unlikely to change unless we ALL demand it).**

Blackberry, Strawberry and Bilberry: wash berries under the tap, and juice in juicer. Use equal quantities or to taste. Top up with spring water.

Watermelon, Strawberry and Cranberry: wash well under the tap, scrub the piece of watermelon skin. Juice by cutting watermelon into chunks (including skins) add strawberries and cranberries and juice in juicer.

Zinc Zester: 1 guava, 100g raspberries, 1 tomato and 50g watercress, wash well and juice with water, add sprinkle ground pumpkin seeds. Serve chilled.

Guardez: 100g black currants, 1-2 tomatoes, 150g black grapes (with seeds), 2 carrots, 1 guava, 1 small raw beetroot. Wash fruit well and juice add water to taste.

Herbal Infusions, Juices and Drinks

Ginger Zinger: small piece of root ginger, 1 orange, 1 carrot, 2 thick slices of pineapple, a few chopped parsley leaves. Juice, dilute to taste & serve.

Fibre Glider: 1 banana, 50ml Greek 'live' yogurt, 1 tablespoon ground wheatgerm, 50-100ml goats, soya or rice milk, put all ingredients into a blender, blend and serve chilled. Add water or ice to taste.

Juice for Free: Pick your own ingredients, but make sure they have not been sprayed with chemicals and that they are not near a busy road. Blackberries, rosehips, dandelions (whole plant), elderberries and nasturtium leaves, pick & mix to taste. **CAUTION:** Do not use any unidentified berries in the hedgerows they can be dangerous, even fatal.

<p>Add pomegranate juice to any of the recipes, it tastes great and is very healthy for the prostate too</p>

Wheatgrass Whizz: Add organic blackcurrant juice and a little lime juice to a cup of fresh wheatgrass juice. It is an excellent detoxifier.

Mix & match your favourite fruit and vegetables (dilute with water if necessary). If you like ginger, add a fresh piece to your own recipes, it is a good anti-inflammatory. Try adding some turmeric to the recipe, even if it's only a good pinch. It will help to boost the immune system. Garlic and onions are a valuable addition to vegetable juices IF you like their strong taste. Raw beetroot, root and tops, has a strong taste but can be mixed with other juices; they make a valuable addition to the 'prostate diet'. Watercress is also a must, juice or eat raw in salads (only buy from a reputable source). Wheat grass juice is also very beneficial.

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JUICERS ARE READILY AVAILABLE FROM MOST LARGE DEPARTMENT STORES, AND HEALTH FOOD SHOPS, USUALLY THE DEARER IMPORTED (USA) MACHINES ARE THE BEST INVESTMENT, ESPECIALLY THE ONES THAT WILL JUICE WHEATGRASS.

Initially have no more than 2 wine glasses per day (remember you can dilute with water). Do not exceed 4 wine glasses of pure juice per day.

Green tea contains catechins, which help to cut the risk of prostate and other cancers. It is delicious served chilled with pineapple juice, but you can add it to any of the juices listed.

Chapter 8

Welcome Food List & Avoidance Food List

WELCOME LIST OF FOODS

EAT FRESH/ORGANIC UNPROCESSED FOODS: All fresh colourful fruit and juice; sprouting seeds: broccoli, beans, sunflower seeds (W-6), plus grains etc; wheat/rye grass juice, barley green; good quality seaweeds: (agar- for jellies and arrowroot for thickening), nori flakes, arame, hijiki, kombu and wakame, kelp (all seaweeds); ground celery seeds (in moderation); all Vegetables: avocado, greens, beans, etc. (raw, lightly steamed or juiced), salads, yams, etc.

NB: When eating dried fruit always remember to choose unsulphured. Try to eat foods and to choose household products that are natural, nature identical rarely ever is!

UNPROCESSED WHOLE GRAINS: brown rice, millet, high fibre corn pasta, quinoa, amaranth (leaves, seeds or popcorn), rye or corn bread, kamut (ancient wheat), spelt, oats, barley, buckwheat, brown wheatgerm bread, granary bread, cous cous (not strictly a whole-grain, but semolina wheat), organic muesli, etc.

FRESH, RAW SEEDS & NUTS: pumpkin seeds, sesame seeds, linseeds, (can be ground or crushed and added to foods or used as a thickener), brazil nuts (just 2 supply a good amount of selenium), almonds, hazelnuts etc. **All in moderation.**

NUTRIENTS: lecithin granules, wheatgerm (CAUTION: wheat allergy), amino acids, 'barley green', crushed linseeds etc. sprinkled onto foods, cereals, salads.

PULSES: peas, beans, lentils, chick peas etc.

PROTEIN: quorn, vegetable protein, tofu, silken tofu - can be used in sauces, dips etc., fish (small, ocean reef fish may be better than shallow shore fish or intensive farmed fish), skate wings, mackerel, pilchards etc. (Caution: shellfish, swordfish and tuna may have heavy metal contamination). Fresh, organic lean meat: rabbit, pheasant, game, venison, ostrich are low cholesterol meats. Eat organic, free-range chicken and eggs. Low-fat, live yogurt, (no added sugar

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or fruit - it is better to add your own fresh fruit). It is best to consume less 'cows' products. Vegan, vegetarian and demi-vegetarian (no red meat) diets are invariably the healthiest. Always chew food well.

UNREFINED OILS: (cold pressed) olive oil, sesame oil, hemp seed oil. Make sure that sunflower, safflower oils, seed oils and nut oils are not processed or heated to high temperatures.

DRINKS: filtered water (choose a filter that does not filter out minerals), mineral water, or spring water. Herb teas, rooibos(ch) tea, oolong tea, green tea, yerba mate, dandelion and chicory coffee, Barley cup, Caro, fresh vegetable juices, fresh, organic fruit juice, organic rice/oat milk. (Try not to drink in excess after 7pm). The jury seems to be still out on soya, some say it's good for you others say avoid it. It is probably a case of everything in moderation. A small amount of soya milk or soya products is probably the best option.

SEASONINGS: fresh lemon or lime juice, apple cider (balsamic) vinegar, fresh herbs, spices, sesame seeds, kelp powder, stevia leaf, garlic, ginger etc.

NATURAL SWEETENERS: honey, stevia leaf, xylitol - in moderation, molasses, concentrated apple juice, brown rice syrup, etc.
* Pureed dried prunes and dried apricots (can be used in fruitcakes replacing most fat and sugar).

It is best to aim for a healthy mix of nutrients with moderation in all things.

Make sure that your food is cooked and served as naturally as possible. Lightly stir-simmering or steaming is a more healthy way to cook your food.

AVOIDANCE LIST

All the following items have been reported as 21st Century health hazards. Although tests are still being carried out on some of them, there is no compromise if we want optimum health for ourselves and our children.

Alcohol

Take your doctor's advice on alcohol. Although, It is important to avoid alcohol in all cases where serious prostate problems are evident. If you are worried about your drinking, cut down or avoid alcohol altogether. Try to choose alcohol rich in bioflavonoids such as red wine, port, dark sherry or aged whiskey. It is best to limit these to under 2 units.

Aluminium-based Products

Antacids and baking powders that contain aluminium should be avoided.

Avoid cooking in aluminium pots, dishes and foil. Cover food first with greaseproof or baking paper before covering with foil etc. Aluminium has been implicated in causing memory loss and may contribute towards Alzheimer's disease.

Artificial Colours, Flavourings / Enhancers, Preservatives.

Everyday colours in sweets, processed foods and food coatings can very seriously damage your health. Unfortunately, most on the colourings in processed food are to make it 'look' fresh and appetising. Flavourings and flavour enhancers also serve the same purpose. But our bodies have to cope in breaking these substances down and expelling them from the body. No one knows the full extent of harm that these chemicals do when they meet up in the bloodstream. Why not just eat fresh food instead? Why risk your health to help the processed food industry make more money by feeding us denatured nutrients and artificial additives.

Artificial Sweeteners and Sweeteners

If you do nothing else, avoid artificial sweeteners at all costs. Too much refined sugar is bad, but artificial sweeteners can be worse.

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*Acesulfame-K is available in soft drinks, sugar-free baked goods, chewing gum and selected desserts. The breakdown product, acetooacetamide, has been shown to affect thyroid function in rabbits, dogs and rats. It is best to avoid this product if possible.

*Aspartame (NutraSweet, Equal etc.) is a chemical combination of two amino acids and methanol. In the 1970s, there were several tests that concluded that it may cause certain cancers. In 2005, researchers found that even low doses increased the incidence of selected cancers and blood disorders in rats. Tests have also found that aspartame causes headaches and dizziness in certain individuals. And people with the rare disease PKU (phenylketonuria) must avoid it.

It has even been banned in some countries. It should never be used in hot drinks/food, it breaks down into some very nasty substances when heated.

*Cyclamate should be avoided, the breakdown products of cyclamate, while it is in the digestive system, may have a detrimental effect on male testes. And they increase the harmful effects of other chemicals in the bloodstream. It has been banned in some countries.

*Fructose is classed as a fruit sugar, because it occurs in fruit and vegetables. In small amounts it is quite safe. But larger amounts have been found to increase triglyceride levels in the blood and can contribute to heart disease. This is one of the safer sweeteners.

*Splenda. In the US, where it has been on sale for a while, it may be causing some very worrying side-effects for some people. No information is available, because it is the subject of a large lawsuit.

Chemical Cleaners, Cosmetics and Air Fresheners

Not only does the body have to cope with chemical food additives, it has to deal with toiletries, chemical cleaners, sprays and artificial fresheners that are absorbed through the skin or breathed in.

Coffee

Avoid excess caffeine (coffee, cola etc) and avoid de-caff coffee. Limit coffee to 2 cups per day.

AVOIDANCE LIST

Cooking Containers

Be very careful about the composition of your cooking and storage containers. Avoid cooking in plastic containers, and avoid wrapping food in cling film or plastic bags. Wrap in greaseproof paper/bags, then if necessary cover with cling film. Do not let plastic touch the food. Plasticisers can act as oestrogens within the body, we still do not know their full effect on our health.

Cured Meats

It is better to keep cured meats to a minimum. Since the Soil Association has allowed the addition of added preservatives: Sodium Nitrite – E250 and Sodium Nitrate – E251, it is more healthy to keep even organic cured meats to a minimum. Extra vitamin C or foods containing vitamin C may give some protection from the carcinogenic effects of eating cured meats. One organic supplier who has kept these preservatives out of their cured meats: <http://www.swaddles.co.uk/> should be congratulated for the care of their customers.

Dairy Products

Consuming Dairy/meat products (from cows), in excess, is not advisable. Goat's, ewe's, oat or rice dairy products are now widely available. A protein that forms while cooking meat has been shown to induce breast and prostate cancer in an animal model. Is eating meat every day worth the risk?

Avoid over-cooked cheese (eat hard cheeses only in moderation, if at all).

Deep-Fried Food

Avoid deep-fried foods that have been heated to a very high temperature. Over-cooked carbohydrates contain acrylamide. Unrefined olive oil is the safest oil to use for cooking, and shallow fry your food only.

Drinking Water

For maximum health, it really is better to avoid water straight from

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the tap. You will see many articles and TV programs stating that our tap water is safe and you will hear many quotes from water company officials. At the end of the day, water is re-cycled and put through many chemical processes. The estrogens from the synthetic hormones people and animals are given can still get into our water supplies. The water companies cannot guarantee that our drinking water is completely free from these substances. People with prostate problems should either buy a good filter for their drinking water tap or buy a good brand of mineral water. *** Avoid artificially softened water, it is full of salt, you would be surprised how many hotels do not inform guests, especially when kettles are in rooms and can be filled from the en-suite tap.**

Expiry Dates

Never consume food or drink that has passed its expiry date, especially nuts. You never know how long foods purchased from supermarkets have been stored. 'Fresh' fruit and certain vegetables may have been in storage for well over a year! Moulds and bacteria can grow at an alarming rate in food that has passed its sell by date. And, sugars and chemical constituents can break down to form other chemicals, which may not be so healthy. So, for the sake of your health, bin that stale food.

Fish

Avoid shellfish, swordfish and tuna (they may contain heavy metals and nasty chemicals) Herring, mackerel-small ocean reef fish may be healthier. Avoid intensive farmed fish. Choose fish oils that actually state 'PCB and/or dioxin free' on the label. Unfortunately many of the deep sea fish are becoming more and more contaminated with an even deadlier threat. Tributyltin oxide (TBT), is a pesticide painted on the hulls of ships to stop barnacles and algae sticking to them. It has some very nasty side effects for marine life such as impaired immune systems, shell deformities and a condition called imposex, where male sexual organs appear on female mollusks. It has been banned for use on fish farm cages, but is still used on ocean-going craft. Eating fish in quantity that is contaminated by TBT is bound to adversely affect animals and humans.

AVOIDANCE LIST

Fizzy Drinks

Avoid colas and fizzy drinks, along with the artificial additives they also contain phosphorus that breaks down into phosphoric acid, which can damage teeth and make calcium difficult to absorb. If colas are a major liquid source, the ratio of phosphorus to calcium can increase and actually withdraw calcium from bones.

Microwave Cooking

Some health professionals believe we should cut down on microwaved food. Recent research, which had been suppressed, does show that microwaves can alter the food at an atomic level and may not be very good for people who need optimum health.

Mobile Phones

If possible avoid using mobile phones or hands free sets. It is possible to purchase mobile phones with a speaker, so that the radiation does not have contact with the head.

Oils

Avoid stale oils; nuts, seeds and their oils should be refrigerated and used fresh. Shelled, ground or flaked nuts must be fresh, they can grow carcinogenic mould if not stored correctly or for too long.

In the case of prostate cancer, minimise linoleic acid (corn oil, sunflower oil, safflower oil etc.) Use olive oil in cooking and walnut oil or sesame oil in dressings that are not cooked or heated.

Overcooked or Burnt Food

It has been known for quite a while that burnt food contains carcinogens, and that you should avoid burnt, over-cooked or badly barbecued food. But, in April 2002, Scientists in Sweden reported that acrylamide formed in over-cooked (fried, baked or roasted) carbohydrate-rich foods such as bread, biscuits, chips, roast potatoes, baked corn or rice cereals etc. Acrylamide is known to cause cancer and reproductive problems in animals at high doses and is a neurotoxin in humans.

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Processed Food

Avoid excess sugars, refined white carbohydrates i.e. white flour, white rice. Only choose brown / whole grain.

It really is best to avoid all processed foods, especially tinned or dried in packets. Eat preserved food in moderation.

Did you know?: some pesticides can act as oestrogens.

To avoid pesticides in/on food or water you need to be eating organic food. To avoid carcinogens in colourings, flavour enhancers, flavourings and preservatives, organic food is the answer.

Did you know?: manufacturers are not obliged to list all the ingredients, if they do not reach a certain level? Which means that if you eat processed food, you will never be completely sure about the quantity of additives you are eating.

Each and every one of us condone the use of poisons in and on our food. We all eat it, without quibble, and have done so for decades. The Food Industry argues that all the chemicals they use around and in food have been thoroughly and vigorously tested. But, that is impossible to test every single chemical and break down product the chemical becomes when in the bloodstream. It is only in recent years, when we, the 'guinea pigs,' in this vast study are starting to show the side-effects of all the artificial chemicals that are breaking down and merging in our veins. The researchers can now check our blood and look at the effects all this is having on us. A recent study found that a chemical called chlorpyrifos, which breaks down into another harmful substance TCPY causes a decline in testosterone, which can cause infertility in men. And this is just the tip of the iceberg.

How many chemicals have been passed for safe use and then ban-

AVOIDANCE LIST

ned, when in reality they have not been safe to use at all? The Food Industry has an army of lobbyists to look after its own interests, so that processed food can be grown and made as cheaply as possible, and reach as wide an audience as possible.

The reality is that it takes years and even decades for some of these side effects to show up. And, by then the damage is done. So why do we allow the Food Industry to do this to us?

The point that most of us are missing is that because we allow these food producers to make millions by charging us a premium rate for sub-standard food, which is loaded with cheap chemicals, we are actually damaging our children and even our children's children. They will pay the price for our complacency.

Salt

In excess is very bad for your health. Omit or use Lo Salt, or herbs, ground seeds etc. in the salt cellar.

Saturated fats

All animal fats contain high levels of saturated fats. But vegetable oils that have been processed into hard fats to form margarine is a lot worse for your health. The better ones are the brands that **DO NOT contain high levels of trans fatty acids or hydrogenated oils**. Avoid any with artificial additives. On the contrary, vegetable saturated fats, that are naturally hard, are getting a reprieve. Coconut oil is said to be a great deal healthier for cooking than some vegetable oils because it is much more stable and does not break down into harmful chemicals when subjected to high temperatures.

Stress

Everyone needs a small amount of stress to get them motivated, but too much stress can be a real health hazard. Try a relaxation technique. See EFT.

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Tea

Try not to have more than 4 cups of tea per day. And remember, drinking tea without milk and sugar is healthier. You can add lemon, honey and ginger for a nice warming cuppa! Or substitute with herb tea, oolong, rooibos(ch), white tea or green tea.

**AGAIN, IT MAY BE DIFFICULT OR IMPOSSIBLE TO AVOID SOME OF THESE
ITEMS, BUT JUST TO ELIMINATE THE ONES THAT YOU CAN,
WOULD BE A GOOD START.**

Chapter 9

Detoxing

THE DETOX DIET

The detox diet helps to release toxic substances from the body.

This should only be followed with medical advice. Anyone with a serious illness, diabetes etc. should NOT attempt this diet. It should only be followed for four days at any one time. It should not be followed when the person is very active, working, operating machinery or driving. Rest and relaxation should always be adhered to until the diet is back to normal.

Day 1 & 2:

Breakfast: 1 large glass of filtered water with 1 teaspoon lemon juice, 2-3 apples (washed) with peel, try to eat the cores and pips as well (in moderation), chew well (do not eat more than four unpeeled apples with pips per day).

Spirulina or blue green algae supplements can be taken.

Snacks: anytime you feel hungry eat a peeled apple and have a large glass of filtered water. You should drink at least 3 litres of water per day.

Natural dried apple 'crisps' from Healthfood shop can also be eaten.

Luncheon: baked dessert apples, water or apple juice.

Snacks: anytime you feel hungry eat a peeled apple and have a large glass of filtered water (as long as it is before 7pm).

Dinner: slice apples and put in an ovenproof dish add 250ml of water with 3 teaspoons agar agar, bake in oven for 30mins, stir often towards end, allow to cool slightly and eat. This can be repeated for supper if necessary.

Days 3&4:

Breakfast: (on waking have a large glass of water with 1 teaspoon

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of lemon juice stirred in) 1 small bowl muesli with organic seeds, nuts, oats, raisins, pumpkin seeds, etc. add rice milk, oat milk, soya milk, or 1 live ewe's/goat's/soya yogurt, 1 glass water.

Snack: fruit of choice and water.

Luncheon: large salad, sprouted seeds and grains, 2 teaspoons flaxseed oil, tomatoes, green leafy salad vegetables. Yogurt dressing with garlic (yogurt with garlic and chopped mixed herbs of choice), large glass of water.

Snacks: live goat's yogurt, plain with sliced fruit and large glass of water.

Dinner: 1 cup of cooked quinoa, or whole grains i.e. buckwheat or brown rice with a large portion of stir-simmered mixed vegetables, sauce made from tomatoes, onions and garlic, thickened with tomato puree or arrowroot.

Evening and Supper: a yogurt, or rice/millet pudding made with rice or oat milk.

Day 5: eat a normal balanced diet from now on.

While on the de-tox diet you MAY experience, indigestion, nausea, dizziness or diarrhoea, if they are severe or last longer than 48 hours, see your own GP.

You can alleviate these symptoms by resting and drinking more filtered water. If on days 3 & 4, you feel any symptoms then eat more whole grains (especially rice and the water the rice was boiled in) and drink more filtered water. Do not drink more than a glass of water at a time, leave at least 30 minutes between drinks and sip slowly.

Body Brushing to Eliminate Toxic Substances:

Body brushing is a safe way of helping your body to release toxic

Diets: Detoxing

substances. All you need is a natural, dry bristle brush and a coarse flannel. Using firm, but comfortable strokes brush the body, with the bristle brush, down from the shoulders, arms, upper back and chest, down to the waist. Then brush every part of the body up from the feet and the ankles, calves, thighs, buttocks, lower back and stomach (always in the direction towards the heart). Brush the diaphragm (solar plexus) clockwise in a circular motion.

Run a warm to hot bath, add a handful of sea salt, kelp and any freshly chopped herbs from the garden (lemon balm, basil, lavender, etc. - you can put these in a muslin bag into the water) and soak your body for 20 minutes, (while visualising toxins seeping from your skin) finally take the flannel and rub down your skin taking the same route as the body brushing. Pat dry.

Try to do this at least once per day during the 4 days de-tox and then once per week.

Visualisation

Visualisation can assist your body in repairing itself, even scientists believe that the 'placebo' effect exists; it is taken into account every time a clinical trial is carried out. A body responds because 'it' thinks it is taking medicine.

To take advantage of this effect yourself: visualise that your food is your medicine. Every mouthful you take makes you feel better and better. Soon the placebo effect will take hold and you will really start to feel better.

At night while you are relaxing take three deep breaths, listen to your breathing, in....out....in....out.... all you hear is your breathing. When thoughts enter your head acknowledge them and return to your breathing. Imagine your white blood cells marching through your body, like little white soldiers, see them surrounding your prostate gland, visualise your prostate becoming smaller and smaller. See yourself in bright sunshine, you can feel the health giving warmth

Diets: Visualisation

making you feel so glad to be alive. (It is so simple, you could do this twice a day initially). Try it, it works wonders.

Keep a diary on page 119 and write down comments on the changes you have made, feelings and improvements etc.

Chapter 10

Healthier Eating

THE ACID / ALKALINE BALANCE

Balancing the acid and alkaline in your diet is very easy to do and the benefits can be substantial. Below is included a brief outline of how to change your diet to the best acid to alkaline balance of (approximately) 20% acid to 80% alkaline forming foods. Studies have shown that this diet can help us to overcome fatigue, stress and food cravings, as well as to enhance the normal functioning of the immune system.

Acid forming foods: choose approximately 250 calories per day.

Meat, bacon, veal, offal, eggs, bread, fish (especially shellfish) oysters and lobster, cereals: wholemeal flour, spelt, wheat, sago, oatmeal & tapioca, pasta, parmesan, most sharp cheeses, artificial sweeteners, sugar, broad and butter beans, soy sauce, chocolate, alcohol, dried coconut, fizzy drinks / cola (the phosphorus turns to phosphoric acid and eats away at bones), etc.

Medium / Low acid forming foods: (in moderation) choose approximately 500 calories per day.

Lentils, peas, most dried beans, peanuts, cranberries, blueberries, plums, prunes, olives, strawberries, sunflower seeds, soya, nuts (other than almonds and brazil's), rye bread, brown rice, pumpkin seeds, herring, mackerel, walnuts etc.

Alkaline forming foods: choose approximately 1750 calories per day.

Most vegetables, figs, apricots, honey, rhubarb, raisins, dates, garlic, onions, seeds, sprouting seeds (beans and lentils become alkaline forming if sprouted), millet, flax, quinoa, buckwheat, almonds, brazil nuts, chestnuts, arrowroot, amaranth, fruits (even citrus fruits, once digested, are alkaline), olives, lima beans, root vegetables, fresh coconut (unrefined-health food shops) and goat's/ewe's yogurt, potatoes, sesame seeds, natural unsalted butter, brown rice syrup, garlic, gelatin, cayenne, most herbs, miso, spirulina, etc.

Neutral foods: Oils; safflower oil, olive oil, sesame oil, etc.

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An average man should have between 2,500 and 3,000 calories per day, (depending on age, weight, height and activity levels) of these 10% should be acid forming (i.e. 100 calories for every 1000 calories consumed) 20% (i.e. 200 per 1000) can be from the medium/low foods and 70% (i.e. 700 per 1000) should be from the alkaline and neutral food groups.

All diet changes are difficult to get used to, we have put a large section at the back of the book for your diary, try this diet for a few weeks, write down the effects and you decide if it is worth it.

Criminologists agree that the Western diet of normally high **acid** forming foods but low **alkaline** is a factor in juvenile crime.

Many degenerative diseases are made worse by, if not caused by, eating a high acidic diet. A typical western diet is much too acidic causing complications in health of both body and mind
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There have been quite a few studies that have indicated that a healthy, well balanced diet, preferably with no artificial additives, and not more than 90g of meat per day, has shown to increase survival rates of patients undergoing cancer treatment. It is also good for the functioning of a healthy prostate gland.

Servings Per Day: Measures are approximate and should be based on individual needs.

Approximately 2,500 to 3,000 calories per day, depending on season, activity levels, age and height (more for a tall, young, sporty man).

3> litres per day of plain filtered water. This should be taken little and often, too much water taken in one session can upset the electro-lite balance and cause serious problems. Your GP will advise if you have a serious kidney, liver or bladder condition.

3-5 mixed servings (30g-dry) wholegrains: wholemeal/rye bread, breakfast cereals, brown rice, buckwheat, buckwheat pasta, quinoa, millet, etc.

At least 5> mixed servings of fresh organic vegetables: yams, tomatoes, watercress (from a reliable source), carrots, green leafy vegetables, broccoli, beetroot and tops, shiitake and maitake mushrooms, butternut squash, young turnip-tops, onions, garlic, herbs, including vegetable juices, etc.

At least 3 mixed servings fresh organic fruit: cranberries, raspberries, apples, bilberries, cherries, strawberries, pomegranate juice, kiwi fruit, mango, peaches, incl. juices etc.

3-4 mixed servings (25g) raw, fresh - pumpkin seeds, nuts, sesame seeds, sunflower seeds, crushed linseeds, or unrefined, fresh - *safflower or *sun-flower or *hemp seed oil etc. (15ml), olive oil (10-15ml), etc. *Do not heat or cook with selected oils.

2-3 mixed servings (*90g): up to 1 serving per day of lean organic meat (if any, and do not over-cook), fish (oily fish should be eaten at

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least 3 times per week and/or W-3 fish oil taken. Cottage cheese, eggs etc. *You may increase servings on: beans, pulses, lentils, quorn etc. (vegetarian).

Omit full fat milk use *skimmed milk – (goat's, rice, soya or oat milk is preferable to *cows milk). Not more than 400ml, less if in addition to cheese, yogurt etc.

Not more than 20g cheese, if any. Not more than 25g butter substitute, if any.

Studies suggest: omit or cut down cow's dairy/meat products, if cancer is present or is in family history, there is evidence that the hormone IGF-1 promotes prostate cancer growth.

To cut down cow's dairy products, try mixing them with vege-protein in varying degrees, until finally you are eating & drinking more vege-products than cow's. Try it, it works!. **Do** try to have a regular serving of 'live' yogurt.

***Glucose is known to feed cancerous tumours; omit or cutting down on grains and sugars is advisable if prostate cancer etc. has been diagnosed. Consult a nutritionist.**

HOW TO CHANGE YOUR DIET WITHOUT NOTICING

I cannot stress enough how simple it is to change your current lifestyle to a healthier one without even noticing. At first, it is probably better to eat little and often, which is the natural way of eating, the set three meals a day, without eating between meals, has caused many eating disorders in the West. Eating little and often will help you to fill the gap left by junk foods, the key is to try to choose the right sort of food.

You can adapt any type of recipe you see in recipe books or even your own favourite recipes.....

* **CHIPS:** 1 medium, cleaned potato (not peeled) or yam per person cut into thick chips, Boil in water for 7-10 minutes or until just firm. Drain and gently place on a non-stick baking tray, spray or brush with olive oil, sprinkle with all purpose seasoning or dried herbs (optional). Bake in top of a hot oven (375°F, 190°C, Gas 5) for 10 mins or until just browned. Turn over carefully, spray with oil and return to oven for another 10 mins or until nicely browned on this side. Serve with large salad, grilled meat or oven baked/grilled fish.

* **CREAM:** use crème fraiche or yogurt, but sparingly, (Cream in recipes as thickener - thicken dishes with arrowroot and boil before adding yogurt or it will curdle). Liquidise: 100g raw cashews with 1-2+ tablespoons of water to make a nut pouring cream, do not heat.

* **FRYING/SAUTÈ OR SEALING FOOD:** ‘stir-simmer’ by adding a splash of olive oil (about 5ml / 1 teaspoon) to the frying pan and 1 tablespoon of water, heat and stir or baste the food appropriately. Keep topping up with hot water as necessary, do not allow to boil dry, do not leave unattended. Lightly stir-simmered eggs are as tasty as fried eggs. Stir-simmer an egg as if you were frying it. Flick the water and oil over the egg to baste it as you would when frying. You may have to top up with a little hot water. The result is a tasty cooked egg that is healthier than fried with oil alone.

* **MAYONNAISE/SALAD CREAM:** 2 tablespoons ‘bio’ yogurt, dash of Worcester sauce, 1 teaspoon mild mustard, half a teaspoon apple juice concentrate (optional), mix and serve.

Will keep up to 5 days, covered, in a refrigerator below 5°C.

* **OIL:** where oil is called for in a recipe (not heated) to moisten foods such as grain or green salad either use just 1-2 teaspoons per person of walnut/hazelnut/sesame oil or moisten with yogurt. Left-overs will keep for 2-3 days in the refrigerator (covered).

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NB Spray Olive oil can be purchased from larger supermarkets; most brands can be opened to allow you to re-fill with your own oil. Always use monounsaturated oils (n-9), i.e. olive oil, for heating and cooking.

* **PIE TOPPING I:** thinly slice 1 small potato and one carrot per person, put one layer on the bottom of a shallow, covered dish and sprinkle with goat's milk or skimmed milk, place another layer on top and again sprinkle with the milk and seasoning. Repeat until all potato is used. Place covered in oven and cook on a medium to low heat until potato is tender (you may need to top up with milk before the end of cooking). Transfer to the top of a cooked casserole or fish dish and place under a hot grill until slightly browned, serve with salad.

* **PIE TOPPING II:** mash cooked potato and yam with a little rice milk or yogurt and half fat organic cream cheese and add to the top of casserole and place under hot grill to slightly brown.

* **ROAST POTATOES:** 1 medium potato each, washed and cut into quarters (do not peel). Par boil for approx. 7-10 mins or until just firm. Place on an ovenproof dish and sprinkle on soy sauce or a little diluted miso, spray with olive oil or brush on oil sparingly. (Optional: sprinkle with a pinch of stevia leaf) and bake in hot oven (along with the meat - but do not add to meat pan), for 30 mins or until lightly browned and cooked. Substitute carrots, parsnips, yams, or baby beetroot.

* **ROASTING:** spray the food with olive oil, add some water and miso or stock, cover and bake in the oven, you can check the pan often to make sure there is sufficient water (subject to taste).

* **SALAD (hot):** any matchstick vegetables can be used i.e. wash and thinly cut courgette, Chinese leaves, beetroot, carrot, butternut squash, red cabbage, onion, white radish, globe fennel, etc. Stir-simmer the 'matchsticks' in a splash of olive oil and water with added Worcestershire sauce or diluted miso to taste. Throw in

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cooked beans, peas and sweet corn, or any sprouted seeds can be added and even diced herbs. Stir-simmer but keep topping up the water until par-cooked. Serve with a portion of cooked meat, Quorn steaks or fish of choice.

SALADS (cold): with the traditional leaves try adding dandelion, lovage, rocket, spinach, nasturtium (young leaves are probably the sweetest), etc. Thinly sliced fruit adds interest to salads i.e. apple, orange, melon, kiwi fruit etc. Grated raw root vegetables are a good addition, carrot, beetroot & tops, radish etc. also celery stalks/tops, cucumber, shallots, onions, tomatoes, chives and garlic. Try mixing in some well-known fresh herbs for taste: lemon balm, dill, coriander leaves, chervil, basil, etc. Steamed whole grains (quinoa, buckwheat etc.) or dried fruit and chopped nuts added to salad dressings can be tasty and nutritious. Experiment with salads mix any of the above and serve with cooked lean meat, fish, egg, or cottage cheese etc.

NB: Spinach leaves should be an integral part of a healthy diet, but not everyone likes the idea of spinach. Forget that watery dark green sludge of over-cooked spinach and use the young, fresh baby spinach. It can be added chopped to most cooked dishes and does not require any additional cooking. Or it can be used as a salad leaf. It is ideal for pasta dishes, just stir in some chopped leaves and serve

SALAD DRESSINGS: a tablespoon of 'live' yogurt may be used, on its own or mixed with a dash of mild mustard (French or Dijon), half a teaspoon of unrefined salad oil, and/or fresh chopped herbs to taste, etc. OR try a vegetable dressing, mixing yogurt with small diced veg: sweet peppers, cucumber, onion, garlic etc. (and a splash of tomato sauce can be added too). You can also make a dressing with a little sesame, walnut or hemp seed oils mixed with apple cider vinegar its delicious poured over a fresh green salad and mix well. You can add chopped nuts or seeds to any of the dressings for a 'crunchy' texture. Don't forget the spices!

Basically, to change your diet you need ONLY eat fresh, organic foods, par-cooked, steamed or raw vegetables, NO foods that you are

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allergic to, NO processed, adulterated foods. You, for the sake of your health, should try to eat as 'natural' as is feasible and keep away from synthetic-based foods and plastic / aluminium cooking containers, deodorants, soaps, polishes etc. as much as possible.

All the examples of healthier eating are listed in the healthier eating chapter, they are only examples, similar, but not exactly the same. They are guidelines - follow the one that you find the easiest (unless your GP has advised you against any of the foods listed or you suffer from diabetes or any other serious illness). If you follow the acid/alkaline diet for a month and then try the one of the others for a month, you can choose the diet that you feel best suits you and your lifestyle. Record results in diary on page 119.

Men 40, (medium activity) average height (1.75m), weighing around 80 kilos should aim for around 2700 calories per day (but it depends on individual metabolism and activity level, ranges <2500-3000>).

Your diet should include:

Approximately 15 - < 25% fats (EFAs) (150 - < 250 calories per 1000), the lesser if on a fat restricted diet. Fats to use are: walnut oil, pumpkin seeds, nuts, olive oil, etc., butter- substitute (no trans fatty acids or hydrogenated oils). If cancer has been diagnosed cut out (or down) W-6 EFA's i.e. corn/sunflower/safflower oil etc.

Approximately 55-74% 'complex' carbohydrates: (550-740 calories per 1000), including: lightly steamed or raw vegetables, fresh fruit, whole grains, quinoa, whole pasta, rye bread, brown rice, dried fruit, molasses, etc.

Approximately 11-20% mixed protein: (110-200 calories per 1000) plus supplements of the relevant amino acids. Vegetable protein, Quorn, oily fish, white fish, pulses, amaranth, organic lean meat (in moderation) etc.

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This can be subject to seasonal changes, i.e. in the colder (Winter) months increase intake of calories slightly, for best results see a nutritionist.

By omitting food additives and junk food, you may go through a period of 'withdrawal symptoms'. To lessen this, cut out just one 'bad' food, and have less of another, so that everything is done in moderation. In the long run, it is far better for your health to make an effort to eat healthier; and your taste buds will soon become accustomed to your new diet. Digestion can be helped by eating a raw, fresh fruit salad, i.e. pineapple (which contains beneficial digestive enzymes) before eating cooked food or a main meal

There are many vegetable textured protein foods available that look and taste like meat, they are easy to use, just replace part or all meat in your normal recipe, but remember that they may not need as much cooking. Potatoes can be swapped for whole grains: i.e. buckwheat can be eaten even in a restricted gluten diet because it is not from the 'wheat' family, but from a thistle and is very popular in Japan. It is rich in bioflavonoids and can be eaten hot or cold with salad. Try to drink plenty of pure, filtered water too.

For a preventative measure, modify your diet slightly, making sure that you drink plenty of filtered water and have a good balanced diet with adequate supplies of zinc, magnesium, selenium, Vitamins C, E & B complex, lycopene, and EFAs. For someone already suffering from BPH, diet should be watched more closely; monitor all your symptoms in the diary (page 119).

START MORNING

On waking, take a large glass water, (you can if you wish add a twist of lemon, lime or pineapple - but only do this for a maximum of 3 glasses per day, the rest should be plain, filtered water).

BREAKFAST

(Try to eat larger portions in morning / mid-day and less in evening)

30gms unsweetened muesli or high fibre breakfast cereal, with

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added pumpkin seeds, crushed linseeds and banana sliced on top, with soya/rice/oat milk, yogurt, 'live' goats/ewe's yogurt or skimmed milk. Chew well.

If you would rather a 'hot' breakfast, you can add muesli to water in a saucepan and bring to the boil. Stir simmer for 8 minutes and serve with the seeds. (You could even grind the museli in a coffee grinder, mix with soya milk and cook).

OR

1 egg (stir simmered or poached), 2 grilled tomatoes on 2 slices toasted rye bread with spread (no hydrogenated oils or trans fatty acids). 1 yogurt.

OR

1 portion of grilled fish (mackerel etc.) grilled tomatoes, grilled mushrooms with rye toast. Or substitute baked beans on rye toast with piece fresh fruit.

OR

1 grilled organic bacon rasher (make sure that there are no E numbers in ingredients), tomatoes, corn-cob & mushrooms, 1 slice rye bread. (If you choose this breakfast do not have any more meat today).

OR

A fresh fruit salad with yogurt followed by avocado half on grilled rye toast.

OR

Liquidise fresh fruit (raspberries, bananas, peaches etc.) with rice milk, fine ground sesame seeds & pumpkin seeds, 5ml walnut oil, and half pot of live goat's yogurt (add water if necessary to reach the desired 'drinking' consistency).

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SNACKS

(only if necessary and do not overindulge on biscuits, cakes, or bread)

1. Any fresh fruit (i.e. black grapes) with a large glass filtered water.
2. Liquidise equal quantities cooked chick peas, cooked butter beans with a little sweet corn, a sprinkling of hempseed or olive oil and enough water to make a paste. Spread onto rye bread (This will keep in the refrigerator, covered, for up to 5 days). Can also be used as a butter substitute on rye bread etc. or as a thickening agent stirred into soups, stews, sauces and gravy.
3. Any wholefood snack / biscuit from the health food shop (small portion).
4. Small portion of carrot cake or 'home-made' wholemeal fruitcake (commercial brands usually include too many additives).
5. Wholemeal (or rye) salad sandwich.
6. 20g muesli and/or 'live' yogurt (pumpkin seeds can be added).
7. 20g fruit and nut snack (pumpkin seeds can be added).
8. A raw salad to taste, particularly healthy if eaten before cooked food as a starter i.e. pineapple before cooked food contains many good digestive enzymes).

Remember to take any zinc-based supplements with snack in between meals.

LUNCHEON

Jacket Potato & Salad: topping: cottage cheese with added vegetables i.e. diced red peppers, carrots, chopped tomatoes, etc. OR bean spread (see - No. 2 snacks, above) OR grilled tomatoes and mushrooms OR home-made coleslaw i.e. grated red and green cabbage, 1 apple grated, 1 carrot grated, finely diced onion, garlic, etc. mixed with buttermilk, yogurt or crème fraiche (seasoned with black pepper and ground sesame seeds).

OR

Vegetable Chowder: chop a sweet potato, a leek, onions, carrots,

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garlic, 1 tablespoon quinoa (or amaranth) and simmer in 750ml of vegetable stock (top up if necessary) until veg is tender and 'stew' is thickened and season. Sprinkle on cumin seeds, sesame seeds and chopped pumpkin seeds.

OR

Grilled Mackerel: fill the cleaned fish with cooked brown rice mixed with chopped salad onions and sweet corn, grill for a few minutes on each side until cooked. Serve with grilled tomatoes, a hot salad and steamed broccoli.

OR

Tomato and Carrot Soup: simmer celery, carrots and tomatoes in 500ml vegetable stock, top up with water if necessary, add turmeric and Jamaican pepper or substitute favourite herbs and/or spices. When cooked, liquidise and add live yogurt and a sprinkling of ground sesame seeds and wheatgerm (optional). Cooked lentils or quinoa may be added for a more 'filling' soup.

OR

Beetroot Borsch: wash 2 baby beetroot and 2 similar size chunks of sweet potato (yam), and roast in their skins with a little olive oil. Liquidise whole in vegetable stock with a pinch of cinnamon to taste, strain and serve. Add yogurt to taste.

OR

Tuna Lunchbox: mix tuna, cottage cheese, coleslaw and selection of chopped vegetables, pile into a lunchbox and eat with rye or wholemeal bread.

OR

Salad & Beetroot Sandwich: on wholemeal or rye bread.

OR

Grilled Quorn: sliced avocado half and salad with a slice of rye bread.

OR

Pasta Vege: 1 portion cooked buckwheat pasta with a creamy vegetable sauce: make a basic white sauce with skimmed milk, rice, oat or soya milk, add miso to season and arrowroot, add small lightly steamed broccoli florets, lightly steamed onion, sweet corn, diced carrot, etc. and ground black pepper, a pinch of nutmeg and freshly chopped coriander, simmer until arrowroot is cooked, stirring all the time. Add diced baby spinach leaves and stir and serve.

OR

Own Recipe: replace all meat or mix 50/50 with a vege-protein based substitute, do not overcook, these may be needed to be added towards the end of cooking, with extra liquid (see pack). Also see replacements.

DINNERS

(OR your own recipe: see healthy substitutes)

Quorn Neopolitana: ‘stir simmer’ 50g Quorn with 1 onion, garlic, 1 teaspoon grated ginger, finely diced red pepper, diced mushrooms and diced carrots. Add a selection of herbs and spices: i.e. fresh chopped basil, lemon balm, black pepper, marjoram, chilli and add 500g fresh chopped tomatoes or a large tin with one tablespoon tomato puree. Simmer for approx 30 mins. or until thickened. Serve on a bed of wholewheat or buckwheat spaghetti.

OR

Herby Steak: (or vege substitute), 90g cut into very thin strips, sprinkle with herbs, lightly stir-simmer, serve with large salad and 1 slice rye bread. Serve with roasted baby beetroot.

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OR

Fish Casserole: thin slices of raw fish, in oven-proof dish top with wafer thin slices of vegetables and stock, cover and bake in a moderate oven – 40 mins.

OR

Grilled Fish: (or meat / vegetarian substitute) of choice and serve with a selection of steamed vegetables (covered in dressing: 5ml flax seed oil, 5ml safflower oil and a few drops sesame oil and cider vinegar mix and shake a little over veg), with one large baked potato. If necessary gravy can be made using Miso or ‘Vecon’ a vegetarian stock and arrowroot as thickener.

OR

Spicy Cous Cous: ‘stir simmer’ an onion, garlic and 1 teaspoon grated ‘fresh’ ginger. Add spices black pepper, pinch cayenne etc. Add a selection of vegetables to taste (finely diced) i.e. diced pepper, carrots, pineapple, butternut squash, sweet corn etc. and par-cook, add 2 tablespoons cooked haricot beans and chopped pumpkin seeds, pine nuts and a few flaked almonds. Allow approx. 30-50g cous cous per person and cook as per packet instructions, stir in the above veg mix and sprinkle with fresh chopped herbs. (Quinoa or buckwheat can replace cous cous (which is made from semolina wheat) add a teaspoon of Miso or Vecon in cooking water).

OR

Vege Risotto: ‘stir simmer’ 1 onion and two cloves garlic with reconstituted vegetable protein or Quorn (as on packet). Add selection of cooked, diced vegetables and tomato puree with seasoning and herbs of choice, simmer add a little vegetable stock and simmer until only a small amount of juices left, thicken slightly with arrowroot (if necessary) and cook for 2 minutes stirring. Stir in cooked brown rice and simmer to thoroughly heat through.

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NB: Vegetable protein (mince, chunks, steak, etc.) can be purchased fresh or frozen, when replacing meat or just 50/50 in a recipe it is important not to buy genetically modified products, especially GM soya. (NB Vege protein needs less cooking time).

DESSERTS, PUDDINGS AND CAKES

Any of your old recipes can be used, but substitute as follows:

***White Flour: substitute** wholemeal flour, and you could add finely ground: nuts, pumpkin and sesame seeds making up approx. 10% of weight.

IF AN ALLERGY TO WHEAT IS SUSPECTED: it is possible to make your own flour, not using wheat: 15% soya flour, 10% potato starch, 12% tapioca flour, 10% cornstarch, 3% xanthan gum, **5% nut flour (finely ground almonds) and 25% white rice flour, 20% buckwheat flour,. Experiment with different flours from your local health food shop (quinoa and amaranth flour are now available) and use the combination you prefer, remember that the texture will be heavier. **Seeds and nuts can be ground in a coffee grinder attachment on a food processor. Only use when freshly ground, do not store. ****Sprouted grains, dehydrated and ground into flour can also be used. These are healthier than the normal grain flours and are very easy to do****

*Use grated carrots, molasses (molasses have a distinctive taste, you may need to 'get used to') and pureed prunes or apricots in fruitcakes with less dark brown sugar, and less fat.

*Cashews and water liquidised does make a nice pouring 'cream', concentrated apple juice or stevia can help to sweeten it.

* **Fresh or stewed organic fruit:** with a mild 'live' yogurt or ewe's yogurt. (If you suffer from indigestion, fruit should only be eaten between meals or as a starter. Taken at the end of the meal they can ferment adding to the discomfort).

* **Rice or millet pudding:** with yogurt, sweetened with a little honey, hunza apricots, raisins, stevia leaf or natural concentrated apple juice,

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all available from Health food shops.

* **Pastries/puddings/cakes:** made with the flour as above, and olive oil etc., unless on a weight reducing regime.

* **Trifles/mousses:** made with vege gelatine, yogurt and liquidised fruit etc.

Do not be tempted by the quick and easy desserts that can be whipped up out of a packet, they are invariably not very healthy.

This is only a guideline, everyone has their own likes and dislikes, I hope that I have given you a few ideas of how to change your existing eating habits to healthier ones. Add more herbs and spices (turmeric, cumin, and chili are especially beneficial) to dishes, experiment with them, they do add valuable nutrients and taste to your recipes. Do not try to change your diet overnight, do it gradually, you will find it much easier to continue.

Cinnamon is just one spice that researchers have found is exceptionally good for us. In some cases it achieved near normal blood sugar range in type 2 diabetics. People who eat too much sugar may have elevated blood sugar, without knowing, which causes many health problems. Cinnamon is very easy to add to your diet. You can add it to sauces, gravy, salad dressings, fruit juices etc. You could add powdered or stick cinnamon to tea and coffee. 5gm per day gives a good effect.

Sprouting Seeds

If you feel that you cannot afford to eat healthier, why not grow your own vegetables? Sprouting your own seeds gives fresh, organic vegetables for a fraction of the price. There are many seeds that you can sprout readily available from good health food shops. As a general guide, you must not sprout seeds that you cannot eat the whole plant (fruit, seeds, leaves) i.e. tree seeds (apple etc.), ornamental flowering plants, vines, sweet peppers, aubergines, tomatoes, courgettes. You must not sprout commercial packaged seeds that are for garden use, because of the chemical dressings on them.

But the good news is that sprouting packs are available in numerous varieties with full instructions. If you cannot find these: mix half a tablespoon of organic fenugreek seeds, fennel seeds and/or mustard seeds to make your own blend. Herb seeds, coriander, nasturtium, and even dandelion seeds make good sprouts and it is fun to experiment. Organic broccoli seeds are very healthy, with many therapeutic compounds.

Sprouting Instructions:

- Take a large, empty (500g coffee) jar, discard lid.
- Wash and soak well, it must be thoroughly cleaned and allowed to dry. You can sterilise the jar by pouring in some cold water and microwave on high, to bring water to the boil, leave in microwave to cool. Or place the dry jar in a cold oven and then turn the oven to (350°F, 180°C, Gas 4) leave for a few minutes, turn the oven off and allow to cool in oven. Or you can sterilise with a sterilising fluid (available from chemists or home brewing supplies).
- Wash the seeds in a sieve and soak overnight in lukewarm water to encourage germination. Bean seeds should be soaked in tap water for 24 hours, rinsing every 12 hours.
- In morning, drain off water through a sieve and rinse in lukewarm water, drain well. Any water left in the jar may result in mouldy

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seeds. It is a good idea to 'prop' the jar up, with neck down for a few minutes, so all the water drains completely away. Or, use a Sprouting bag, now available in health food shops, they allow the seeds to be hung up over a sink to drain freely.

- Put seeds into the jar and secure a piece of fine mesh or muslin over the top, put in a warm place, but not in direct sunlight, the airing cupboard is suitable. Ventilation and a level temperature of 15-20°C / 60-70°F is needed.
- Every night and morning rinse the seeds by pouring lukewarm water through the mesh or bag while carefully turning to rinse thoroughly, but take care not to damage the delicate seeds or 'sprouts', then turn upside down to drain completely - If left too wet the seeds become mouldy, return each time to the airing cupboard or suitable place.
- The sprouts should be ready in 3-4 days, except alfalfa seeds, which need at least 7 days (for greener sprouts introduce more light on the last day or two), they will have increased their volume by 4-6 times and be fully sprouted.
- When ready, give them a final rinse and store in the refrigerator (for up to 6 days), in a container lined with absorbent kitchen paper.

Start a new jar every day to ensure a fresh daily supply. They can be eaten raw in salads, sandwiches or lightly stir-simmered. They re delicious dehydrated (dried), and make a very tasty trail mix. They are very nutritious and contain more vitamins, protein and live enzymes than the equivalent weight of the adult plant.

Grains and beans (sprouted soya beans taste like young succulent peas) may also be sprouted in this way, but must be soaked for 24-hours with the water changed regularly and the beans lightly stir-simmered with olive oil and water. Ask in your local health food shop for their range of sprouting seeds and equipment.

Sprouting Seeds

PRECAUTIONS:

- ❑ The seeds must be handled with the same strict hygiene standards that you would use for any fresh food. Hands must be washed and utensils sterilised, before you begin. The seeds should be washed and initially soaked in ordinary tap water to reduce the contamination by salmonella or E. coli bacteria that may be present on some of the seeds. They can be washed with a specific bio antibacterial fruit wash that is available in good supermarkets or health food shops.
- ❑ Beans have toxic compounds that stop them from being eaten raw. A 24-hour initial soaking and sprouting for at least 4 days, greatly diminishes this problem. Stir-simmering them cuts the risk completely. Sprouted beans are much more nutritious, tasty and do not contain the compounds that cause bloating and wind. NB: red kidney beans and broad beans should not be sprouted.
- ❑ Alfalfa seeds can be used, but they must be sprouted for at least 7 days to deplete the natural insecticide the seeds contain (Do not eat alfalfa to the exclusion of all other seeds, there is a wide variety of seeds available). Do not eat alfalfa with vitamin E supplements, they fight!
- ❑ Sprouting packs are available in numerous varieties with full instructions. If you cannot find these: mix half a tablespoon of organic fenugreek seeds, fennel seeds and/or mustard seeds to make your own blend. Most herb seeds can be used. Dandelion seeds make nice salad sprouts. You can sprout for longer and make tea with the sprouts.
- ❑ You must make sure that you obtain your seeds for sprouting from a reliable source. Seeds that have been produced for animal feed may be cheaper, but they are not suitable to use

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for sprouting. You should also buy untreated seeds, from a health food Shop - Do not use Packet Seeds produced for garden planting these will have been treated with chemicals.

Chapter 11

The International Prostate Symptom Score

The International Prostate Symptom Score

The International Prostate Symptom Score (IPSS) is a test devised by doctors to help assess the degree of prostate enlargement and how it is affecting the quality of life.

NB: Any discomfort, discharge, or urinary problems should be reported to your own GP as soon as possible.

Fill in the forms on page 116 -117 and refer to your score as follows:

0-7 Mildly symptomatic

8-19 moderately symptomatic

20-35 severely symptomatic

<p>NB: an enlarged prostate is a common and benign (non-cancerous) condition that occurs in mostly older men. (The results <i>do not</i> help to diagnose prostate cancer). The following tables are for information only. If you are worried by any of the symptoms listed, you must make an appointment with your own GP and talk about your concerns. Take this book with you and show him the symptoms you are experiencing.</p>
--

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	NEVER	ALMOST NEVER	LESS THAN 10 TIMES	ABOUT HALF THE TIME	MORE THAN 10 TIMES	ALMOST ALWAYS	YOUR SCORE
INCOMPLETE EMPTYING - During the past month, how often have you had sensation of your bladder not emptying after urination?	0	1	2	3	4	5	
FREQUENCY - During the past month, how often have you had to urinate less than 2 hours after your last urination?	0	1	2	3	4	5	
INTERMITTENCY - During the past month, how often has your urine stream stopped and started again during urination?	0	1	2	3	4	5	
URGENCY - During the past month, how difficult was it to put off urination?	0	1	2	3	4	5	
WEAK STREAM - During the past month, how many times have you had a weak urinary stream?	0	1	2	3	4	5	
STRAINING - During the past month, how often have you had to strain to begin the flow of urine?	0	1	2	3	4	5	
Carry Total Score Forward							

The International Prostate Symptom Score

NONE **ONCE** **TIMES** **2** **3** **4** **5 +** **YOUR**
TIMES **TIMES** **TIMES** **TIMES** **TIMES** **TIMES** **SCORE**

NOCTURIA - During the past month, how many times did you get up to urinate (from the time you went to bed until the time you got up in the morning). Check your diary.

Total Score from p116

0 **1** **2** **3** **4** **5**

Total Score

Write your score from page 116 in the 1st total box above. Add your total score in the total box above.

0-7 You are mildly symptomatic. Book an appointment with your GP. It is not too late to change your life-style and reduce the symptoms.

8-19 Moderately Symptomatic. You must book an appointment to see your GP and ask about changing your lifestyle.

23-35 Severely Symptomatic. You must see your GP as soon as possible and ask about changing your life-style.

Delighted	Pleased	Satisfied	Mixed Feelings	Dis-satisfied	Un-happy	Depressed
-----------	---------	-----------	----------------	---------------	----------	-----------

QUALITY OF LIFE: If the urinary symptoms you have now were with you for the rest of your life, how would that make you feel? See the box below to view your score.

0 **1** **2** **3** **4** **5** **6**

Score 1-3 change your lifestyle for the better now. Score 4-6 Explore all your options with your GP.

An enlarged prostate can sometimes affect your sexual function. This questionnaire helps you to assess if you have any problems. If so, talk to your doctor about the findings

Q1: CAN YOU HAVE AN ERECTION?

- Yes, with normal firmness.....score 0
 - Yes, with slightly reduced firmness.....score 1
 - Yes, with much reduced firmnessscore 2
 - No, cannot have an erection.....score 3
-

Q2: HOW DO YOU VIEW YOUR ERECTION PROBLEM?

- No problem.....score 0
 - Small problem.....score 1
 - Moderate problem.....score 2
 - Big problem.....score 3
-

Q3: CAN YOU EJACULATE?

- Yes, with normal volume..... score 0
 - Yes, with slightly reduced volume..... score 1
 - Yes, with greatly reduced volume..... score 2
 - No score 3
-

Q4: HOW DO YOU VIEW YOUR EJACULATION PROBLEM?

- No problem..... score 0
 - Small problem score 1
 - Moderate problem score 2
 - Big problem score 3
-

Q3: DO YOU HAVE DISCOMFORT OR PAIN WHEN YOU EJACULATE?

- No score 0
 - Yes, with slight pain or discomfort score 1
 - Yes, with moderate pain or discomfort score 2
 - Yes, with severe pain or discomfort score 3
-

Q4: HOW DO YOU FEEL ABOUT THE PAIN YOU EXPERIENCE?

- No problem score 0
 - Small problem score 1
 - Moderate problem score 2
 - Big problem score 3
-

Any total score over 0 needs medical attention

Remember: Erection problems can also signify heart disease.

TOTAL

Chapter 12

The Diary

THE DIARY

On these next few pages I would like you to take charge of your own health, write down the changes you have made to your lifestyle, and the effects that you have noticed from this change. The benefits will not appear overnight; some people may have to wait months before they see an improvement. Below is a space to record how you feel now, your symptoms, flow rate (slow, fast or meter reading), your weight and height. On the subsequent pages write down any fortnightly changes and how you feel in yourself etc. **TAKE THESE TO YOUR DOCTOR FOR EVALUATION WHEN YOU NEXT VISIT.**

TODAYS DATE:

WEIGHT:

HEIGHT:

BLOOD PRESSURE:

PSA READING:

FLOW RATE:

I OFTEN DRIBBLE URINE Y/N

(Is the flow rate slower than it was 10 years ago?)

SYMPTOMS:

CHANGES YOU INTEND TO MAKE TO YOUR LIFESTYLE:

I.E EFT STARTED:

WRITE DOWN YOUR FEELINGS:

MEDICATION OR SUPPLEMENTS STARTED:

(Remember to seek medical advice before taking medication and supplements together).

Overcome Prostate Problems

WEEK 1 (Date _____)

CHANGES MADE:

PELVIC FLOOR EXERCISES?
EFFECTS NOTICED:

EFT AFFIRMATIONS:

MEDICATION OR SUPPLEMENTS TAKEN:

SLEEP PATTERN:

Is urine cloudy or foamy? Y/N
My bladder can't empty properly Y/N
Flow stops and starts in mid stream Y/N
I often get out of bed to urinate Y/N

Do you suffer any pain? Y/N
I need to urinate too often Y/N
I strain to pass urine Y/N
My quality of life is affected Y/N

THE DIARY

WEEK 2 (Date _____)

CHANGES MADE:

PELVIC FLOOR EXERCISES?
EFFECTS NOTICED:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

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WEEK 3 (Date _____)

CHANGES MADE:

PELVIC FLOOR EXERCISES?

EFFECTS NOTICED:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

THE DIARY

WEEK 4 (Date _____)

WEIGHT:

CHANGES MADE:

**PELVIC FLOOR EXERCISES?
EFFECTS NOTICED:**

COMMENTS:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

Is urine cloudy or foamy? Y/N
My bladder can't empty properly Y/N
Flow stops and starts in mid stream Y/N
I often get out of bed to urinate Y/N

Do you suffer any pain? Y/N
I need to urinate too often Y/N
I strain to pass urine Y/N
My quality of life is affected Y/N

Overcome Prostate Problems

WEEK 5 (Date _____)

FLOW RATE:

BLOOD PRESSURE:

CHANGES MADE:

LIST SYMPTOMS:

EFFECTS NOTICED:

PELVIC FLOOR EXERCISES?

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

THE DIARY

WEEK 6 (Date _____)

CHANGES CONTINUING:

PELVIC FLOOR EXERCISES:
EFFECTS NOTICED:

MEDICATION OR SUPPLEMENTS CONTINUALLY TAKEN:

EFT AFFIRMATIONS:

Overcome Prostate Problems

WEEK 7 (Date _____)

CHANGES MADE:

PELVIC FLOOR EXERCISES?

EFFECTS NOTICED:

SLEEP PATTERN:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

THE DIARY

WEEK 8 (Date _____)

WEIGHT:

CHANGES CONTINUING:

FLOW RATE:

PELVIC FLOOR EXERCISES?

EFFECTS NOTICED:

COMMENTS:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

I often dribble urine during day Y/N
My bladder can't empty properly Y/N
Flow stops and starts in mid stream Y/N
I often get out of bed to urinate Y/N

Is urine cloudy or foamy? Y/N
I need to urinate too often Y/N
I strain to pass urine Y/N
My quality of life is affected Y/N

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WEEK 10 (Date _____)

CHANGES MADE:

PELVIC FLOOR EXERCISES?
EFFECTS NOTICED:

SLEEP PATTERN:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

THE DIARY

WEEK 12 (Date _____)

WEIGHT:

CHANGES CONTINUING:

PELVIC FLOOR EXERCISES?

FLOW RATE:

EFFECTS NOTICED:

COMMENTS:

MEDICATION OR SUPPLEMENTS TAKEN:

(Supplements usually need up to three months before you see a benefit (varies with each individual. You should really be noticing the good effects by now.

EFT AFFIRMATIONS:

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WEEK 14 (Date _____)

WEIGHT:

CHANGES CONTINUING:

Is urine cloudy or foamy? Y/N

My bladder can't empty properly Y/N

Flow stops and starts in mid stream Y/N

I often get out of bed to urinate Y/N

Is there any pain? Y/N

I need to urinate too often Y/N

I strain to pass urine Y/N

My quality of life is affected Y/N

EFFECTS NOTICED:

PELVIC FLOOR EXERCISES?

COMMENTS:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

THE DIARY

WEEK 16 (Date _____)

WEIGHT:

CHANGES CONTINUING:
PELVIC FLOOR EXERCISES?

EFFECTS NOTICED:

COMMENTS:

MEDICATION OR SUPPLEMENTS TAKEN:

EFT AFFIRMATIONS:

Overcome Prostate Problems

WEEK 20 (Date _____)

WEIGHT:

BLOOD PRESSURE:

PSA READING:

FLOW RATE:

SYMPTOMS:

CHANGES YOU HAVE CONTINUED:
PELVIC FLOOR EXERCISES?

WRITE DOWN YOUR FEELINGS NOW:

MEDICATION OR SUPPLEMENTS:

(Remember to seek medical advice before taking medication and supplements together).

I often dribble urine during the day Y/N

My bladder can't empty properly Y/N

Flow stops and starts in mid stream Y/N

I often get out of bed to urinate Y/N

Is Urine Cloudy or Foamy? Y/N

I need to urinate too often Y/N

I strain to pass urine Y/N

My quality of life is affected Y/N

After week 20, still continue on the health regime and pelvic floor exercises. Look back to week 1, is there any noticeable difference with this page and week 1? If so, it will give you all the encouragement you will need to make these changes and live a healthier and probably longer life.

TAKE THESE DIARY PAGES TO YOUR DOCTOR FOR EVALUATION WHEN YOU NEXT VISIT.

Chapter 13

Men's Health Issues

MEN'S HEALTH ISSUES- TESTICULAR CANCER

There are over 1800 new cases of testicular cancer every year and this figure is on the increase. Unlike prostate cancer the average age for men most at risk from testicular cancer is 18-35.

It is now accepted that men from puberty should regularly examine their testes for abnormalities, preferably every month. The testes should not change in size, they should feel soft and smooth. Any lumps, swellings, change in texture, or if one or both become enlarged it should be reported to your GP - as soon as possible. Often there is little or no pain involved, so the absence of pain cannot be relied upon to suggest that action is not urgent.

Your GP will either refer you to a specialist for tests or carry out a blood test and arrange for a scan to identify the nature of the problem. Even if cancer is present, the survival rates are exceptionally high, especially if it is caught in the early stages. If an operation has to be performed it is often uncomplicated and does not usually affect normal functioning, virility or sex drive.

- * 50% of men do not go to the doctor until it is too late.
- * Over 90% of men have a good success rate even though the cancer may have started to spread.
- * Only 3% of the male population examine their testicles for signs of lumps, hardness etc. on a regular basis.

EXAMINE YOUR TESTES REGULARLY, EARLY SIGNS ARE:

- * Change in size or one testis larger than the other.
- * They may feel slightly heavier than normal.
- * Are they swollen or tender?
- * Look for changes in texture (is one or both harder than usual?) and look for changes in colour.
- * Can you feel a lump? however small, now is the time for diagnosis.

IMPORTANT: See your doctor as soon as you notice any abnormality.

Men's Health Issues - WEIGHT

Calculate your Body Mass Index

To calculate your Body Mass Index (BMI): Divide your weight in kilos (kgs) by your height in metres. Your Body Mass Index (BMI) should be between 20 - 24.9

(Convert lbs to kgs, multiply the pounds by 0.45)

(Convert inches to metres, multiply the inches by 0.025)

For example: A man 10 stone and 5'6'' (66'') tall would convert:

10 x 14 (stones to lbs) = 140lbs x **0.45** (lbs to kgs) = 63kgs.

66'' (height) x **0.025** (inches to metres) = 1.65 (metres)

Take 63 (kgs) DIVIDE BY 1.65 then AGAIN DIVIDE BY 1.65 = 23.140495 (on calculator) = 23 BMI.

Now you try! - fill in the box below:

Take my weight _____ kgs and divide by my height _____ metres
then divide again by my height _____ metres = my actual BMI _____

But imagine you need a BMI of 22. How much weight do you need to lose? This is a simple case of working it out on your calculator again:

All you do is: 22 (Ideal BMI) x height x height again.

Height is 1.65 metres. So, for example: 22 x 1.65 and then again x 1.65 = 59.895 kgs, which is your target weight for a BMI 22.

Now minus this from actual weight: 63 kgs - 59.895 = 3.105 3kg.

So, you need to lose approx. 3kgs to bring BMI to 22. OR Convert those back to pounds: 3.105 (kgs) divide by 0.45 = 6.9 lbs.

So you need to lose approx. 7 pounds for your optimum 22 BMI.

Now you try - fill in the box below to calculate your ideal BMI

My Ideal BMI: _____ x _____ (height) x _____ (height): =
_____ kgs my target weight. Then take my actual weight: _____ kgs
- minus _____ kgs (my target weight) = * _____ kgs

I now know that I need to lose * _____ kgs or _____ lbs

WEIGHT

For optimum health of the prostate, the very first thing you should do is try to maintain your ideal BMI. For a man a Body Mass Index of between 20 and 24.9 is the healthiest. Please see the BMI calculator on the previous page to work out your own BMI.

IMPOTENCE

Research shows that 50% of all men will have erection problems at some time in their lives. It could be due to a high saturated fat diet, depression, changes in hormone levels, heart disease, prostate problems, or the onset of diabetes. Talk to your doctor. There is some evidence that a Mediterranean diet (olive oil, fresh fruit and vegetables) can help to guard against these illnesses. EFT can help sort out some cases of depression.

MOLES

Moles or dark spots on the skin that itch, bleed, become darker or increase in size may indicate a melanoma. Men are generally slow to pick up on the signs of skin cancer, even though time is of the essence. Skin cancer is one of the easiest cancers to cure, if caught early enough. It is very important to check your moles every few weeks and if there are any problems make an appointment with your GP. Your life could depend on it.

CHOLESTEROL

It is important to make sure that your cholesterol score is below 5. This should be achieved by modifying your diet to lower your cholesterol score naturally. If your doctor thinks you should take cholesterol lowering drugs, it is wise to take his advice. Your doctor will monitor you for any signs of side effects. Although statins are available over-the-counter at a pharmacy, it is not wise to take them without your doctors advice. One of the problems that may affect some people is that they may cause depression by altering the cholesterol levels in the brain.

INSOMNIA, EXCESSIVE TIREDNESS

If you constantly cannot sleep at night or have restless nights, with excessive tiredness during the day, talk to your doctor, before it gets any worse. It may be the sign of an underlying illness or depression. Try EFT or a relaxation technique, it may help you to regulate your sleep pattern. You can begin by choosing a mantra (a word that sounds good but has no meaning) i.e. I-HEEM or OH-HUMM. When you are trying to get to sleep repeat the mantra in your head over and over again, regulated to your breathing. Breath slowly, I- (breath in) Heem (breath out) and so on. When you are aware of thoughts trying to take over, bring yourself gently back to the mantra. Soon you should relax enough to drop off to sleep.

PERSISTENT COUGHING

Constant coughing, wheezing or breathlessness needs to be seen by a doctor. It could be a chest infection or lung disease. Lung cancer is still the deadliest cancer in men. If it is seen early enough the better your chance of recovery.

DIFFICULTY SWALLOWING

If you have difficulty swallowing and it does not seem to be getting better within a couple of days, go to see your doctor. Cancer of the throat and gullet is growing increasingly more common in men.

TIGHTNESS ACROSS CHEST AND JAW

It may not seem important, but a sudden tightness across your chest that may travel up into your jaw, could be a sign of heart problems. If you go to your doctor for a check-up it could save the quality of your life for years to come, if not save your life altogether.

RECTAL BLEEDING

Piles or constipation can be the cause of rectal bleeding, but your doctor is the only one who can diagnose the true cause. Bowel cancer, which also causes rectal bleeding, is the third deadliest cancer in men. 80% of cases are successfully treated if caught in the early stages. Why wait?

Chapter 14

A-Z GLOSSARY MEDICAL TERMS

A-Z GLOSSARY OF MEDICAL TERMS

3D-CRT – see three dimensional conformal radiation therapy.

ACID PHOSPHATASE - an enzyme produced only in the prostate. High levels may indicate the spread of prostate cancer. Before the PSA test was established the Prostatic Acid Phosphatase (PAP) Test was how doctors tested for prostate cancer. It is not now normally used.

ACUTE PROSTATITIS - prostate infection characterised by the sudden flare-up of severe symptoms such as high fever, shivering and a burning feeling when urinating.

ADENOCARCINOMA - a malignant (cancerous) tumour that is growing within a gland or body part with a glandular structure.

ADENOMA - a benign tumour within a gland.

ADENOMECTOMY - surgical removal of excess tissue from a gland harbouring a benign tumour.

ADRENAL GLANDS - glands located on the top of each kidney. They secrete various hormones (epinephrine, cortisone) including androgens.

AGE-SPECIFIC PSA REFERENCE RANGE - a PSA range that is designed to compare the results of men in the same age group. If a man's PSA levels are high compared to others in his age group, then there is a higher chance of suffering from prostate cancer.

ALPHA ADRENERGIC BLOCKER - class of drugs used to treat benign prostate enlargement that tend to relax the smooth muscles of the prostate and, if effective, improve urine flow. These drugs are also used to treat hypertension. The best known alpha adrenergic blocker is sold under the name Hytrin. This drug is awaiting approval for BPH treatment.

ALPHA BLOCKERS - relaxes smooth muscle, generally used for high blood pressure and now for the prostate (BPH). Terazosin or doxazosin etc. are among commonly prescribed. Magnesium also helps to relax smooth muscle.

ANDROGENS - a group of hormones that cause the development of secondary male sexual characteristics, i.e. facial hair, deep voice, muscle bulk. The main androgen hormone is testosterone.

ANDROGEN DEPRIVATION THERAPY - usually with combined androgen blockade, is a standard initial treatment for advanced

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prostate cancer. Drug therapy to intermittently block the formation of androgens.

ANTI-ANDROGEN - used to stop the production of androgens i.e. testosterone. 'Non steroidal' anti-androgens include flutamide and drogenil, they are reported not to significantly affect sex-drive.

ANTIBIOTIC - drug usually synthesized from micro-organisms that helps cure infections caused by bacteria. A broad-spectrum antibiotic is effective against many types of bacteria. A narrow-spectrum antibiotic is effective against a limited number of bacterial types. Natural antibacterials include: tea tree oil (*Melaleuca alternifolia*), grapefruit seed extract, thyme oil, oregano oil, olive leaf extract and colloidal silver.

ANTIFUNGAL - a drug used against fungal organisms that cause vaginal yeast infections in women that can also cause corresponding infections of the male prostate. Natural antifungals include: East Cape Manuka oil, colloidal silver and black walnut tincture.

ANTI-HISTAMINE - drug used mainly to treat various allergies caused by the presence in the body of histamine, a substance that builds up in the body from an allergic reaction. **Antihistamines usually cause some increased difficulty in urination.**

ANTI-INFLAMMATORY - drug that helps reduce pain, swelling, heat, and other irritation, resulting from infection or other causes such as prostatitis or prostatodynia. Natural anti-inflammatory supplements include: green lipped muscle extract and bromelain.

ANUS - the muscular opening at the lower end of the rectum through which solid waste is eliminated.

ARTIFICIAL SPHINCTER - prosthesis or artificial device sometimes used to treat incontinence after prostate surgery. An artificial sphincter substitutes for natural urinary sphincter muscles that normally control the urine flow from the bladder.

BENIGN – a tumour that is not cancerous and will not spread to other parts of the body. Benign means not life-threatening.

BENIGN PROSTATIC HYPERTROPHY (BPH) - a non-cancerous enlargement of the prostate. (Old name for BPH.)

BENIGN PROSTATIC HYPERPLASIA (BPH) - a non-cancerous enlargement of the prostate.

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BENIGN PROSTATIC OBSTRUCTION (BPO) - is a non-malignant enlargement of the prostate and is a common cause of lower urinary tract symptoms in men older than 40 years of age.

BILATERAL EXTRACAPSULAR EXTENSION - the tumour has spread outside the prostate capsule on both sides.

BIOFEEDBACK - treatment method based on psychological principles in which patients are trained to control some form of bodily activity by observing sight or sound signals. Biofeedback has been used to treat prostatodynia

BIOPSY - a small sample of tissue that is taken and microscopically examined for cancer cells.

BISPHOSPHONATES - are a family of drugs used to prevent and treat osteoporosis. They are used to alleviate bone pain in certain cases of prostate cancer.

BPH - see benign prostatic hypertrophy OR benign prostatic hyperplasia

BPO - see benign prostatic obstruction

BRACHYTHERAPY - another name for various types of internal radiation therapy for prostate cancer. Seeds are planted into the prostate to give a measured dose of radiation.

CAB: see combined androgen blockade

CAPSULE - a layer of cells covering an organ such as the prostate.

CASTRATION - removal of the testes; surgical castration is also called orchiectomy; medical OR chemical castration is done with LHRH analogs.

CELL - the basic structural and functional micro-units of the body.

CHEMICAL CASTRATION - the use of LHRH analogs to stop the hormones that manufacture sperm and co-ordinate the sex drive.

CHEMOTHERAPY - treatment with powerful drugs that attack cancer cells, but can also harm certain types of healthy cells.

CHLAMYDIA – is an infectious microorganism (bacteria) associated mostly with vaginal infections in women. In men, it is characterised by a whitish discharge from the penis. It is often called the ‘silent disease’ because it usually goes unnoticed, until too late. Chlamydia bacteria are highly contagious and can be sexually transmitted and can also cause a form of prostatitis.

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CHRONIC PROSTATITIS – a persistent form of prostatitis lasting for a long period, sometimes years. Chronic prostatitis usually has fairly mild symptoms that may, at times, become acute.

CLINICAL TRIALS - studies conducted on patients with cancer or other diseases, usually to evaluate a new or investigational treatment. Each study is designed to answer specific questions and to find better ways to treat patients.

COMBINED ANDROGEN BLOCKADE (CAB) - hormone therapy that involves combining an anti-androgen drug with an LHRH analog or orchidectomy. Also called maximum androgen blockade (*MAB*): or total androgen blockade (*TAB*).

COMPUTERISED TOMOGRAPHY (CT scan) - an X-ray technique employing modern computer technology to enhance image quality. CT is valuable for examining soft body tissue.

CONFORMAL PROTON BEAM RADIATION THERAPY - similar to 3-dimensional conformal radiation therapy except that it uses protons to produce the radiation.

CORPUS CAVERNOSAGRAM Corpus - test used in treatment of impotence in which a dye is injected into the penis so that a series of X rays can be taken of the interior structure. May reveal the location of leaking veins responsible for the inability to sustain an erection.

CORPUS CAVERNOSUM Corpus - body of tissue inside the penis containing thousands of expandable sac-like structures known as sinuses. When the sinuses fill up with blood, an erection occurs.

COX-2 INHIBITORS – these anti-inflammatory drugs seem to have a therapeutic effect on prostate cancer at any stage of the disease. More trials are underway to determine the viability of treating patients.

CPPS – chronic pelvic pain syndrome. See Prostatodynia

CRYOSURGERY - see cryotherapy.

CRYOTHERAPY - repeated freezing and thawing of the tumour cells which result in cell death.

CT SCAN – see computerised tomography

CYPROSTAT – Cyproterone acetate, steroid that blocks produc-

A-Z GLOSSARY OF MEDICAL TERMS

tion and the effects of androgens.

CYTOSCOPE - An endoscopic 'urinary area' viewing instrument.

CYTOSCOPY - Endoscopic viewing of the bladder and surrounding area, usually via the urethra.

DIGITAL RECTAL EXAMINATION (DRE) – although this sounds electronic, it isn't. It is an examination performed by a doctor in which he inserts a gloved, lubricated finger into the rectum to feel the prostate for abnormal size or shape.

DIURETIC - a drug, food, or beverage that promotes increased urine excretion.

DOWNSIZING - decrease in the size of the tumour, also called volume reduction.

DNA PROBE – a recently developed diagnostic tool based on the application of modern molecular genetics. In the future, DNA probes may provide a more accurate, and possibly non-invasive diagnosis of prostate cancer.

DRE: see digital rectal examination.

DRY EJACULATION – see retrograde ejaculation.

DUCT - a tube-like structure in a gland that carries secretions.

EJACULATION - to eject sperm and seminal fluid from the penis.

ELECTROSTIMULATION – the use of a mild electrical current to stimulate ejaculation or to strengthen muscle action controlling voiding in incontinent people.

ENDOTHELIN BLOCKERS - may stop the growth of cancer cells by attaching themselves to growth receptors (endothelin receptors) on the surface of the prostate cancer cells. Trials are currently under way with Atrasentan and a drug so far named YM598. Initial results show that endothelin blockers may be able to slow down the growth of cancer in the bone and delay the symptoms of secondary bone cancer, when given to men with advanced prostate cancer. More studies will need to be completed before it is known whether it will be a successful treatment.

ENDOTHELIN-RECEPTOR ANTAGONISTS – see endothelin blockers.

EPIDIDYMIS - long coiled tube attached to each testis, where sperm is fully matured and then stored in the seminal vesicles until

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ejaculation via the urethra.

EPIDIDYMITIS – an infection, frequently found in cases of prostatitis, of the tubes surrounding the testicles, It typically causes pain in the testicles

ERECTION - enlargement of the penis due to increased blood flow; this most often occurs during sexual stimulation.

RECTILE DYSFUNCTION – a term used to mean any problem that stops a man achieving and sustaining an erection. Also called impotence.

EXTERNAL BEAM RADIATION THERAPY - radiation therapy that uses rays from a machine directed at parts of the body from the outside.

FLOW METER - an instrument for measuring rate of urine flow, available from chemists. The doctor may ask for a flow measurement to be carried out.

FOSCAN – A light sensitive drug that targets cancerous tissue. Patients are light sensitive for few weeks. Not commonly used now.

GENE THERAPY – initial trials are underway to determine if cancer cells can be killed by injecting them with a genetically enhanced virus. Gene therapy is only used for men whose cancer is so aggressive it cannot be stopped by any other treatment. As it develops it may become a mainstream treatment.

GONADOTROPHIN HORMONES - Hormones stimulate cells in the gonads (testes).

GONADOTROPHIN-RELEASING HORMONE ANTAGONISTS - used to treat BPH, but may adversely affect sex-drive.

GLEASON GRADING SYSTEM - the most commonly used prostate cancer grading system. It involves assigning numbers (*called a Gleason grade*): to cancerous prostate tissue, ranging from 1 through 5, based on how much the arrangement of the cancer cells mimics the way normal prostate cells form glands. Two grades are assigned to the most common patterns of cells that appear; these two grades (*they can be the same or different*): are then added together to determine the Gleason score (*a number from 1 to 10*).

GYNECOMASTIA - enlargement of the breast tissue in males.

HAEMATOSPERMIA – a frightening, but not necessarily serious

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condition in which blood is found in seminal fluid. Can be caused by a prostate infection

HAEMATURA - blood in the urine, may give a smoky appearance to the urine or be invisible.

HYDRONEPHROSIS - Where the kidney becomes swollen with urine because of obstruction in the urinary tract. Can cause severe damage if left untreated.

HYPERTHERMIA - warming the prostate so that it shrinks, a treatment for BPH.

HIGH-DOSE RATE BRACHYTHERAPY - brachytherapy in which the seeds contain more radioactive material than traditional (low-dose) brachytherapy, and the seeds are placed only temporarily into the prostate.

HORMONE THERAPY - in prostate cancer, treatment that lowers or cuts out the production or activity of male hormones that promote prostate tumour growth.

IDIOPATHIC PROSTATITIS – prostatitis without a known cause.

IMAGING TESTS - tests that produce pictures of areas inside the body which help diagnose and stage cancer.

IMMUNE SYSTEM - the immune system is a complex network of cells and organs that work together to defend the body against foreign substances (antigens) such as bacteria, a virus or tumour cell. When the body discovers such a substance several kinds of cells go into action in what is called an immune response.

IMMUNOTHERAPY - treatments work by stimulating the body's immune system to attack the body's cancer cells. A drug called GM-CSF is used to control the growth of prostate cancer.

IMPLANT RADIATION - radiation therapy that is given internally. This is done by placing radioactive material that is sealed in needles, seeds, wires, or catheters directly into or near the tumour. Also called internal radiation, interstitial radiation, or brachytherapy.

IMPOTENCE - inability to have or sustain an erection.

IMRT see Intensity Modulated Radiation Therapy

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INCONTINENCE - uncontrollable passing of urine.

INGUINAL - pertaining to the groin, the common site for hernias and the location of the inguinal lymph nodes, an area where cancer may spread.

INTRAVENOUS PYELOGRAM (IVP) - an X-ray of the urinary tract to view obstruction.

INTRAVESICAL - within the bladder.

IPSS - The International Prostate Symptom Score is a questionnaire used initially by doctors to assess the symptoms of prostate problems.

INTENSITY MODULATED RADIATION THERAPY (IMRT) - a form of external beam radiation therapy that uses computed tomography to create a 3-D picture of the prostate and surrounding organs, so radiation rays can be delivered only to the precise point. IMRT precisely delivers many thin radiation beams to the prostate gland. It allows for a high dose of radiation to be administered to the prostate while minimising effects on nearby organs.

INTERSTITIAL RADIATION THERAPY – another name for brachytherapy - treatment with high-energy radiation from tiny radioactive seeds inserted into the prostate.

INVESTIGATION THERAPY - therapies that are in the process of being evaluated for use to treat a disease or condition.

IRRITABLE BLADDER - frequent contraction of the bladder wall, due mainly to an infection, a catheter, a kidney stone or an enlarged prostate gland.

IRRITATED PROSTATE – a prostate condition associated with a lack of sexual activity, characterised by pain and other discomfort. See Sailor's Disease.

KEGEL EXERCISES – a system of pelvic floor exercises to diminish or overcome urinary incontinence. Regular Kegel exercises may help eliminate incontinence and even impotence in men following prostate surgery. (Named after a South Californian gynaecologist - Dr Arnold Kegel).

LHRH analog - see luteinising hormone-releasing hormone analog.

LITHOTROPY – a recently developed non-invasive technique that eliminates kidney and urethral calculi (stones) by ultrasound. The technique is not yet suitable for treating prostate stones.

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LUTEINISING HORMONE (LH) - this hormone is secreted by the pituitary gland. LH stimulates the secretion of sex hormones in both men and women.

LUTEINISING HORMONE-RELEASING HORMONE (LHRH) - this hormone is secreted by a part of the brain. LHRH stimulates the secretion of luteinising hormone by the pituitary gland.

LUTEINISING HORMONE-RELEASING HORMONE ANALOG (LHRH analog) - class of drugs used as hormone therapy for the treatment of prostate cancer. These drugs prevent the production of testosterone from the testes.

LYMPH - a whitish clear fluid collected from tissues around the body and returned to the blood by the lymphatic system. Lymph drains waste from cells.

LYMPHADENECTOMY - surgical removal of lymph nodes. Used to determine if the cancer has spread into the lymph nodes near the prostate.

LYMPHATIC SYSTEM - vessels that carry lymph are part of this system. Other parts include lymph nodes and several organs that produce and store infection-fighting cells.

LYMPH NODES - small bean-shaped structures scattered along the vessels of the lymphatic system. The lymph nodes filter out or remove waste, bacteria, and cancer cells that may travel through the lymphatic system.

MDM2 – is a protein involved in regulating cell growth and has been linked to prostate tumours and other cancers. It is currently being studied as a biomarker for diagnosing the aggressiveness of prostate cancer. The research may lead to better diagnostic techniques and treatments.

MALIGNANT - a term for a tumour that can threaten a person's life; a tumour that is cancerous. Malignant means cancerous / spreading.

METASTASIS - the spread of cancer from its primary site to nearby or distant areas through the blood and/or lymph and sometimes into the bone.

METASTRON[®] - see Strontium 89.

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NEOADJUVANT - therapy that is given before local treatment in order to improve the success and results of the radiation or surgery.

NEOPLASM - any abnormal growth in the body. A neoplasm may be benign or malignant

NERVE-SPARING RADICAL RETROPUBIC PROSTECTOMY - surgical removal of the prostate, through an incision in the lower abdomen, in which the nerves on either side of the prostate are left alone.

NOCTURIA - a need to pass urine at night, causing sleep disturbance.

NON-STEROIDAL ANTI-ANDROGEN – anti-androgens that do not have a steroid component. These are the only types of anti-androgens that are available in the US.

OESTROGEN - a female sex hormone.

ONCOLOGIST - a doctor who specialises in treating cancer.

ORCHIDECTOMY – surgical removal of the testes (the major source of male hormones) to inhibit testosterone production and in testicular cancer.

ORCHIDITIS - is an inflammation of the testes.

ORCHIDOPEXY - is an operation to correct undescended testis.

OVERFLOW INCONTINENCE - characterised by a temporary inability to empty the bladder, followed by uncontrollable urine flow.

PALLIATIVE THERAPY - therapy that is intended to provide relief of symptoms but is not intended to cure a disease or extend life.

PATHOLOGIST - a doctor who specialises in the diagnosis of disease by studying cells and tissues with a microscope.

PERCENT FREE-PSA RATION - compares the amount of PSA in the blood by itself (*unbound*): and the amount that is attached to other blood proteins (*bound*).

PERINIUM - the area of skin between the scrotum and the anus.

PEYRONIE'S DISEASE – is caused by a plaque buildup along the walls of the erectile tissues of the penis. When this results in scarring it creates a bend in the penis that may make vaginal penetration impossible or, if achieved, may cause intercourse to be very painful.

PFANNENSTIEL - A lower abdominal incision often used in retropubic prostatectomy.

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PHOTODYNAMIC THERAPY - a laser treatment developed by the National Medical Laser Centre in London. Treatment takes less time and it can be used earlier in cancer treatment, for reoccurring cancer and for cases where surgery or radiotherapy would be dangerous.

PITUITARY GLAND - an important endocrine gland, situated at the base of the brain. It is a small pea-sized gland that regulates and controls the activity of other endocrine glands by secreting hormones directly into the blood stream. It produces hormones that stimulate the testes (and other glands) to release hormones.

PITUITARY DOWN-REGULATORS - injections to block hormones (can be given with anti-androgens to stop a sudden flare up of symptoms). See Zoladex

PRIAPISM – a serious medical emergency characterised by a painful and unwanted erection that persists for an extended period of time.

PRIEST'S DISEASE – an irritated prostate condition resulting from prolonged periods of sexual abstinence.

PROGNOSIS - a prediction made as to the likely outcome of a disease.

PROSCAR - (Finasteride), a drug usually prescribed for an enlarged prostate, its effectiveness has been thrown into question by several studies in the US. Ask GP about the many side effects.

PROSTADYNIA - (or Prostatodynia) also called non-inflammatory chronic pelvic pain syndrome (CPPS). Painful, inflamed prostate. May be linked with interstitial cystitis. Prior to 1995, the diagnosis of prostatitis was classified into 4 categories: acute bacterial prostatitis, chronic bacterial prostatitis, nonbacterial prostatitis, and prostatodynia. In 1995, a new classification scheme was developed. The first 2 categories remained the same, i.e. acute and chronic bacterial prostatitis. Non-bacterial prostatitis and prostatodynia were combined as category III, i.e. chronic abacterial (idiopathic) prostatitis/chronic pelvic pain syndrome (CPPS). Category III was further subdivided into IIIa, i.e. inflammatory CPPS, and IIIb, i.e. non-inflammatory CPPS. Category IV includes asymptomatic inflammatory prostatitis.

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PROSTATE MASSAGE - stroking and kneading the prostate using a gloved finger inserted through the rectum. Prostate massage is used to obtain a sample of prostatic fluid for laboratory examination or to relieve prostate congestion.

PROSTATIC INTRAEPITHELIAL NEOPLASIA (PIN) - has been identified as a precursor lesion to prostate cancer. PIN refers to the precancerous end stage, which begins with cellular proliferation within prostatic ducts, ductules, and acini. Two stages of PIN are now classified: low-grade (LG-PIN) and high-grade (HG-PIN). It is estimated that 30% of men with HG-PIN develop clinical evidence of prostate cancer within a year. (Omega 3 oils have been found to stop neoplastic formation in vitro.)

PROSTATOSIS - Fluid congestion of the inner gland of the prostate giving BPH symptoms, responds well to frequent ejaculation, sitz baths, massage of prostate via rectum and rectal irrigation.

PROSTATECTOMY - the surgical removal of the prostate gland.
PROSTATE-SPECIFIC ANTIGEN (PSA) - a protein made by the prostate gland that often increases in cases of prostate cancer, inflammation, trauma or benign swelling to the gland.

PROSTATITIS - inflammation of the prostate.

PSA - see prostate-specific antigen.

PSAD - see PSA density.

PSA DENSITY - determined by dividing the PSA level by the size or volume of the prostate.

PSA VELOCITY - shows how quickly the PSA rises over a period of time.

PUBOCOCCYGEUS MUSCLES – a group of muscles near the rectum. Kegel exercises strengthen these muscles and may help to alleviate incontinence.

PUSSYCAT CANCER – very slow-growing cancer that is contained within the prostate and is unlikely, but not impossible, to spread to surrounding tissue within the patient's lifetime.

Qmax – peak urinary flow rate.

QUINOLONES - are antimicrobial agents effective in the treatment of selected infections, and can be used in the treatment of prostatitis.

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They are usually administered orally, but some can be given intravenously for treatment of serious infections.

RADIATION THERAPY - treatment with high-energy rays such as X-rays to destroy cancer cells.

RADICAL PERINEAL PROSTATECTOMY - surgical procedure in which the prostate is removed through an incision in the perineum.

RADICAL PROSTATECTOMY - surgical removal of the prostate and nearby areas such as the seminal vesicles and lymph tissue.

RECTUM - the last 5 or 6 inches of the intestine leading to the outside of the body, via the anus.

REFRACTORY – a condition referring to a disease that can no longer be controlled by the current treatment program. When prostate cancer is said to be refractory, there is a need for some form of additional treatment because it is starting to spread.

RETROPUBIC PROSTATECTOMY - surgical procedure in which the prostate is removed through an incision in the lower abdomen.

SAILOR'S DISEASE – an irritated prostate condition resulting from prolonged periods of sexual abstinence.

SCHISTOSOMIASIS – a serious disease caused by parasitic worms harboured by snails in some Third World countries. The worms can invade the prostate and cause a form of prostatitis.

SCROTUM - the external sac, or pouch, containing the testicles.

SEMEN - the fluid that is ejaculated during sexual climax; it contains the sperm and fluids from other glands, including the prostate.

SEMINAL VESICLES - Pouches located above the prostate and stores matured sperm until ready to ejaculate.

SPERM - mature male sex cell that is ejaculated along with seminal fluid during sexual intercourse. Contains half the genetic code to make a baby.

STAGE - a term used to describe the size and extent of the spread of cancer.

STEROIDAL ANTI-ANDROGEN – anti-androgens that have a steroid component. These drugs are not available in the US.

STRONTIUM 89 - (Metastron) a radioactive material used when

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the cancer has spread to the bones; sometimes used in interstitial radiation (brachytherapy). It is a similar structure to calcium and collects in the bones, where it stays radioactive for about 7 days. It may help to relieve the bone pain that is associated with bone metastasis. Can be given as an outpatient treatment.

RADIONUCLIDE SCANNING - a diagnostic technique using minute doses of radioactive substances to detect if the cancer has spread.

RECTAL IRRIGATION – cold saltwater to decongest prostate, studies suggest it shrinks enlargement of the prostate.

RETROGRADE EJACULATION – where the sperm goes backwards into the bladder during orgasm. Also called a ‘dry’ orgasm. About 80% of men who have the TURP procedure will suffer from this. Usually is associated with infertility. No long-term health damage, just a different kind of sensation.

TERAZOSIN - an alpha blocker, effective in some cases of enlarged prostate, prescribed for BPH etc.

TESTES - two egg-shaped glands within the scrotum that produce sperm and secrete male hormones.

TESTICLES - the term testicles is used to describe the testes and the system of ducts contained within the scrotum.

TESTOSTERONE - a male sex hormone produced primarily by the testes. Testosterone stimulates a man’s sexual activity and the growth of other sex organs, including the prostate.

THREE DIMENSIONAL CONFORMAL RADIATION THERAPY (3D-CRT) - the use of high-tech computers and a body mould for more accurate delivery of radiation to the prostate without ‘cooking’ the surrounding tissue.

TIGER CANCER – a term used to describe aggressive cancer of the prostate.

TISSUE - a group of cells organised to perform a specialised function.

TRANSRECTAL ULTRASONOGRAPHY – US version of Transrectal Ultrasound Scan.

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TRANSRECTAL ULTRASOUND SCAN (TRUS) - using sound waves produced by a device inserted into the rectum to produce a picture of the prostate.

TRANSURETHRAL RESECTION OF THE PROSTATE – for BPH - the use of a special instrument inserted through the urethra to remove non-cancerous prostate tissue. Also called **TUR** or **TURP**.

TRUS – see **Transrectal Ultrasound Scan** (transrectal ultrasonography - in US).

TUMOUR - an excessive growth of cells resulting from uncontrolled and disorderly cell replacement. Tumours may be cancerous (*malignant and spreading*) or non-cancerous (*benign and dormant*).

TUNA - Transurethral Needle Ablation of Prostate

TURP: see transurethral resection of the prostate.

ULTRASOUND – high-frequency sound waves used for diagnosis and treatment. In an ultrasound scan (or sonogram), sound waves are reflected by internal organs to produce computer-enhanced images. Ultrasound can also be used to treat prostate enlargement.

UNILATERAL EXTRACAPSULAR EXTENSION - the tumour has spread outside the prostate capsule only on one side.

URETER - the tube that carries urine from each kidney to the bladder.

URETHRA - the tube running through the penis to the outside of the body. It carries urine from the bladder and semen from the sex glands.

URETHRITIS - an infection sometimes caused by a sexually transmitted disease. (Non-specific or Nongonococcal urethritis, not caused by gonorrhoea etc)

URINARY INCONTINENCE - loss of urinary control.

UROGRAPHY - (pyelography) a radiopaque substance introduced into the bloodstream visible on x-rays when excreted by kidneys, etc. Not used with people who are sensitive to iodine.

UROLOGIST - a doctor who specialises in diseases of the male sex organs and in diseases of the urinary organs in both men and women.

VACCINE THERAPY – there are a few different cancer vaccines in the pipeline. They aim to stimulate the body's own immune system to attack and destroy the cancer cells, before they start to grow and cause a problem.

VAS DEFERENS - a long narrow tube on each side of body,

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carrying sperm released from each testis via epididymis to the seminal vesicles and urethra.

VOID – to empty the bladder. (Term also used for emptying the bowels)

VOIDING STUDIES - studies used to diagnose and evaluate benign prostate enlargement, involving observation and measurement of a patient's urinary flow (void volume) and related characteristics

VOLUME REDUCTION - decrease in the size of the tumour, also called downsizing.

WATCHFUL WAITING - when prostate cancer is simply watched by the doctor using regular digital rectal examinations and PSA blood tests.

WHITE BLOOD CELLS – are part of the immune system. They consist of: Neutrophils, Lymphocytes, Monocytes, Eosinophils and Basophils.

ZYFLAMEND – an anti-inflammatory pill, containing olive oil and 10 traditional and exotic herbs. Studies are underway to decide whether it can actually prevent prostate cancer.

ZOLADEX - Goserelin acetate, stimulates and then inhibits testosterone, used in combination therapy.

Chapter 15

REFERENCE SECTION

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USEFUL ADDRESSES (UK)

Please include a SAE when contacting.

ACUPUNCTURE

British Acupuncture Council 63 Jeddo Road, London W12 9HQ
Phone: 020 8735 0400 www.acupuncture.org.uk

British Medical Acupuncture Society

12 Marbury House, Higher Whitley Warrington WA4 4QW
Phone: 01925 730727 www.medical-acupuncture.co.uk

ALTERNATIVE MEDICAL PRACTITIONER

See Integrated Medicine See Complementary Medicine

AROMATHERAPY

International Federation of Aromatherapy

182 Chiswick High Road London W4 1TH
Phone: 020 8742 2605 www.int-fed-aromatherapy.co.uk

AYURVEDIC MEDICINE

Ayurvedic Medical Association UK 1079 Garratt Lane London SW17
0LN Tel: 020 8682 3876

COMPLEMENTARY MEDICINE - See Integrated Medicine

Institute for Complementary Medicine

PO Box 194, London SE16 7Q2
Phone: 020 7237 5165 www.icmedicine.co.uk

The Guild of Complementary Practitioners (GCP)

Liddell House Liddell Close Finchamstead Berkshire RG40 4NS
Tel: 118 973 5757 Email: info@gcpnet.com Web: www.gcpnet.com

HERBALISM (CHINESE)

The Register of Chinese Herbal Medicine,
Office 5, 1 Exeter Street, Norwich, NR2 4QB
Tel: 01603 623994 <http://www.rchm.co.uk/>

HERBALISM (WESTERN)

National Institute of Medical Herbalists 56 Longbrook Street, Exeter
EX4 6AH Phone: 01392 426022 www.nimh.org.uk

HOMEOPATHY

British Homeopathic Association and Faculty of Homeopathy

15 Clerkenwell Close, London EC1R 0AA

Overcome Prostate Problems

Phone: 020 7566 7800 www.trusthomeopathy.org

INCONTINENCE ORGANISATIONS

Continenence Foundation

307 Hatton Square 16 Baldwins Gardens London EC1N 7RJ
A confidential telephone help line on bowel and bladder problems.
Phone: 0845 345 0165 (Mon- Fri 9.30 am - 1 pm)
Website: www.continenence-foundation.org.uk

InContact United House North Road London N7 9DP
Helpline: 0870 770 3246 (Monday to Friday 9am to 5pm)
Website: www.incontact.org Email: info@incontact.org
INCONTACT is a national support organisation for incontinent people and their carers.

INTEGRATED MEDICINE

The Prince of Wales's Foundation for Integrated Health

33-41 Dallington Street, London EC1V 0BQ
Tel: 020 3119 3100 Website <http://www.fihealth.org.uk/>

The British Society of Integrated Medicine

<http://www.bsim.org.uk/>

Professor George Lewith MA, DM, FRCP, MRCP
Centre for Complementary and Integrated Medicine (CCIM)
56 Bedford Place, Southampton, Hampshire S015 2DT
Telephone: (023) 8033 4752 Fax: (023) 8023 1835 14 Also at:
Harley House, Brunswick Place (Formerly Upper Harley St.), London NW1 4PR. Tel: 020 7935 7848 <http://www.complemed.co.uk/>

Dr Peter Mansfield MA,MB, B.Chir., Cert. GAM,MIPsi.Med.
Good HealthKeeping Ltd Garrod House, Manby Park, Manby
Nr Louth Lincolnshire LN11 8UT Tel: 0845 644 3485
www.replete.org/ <http://www.goodhealthkeeping.co.uk/>

USEFUL ADDRESSES (UK)

THE DOVE CLINIC FOR INTEGRATED MEDICINE

Offers Photodynamic and Sonodynamic Therapy treatments.

Dr Julian Kenyon M.D., M.B.Ch.B. The Dove Clinic for Integrated medicine, Hockley Mill Stables, Church Lane, Twyford, Hants, SO21 1NT. Tel: 01962 718000, Fax: 01962 718011

THE DOVE CLINIC also at:

London Clinic, 19, Wimpole Street, London, W1G 8GE

Tel: 020 7580 8886 <http://www.doveclinic.com>

Somerset Trust for Integrated Healthcare Glastonbury Health Centre, 1 Wells Road, Glastonbury, Somerset BA6 9DD.

Telephone 01458 834100 <http://www.integratedhealth.org.uk>

MedicAlternative Holistic GP Practice

Waterside House, 19 Hawthornbank Lane, Edinburgh, EH4 3BH

Tel: 0131 225 5656 <http://www.medicalalternative.com/>

KINESIOLOGY

International College of Applied Kinesiology ICAK UK

Donechka Clinic Southwater West Sussex RH 13 9EY

Tel: 01403 734321 <http://www.tasite.com/newicak/index.asp>

NATUROPATHY

The General Council and Register of Naturopaths

Goswell House 2 Goswell Road STREET BA16 0JG,

TEL: 0870 7456984 <http://www.naturopathy.org.uk/>

NUTRITION

Institute of Optimum Nutrition (ION)

Avalon House 72 Lower Mortlake Road Richmond Surrey TW9 2JY

Tel: 0870 979 1122 <http://www.ion.ac.uk>

ORGANIC FOOD SUPPLIERS:

Soil Association Bristol House, 40-56 Victoria Street, Bristol, BS1 6BY

www.soilassociation.org/ NB The Soil Association accepts bacon and ham products that contain added nitrites (Preservatives E250 & E251), as 'ORGANIC'.

Swaddles Green Farm Freepost Chard TA20 3ZB

Tel: 0845 456 1768 01460 234 387 <http://www.swaddles.co.uk/>

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Supplies organic bacon, gammon and ham cured with an old fashioned sweet brine, without using sodium nitrates and nitrites.

OSTEOPATHY

The British Osteopathic Association Langham House West, Mill Street Luton, Bedfordshire.UK. LU1 2NA

Tel: 01582 488455 <http://www.osteopathy.org/>

POLARITY THERAPY

UK Polarity Therapy Association UKPTA, Monomark House, 27 Old Gloucester Street, London, WC1N 3XX

Tel: 0700 7052748 <http://www.ukpta.org.uk>

PROSTATE: MEDICAL TREATMENTS

The Da Vinci System - UK Offers private operations.

The Princess Grace Hospital

42-52 Nottingham Place London, W1U 5NY.

Tel: 020 7486 1234 www.theprincessgracehospital.com/

National Institute for Health and Clinical Excellence (NICE)

MidCity Place 71 High Holborn London WC1V 6NA

Tel: 020 7067 5800 nice@nice.org.uk <http://www.nice.org.uk/>

Photodynamic Therapy

See the Dove Clinic for Integrated Medicine (Integrated Medicine)

The ‘Spanner’ - AbbeyMoor Medical, Inc.

(USA) US: +1 218 338 6700 International: +32 9 388 5008

Email: customerservice@abbeymoormedical.com

Website: <http://www.abbeymoormedical.com/>

TARGETED CRYOABLATION OF THE PROSTATE.

Mr John H Davies BSc, FRSC(Ed), FRCS(Urol)

General practioner, urological surgeon or oncologist. Referrals can be made by patient’s general practitioner or by their urological surgeon.

NHS Consultations and Treatment Department of Urology

Royal Surrey County Hospital Egerton Rd Guildford GU1 3TBTel:

01483 571122 Extension 4878

USEFUL ADDRESSES (UK)

Private Consultations Mount Alvernia Hospital

Harvey Rd Guildford GU1 3LX

Tel: 01483 567517 jhdavies@cryosurgery.co.uk

TomoTherapy HI-ART - UK www.tomotherapy.com

The Cromwell Hospital Cromwell Road London SW5 0TU.

Email: info@cromwellhospital.com

Telephone: 020 7460 2000 www.cromwellhospital.com

TUNA / Transurethral Needle Ablation of Prostate

Francis Chinegwundoh - Contact Private Practice

MBBS MS FRCS (Eng & Ed) FRCS(Urol) FEBU

142-146 Harley Street, London W1G 7LD **Tel:** 020 7935 0023

Private secretary tel/fax: 020 8851 0849

email: mail@urologyconsultant.co.uk

Admitting rights and appointments by arrangement at London Independent Hospital, BUPA Roding, London Clinic, Cromwell Hospital, London Bridge Hospital, Holly House Hospital, Wellington Hospital

Francis Chinegwundoh – Contact on National Health Service

Referrals can be made by patient's general practitioner or by their urological surgeon. Department of Urology, Barts and The London NHS Trust, St Bartholomew's Hospital, West Smithfield, London EC1A 7BE

Tel: 020 7601 8391 **email:** Frank.Chinegwundoh@nhs.net

Department of Urology, Newham Healthcare NHS Trust, Glen Road, London E13 8SL **Tel:** 020 7363 8227

TURP INFORMATION

http://hcd2.bupa.co.uk/fact_sheets/pdfs/turp.pdf

PROSTATE ORGANISATIONS

Alliance for Prostate Cancer Prevention USA (APCaP) has been created to support efforts to prevent the serious consequences of the disease itself for men who have not been diagnosed and are unaware of the deadly effects of prostate cancer.

<http://www.apcap.org/index.html>

The Cancer Help website gives valuable information on all types of cancer and the side effects of treatment. They also list current re-

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search, which your doctor may be able to help you sign up for, or he could request the drugs / treatment for your particular case.

<http://www.cancerhelp.co.uk/>

Medical Advisory Service

Patients Communication Campaign PO Box 3087 London W4 4ZP

Men's Helpline: 020 8995 4448 (Mondays 7pm-9pm)

Prostate Cancer Helpline: 0845 300 8383 (Mon-Fri 10am-4pm & Weds 7pm-9pm) Website: www.medicaladvisoryservice.org.uk

The Medical Advisory Service offers information and advice on medical and healthcare problems.

The Prostate Cancer Charity

3 Angel Walk Hammersmith London W6 9HX Tel: 020 8222 7622

Email: info@prostate-cancer.org.uk

The Prostate Helpline

Telephone: 0845 300 8383 Monday to Friday 10am - 4pm
plus Wednesday 7pm - 9pm

Textphone: 0845 300 8484 Monday to Friday 10am to 4pm

The Prostate Help Association

PHA(2003)(W), Langworth,

Lincoln, LN3 5DF, UK. <http://www.pha.u-net.com/index.htm>

They produce newsletters and run a support network.

Prostate Cancer Support Association (PSA)

Prostate Cancer Support Association BM Box 9434

London WC1N 3XX Helpline: 0845 6010766

Website: <http://www.prostatecancersupport.co.uk>

Email: psagensec@blotholm.org.uk

PSA was set up by a group of men with prostate cancer in 1995.

They run a helpline, website and have local groups around the UK.

The Prostate Project is an appeal to aid prostate cancer awareness, detection and treatment at the Royal Surrey County Hospital, St

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Luke's Cancer Centre and Frimley Park Hospital. It is a major advance for prostate cancer research.

The Department of Urology at the Royal Surrey County Hospital in Guildford, in association with the St Luke's Cancer Centre and Frimley Park Hospital, aims to provide the highest quality care for patients with urological malignancy.

<http://www.prostate-project.org.uk/>

The Prostate Project Foundation, Postgraduate Medical School, Daphne Jackson Road, Manor Park, Guildford, Surrey GU2 7WG
Tel: 01483 688555 Email: s.mclaren@surrey.ac.uk

Sexual Dysfunction Association

Windmill Place Business Centre 2-4 Windmill Lane Southall
Middlesex UB2 4NJ Helpline: 0870 7743571

Email: info@sda.uk.net Website: www.sda.uk.net

This organisation gives advice and produces leaflets on impotence and its treatment.

WWW.mywavelength.com

A free, web-based support network where people can get in touch with others who have the same type of cancer as themselves, a relative or a friend. Just click the link, choose 'C' for cancer and choose the cancer type you are interested in from the list. You can join the network and post a message asking other people to contact you through the site. The network is safe and confidential. People can only contact you through www.mywavelength.com boards.

BOOKLETS/INFO AVAILABLE (Send SAE where applicable)

Surgery on the Prostate, The Royal College of Surgeons, Surgical Audit Unit 35-43 Lincoln's Inn Fields, London, WC2A 3PN

Prostate Cancer Charity, Du Cane Road, London, W12 0NN
Prostate Helpline 0845 300 8383 <http://prostate-cancer.org.uk/>

Prostate Cancer Research Centre, 3rd Floor 67 Riding House Street, London W1W 7EJ <http://www.prostate-cancer-research.org.uk>

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Send a SAE for booklet: The Treatment of Prostate Cancer

Continence Foundation, 2 Doughty Street, London, WC1N 2PH
In Contact Helpline 020 7831 9831 (9.30am – 1pm)

Listed below are some informative web sites, to view copy the selected address (URL), into the address section (usually at the top of the screen) of your web browser and press 'GO' or enter.

<http://www.prostatitis.org/>

<http://www.prostate-online.com/>

<http://www.prostate-cancer.org.uk/>

<http://www.prostatepointers.org/>

<http://www.capcure.org/>

Cancer Help UK

<http://medweb.bham.ac.uk/cancerhelp/indexg.html>

REFLEX MASSAGE

The British Massage Therapy Council
17 Rymers Lane Cowley Oxford OX4 3JU
01865 774123 (24 hour answer phone)
E-mail: info@bmtc.co.uk Website: www.bmtc.co.uk

Manual Lymph Drainage UK, PO Box 14491 Glenrothes Fife, KY6 3YE
Tel/Fax: 01592 748008 <http://www.mlduk.org.uk>

REFLEXOLOGY

British Reflexology Association

Monks Orchard, Whitbourne Worcester WR6 5RB Phone: 01886
821207 <http://www.britreflex.co.uk/>

YOGA

British Wheel of Yoga 25 Jermyn Street, Sleaford, Lincolnshire,
NG34 7RU Tel: 01529 306851 <http://www.bwy.org.uk/>

The Yoga Biomedical Trust, 90-92 Pentonville Road London N1 9HS.
020-7689 3040 <http://www.yogatherapy.org/>

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