

# Hikers raise £300,000



All ninety-three *Hikers for Hope II* gathered at the airport, everyone excited, but many with considerable trepidation about the challenge ahead. An overnight flight transported us to Nairobi from where we were catapulted along unspeakable roads to *Fish Eagle Camp* where we spent the first of our five nights under canvas in two-man tents. During that night hippopotami could be heard wallowing in the lake nearby. The trekkers were all either supporters of **Prostate UK** or Wellbeing of Women (WoW), mainly doctors, nurses,

patients and relatives of sufferers, and around a third were hardened veterans of the first *Hike for Hope* across the desert from the Dead Sea to Petra in Jordan.

Even the toughest of the *Hikers for Hope* were somewhat disconcerted by the thought of abseiling into *Hell's Gate Gorge* but one by one they were lowered, some tearfully, over the edge and down a vertical rock wall into the deep river valley. A scramble along the bed of the canyon ensued. This involved clambering over slippery rocks and wading through warm pools fed from the hot geysers that provided the *Hell's Gate Gorge* with its name, followed by a steep climb and trek across the savannah

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*'five nights under canvas'*

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back to our second camp overlooking the Rift Valley. Eagles circled above us and below, zebra, giraffe and buffalo could be seen grazing in the evening light.

The toughest challenge of the trek involved a steep climb to the top of an extinct volcano, Mount Longonot – made more difficult by the hot equatorial sunshine directly overhead. Each and every one of us got to the top for a team photograph and a very

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touching one minute silence held for departed friends and relatives. More than a few tears flowed and Terry, one of our trekkers, sorrowfully buried a piece of embroidery in memory of his best friend who had recently succumbed to prostate cancer. A four hour vertiginous hike around the jagged rim of the crater ensued with spectacular views of Lake Naivasha from the highest point of the Rift Valley. Peering into the crater one could see the lush vegetation undisturbed by human activity and buzzing with animal life.

Report by Roger Kirby

Two more tough days of savannah trekking ensued before a journey to Lake Nakuru, famous for its pink flamingos and an excellent game park with many lions and rhinoceri. To round off the hike a dinner and impromptu concert was held to celebrate the £300,000 raised, and to announce plans for *Hike for Hope III*. This will entail a mountain climb and five day, 100 mile hike across the Sinai Desert to the Red Sea in March 2009. Anybody keen to sign up, join me, Roger Kirby, Marcus Setchell and the team for *H4H3*.

## Grant Awards – March 2008

Three years ago we took the decision to increase the amount we award to research and training grants by 10% per year, and to date we have exceeded this: last year we gave over £608,000, which represented a 24% increase on the 2006 awards, which themselves were a 33% increase over the previous year. Our target this year is £670,000 but whether we achieve this will depend entirely on the standard of the applications: only truly worthwhile projects will receive grants, for there are many other demands on our funds.

Last autumn we placed a series of advertisements in professional magazines inviting applications for both Training and Research grants in the fields of prostate disease. To date over 30 applications for research have been received and these are now under peer review by the members of our Medical and Research Sub-group, all very eminent professionals in the urological

field. Their recommendations will be put to our Trustees in early March and the awards both for research and training will be announced in April: full details in the next *Update*.

## Prostatitis Symposium

Too late to report in this edition of *Update*, Prostate UK's Prostatitis Symposium is to be held on 30 January. Chaired by J. Curtis Nickel, the leading authority on prostatitis and with Lord Robert Winston facilitating the final discussion, it is sure to be a high profile event. We are hopeful that its proceedings will point the way to better methods of managing this painful and debilitating condition.

A full report will be published in our next edition.

## Valuable Volunteers

Like any charity Prostate UK relies on a valuable group of committed volunteers to help with many aspects of our work – from raising awareness and funds – to helping at our events or in the charity office. We are very grateful to all our volunteers and we hope to feature many of them in future editions of *Update*. This edition focuses on volunteers who help at events

Robin Whitcomb is one such supporter who not only volunteered to be the official photographer at our Annual Luncheon in October last year, but also helped to sell our Christmas cards one day a week at the Card Aid shop in Richmond. As well as teaching for some 30 years, Robin has always had a huge interest in sport, photography and music and has had two books published. His first *Wealding the Willow* is a picture portrait of village cricket in the Weald where the game first began. For more on Robin's books please visit [www.robinwhitcomb.co.uk](http://www.robinwhitcomb.co.uk) and to see the photos Robin took at our last Annual Luncheon please visit the events section of our website [www.prostateuk.org](http://www.prostateuk.org)

We also have a committed group of volunteers who provide invaluable support at our events. Our thanks to Clair Pattman,



Robin Whitcomb with his two sons

Robert Cecil, Neil Leonard, Wayne Jennings, Claire Annesley, Kirsty Smith, Karen Beeken, Jenny Wright, Jennifer Calvert, David Tomlinson, Kathy Pimlott and the members from the Officer Training Corps of the University of London, for helping at Pants in the Park and our Carol Concert.

## The Silent Killer - Hamish Marett-Crosby, who was diagnosed with prostate cancer just before Christmas 2006, looks back on a troubled 2007.

'This is surreal,' I thought. There I was lying back, looking up at the ceiling and – as I had missed both meals that day – munching a cheese roll. Further to the south, as it were, two young women were fiddling about between my thighs. In fact, they were attaching 22 leads linking me to a machine that was going to, and I quote: 'Sort me out.' All this was happening in the basement of the University College Hospital and I was undergoing a new procedure for dealing with aggressive prostate cancer. But I must start at the beginning.

'I have cancer,' I woke up saying to myself the day after the diagnosis

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*This is the time when support is essential*

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came through. Cancer! Like winning the lottery, it's something that happens to other people.

This is the time when support is essential because one can feel very, very low. I have that support. I am lucky.

I am also lucky in working in a radio news room. There are good jokes, bad jokes, scandalous gossip and the necessity of maintaining an on-air persona. All this is excellent therapy, you have neither the time nor the opportunity to feel sorry for yourself.

Of the various options for treating the disease, surgery and standard brachytherapy were out. It was too late, the cancer had spread. As a result High Dose Rate (HDR) brachytherapy was decided on, preceded by a nine-month course of hormone blocking drugs to shrink and starve the main tumour and minimise the other nodules that had spread from the prostate.

The hormone treatment worked in reducing the cancer but also

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*'Why are you crying'*

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had two bizarre side effects. I would get the occasional hot flush (no sympathy from my older women friends) and it also made me very weepy. 'Why are you crying' my granddaughter would ask as I struggled to the end of *The Selfish Giant*. 'Because it's sad,' I would reply brokenly as the tears rolled down.

Luck had brought me to consultant oncologist Dr. Heather Payne. She is in the vanguard of developing HDR treatment in the UK.

'I can't guarantee a cure, Hamish,' Heather said, 'but it's the best chance you are going to have.' Simple, straightforward and direct, the best way to encourage confidence.

Now to answer the obvious question. The treatment is invasive and unpleasant but not unbearable. Two days of lying down flat on your back with your legs propped up and with a load of needles in you is very uncomfortable, but nothing if one considers the alternative.

'We've burnt out that tumour of yours,' said Heather as I was discharged. It has been a text book case. It looks beautiful,' said this remarkable woman who can see beauty in a prostate.

It is too soon to be one hundred per cent sure, but I think I have been *sorted out*.



## Hamish's brachytherapy explained

Dr Heather Payne writes: High Dose Rate (HDR) temporary brachytherapy is a form of high dose radiotherapy. It is different to low dose rate (LDR) iodine seed brachytherapy which is a treatment option for early, non aggressive prostate cancer and involves small radioactive seeds that are permanently inserted into the prostate gland.

HDR can be indicated for some men with locally advanced or high risk prostate cancer (Gleason Grade>8 or PSA>20) who may benefit most from these higher doses of radiation. HDR is often given as a boost in combination with 4 – 5 weeks of external beam irradiation in order to give higher doses of radiotherapy to the prostate and seminal vesicles than would be possible with external beam treatment alone and minimise the dose to the surrounding healthy tissues (bladder and bowel).

The procedure involves a stay in hospital for a few days. Hollow flexible needles are inserted into the prostate under anaesthetic. A computer controlled brachytherapy machine then pushes a single high dose rate radioactive iridium wire into the needles for a few minutes for two or three treatments. The treatments are given over one to two days. The iridium source is removed in between the therapies but the hollow needles stay inside the prostate until the last treatment session is completed. The patient is not radioactive. This treatment is generally well tolerated and the long term side effects are similar to external beam radiotherapy.'

## Expat life exposed

Guy Woodford has set himself the amazing target of raising over £100,000 for **Prostate UK**. To assist him to cross the finishing line, 120 hard copies of



Left to right Robin Baillie, Glen Swire, Geoffrey Bignell and Guy Woodford with Geoffrey's book

Geoffrey Bignell's *Sundowners at Dawn* have been donated. All sale proceeds go to the fund. The book describes expatriate life in East Africa, the Middle East, the Indian Sub-Continent, the Far East and the USA. It has been well reviewed and should be of particular interest to those who have served overseas. Copies (£21.50 inc P&P) can be obtained from Guy via [guywoodford@bopenworld.com](mailto:guywoodford@bopenworld.com). When you contact him please include your address details and full postcode. He will send the book along with a payment request and a copy of the gift aid form.

## Mobile phone recycling



You should have received a mobile phone recycling envelope with your issue of *Update*. Please don't throw it away – you can

help us raise funds by recycling any unwanted mobile phones that you may have. Please also ask your friends, family or colleagues if they have any phones to donate – we will happily send you additional envelopes to distribute.

## Our thanks to...

**Roger Young** who entered the alternative Umbrella competition in Southwold Suffolk, with his innovative sculpture *Court in the Rain*, and collected £50 from passers by viewing his sculpture.

**Geoffrey Bowyer** who raised £130 from the proceeds of the sale of his vocal scores of the Pilgrim's Requiem.

**Jan Spaticchia** and the **Energie Fitness Clubs** in Milton Keynes for raising £733 from their annual fundraising event in October 2007.

**Gemini Oil & Gas** who, thanks to **Simon Oddie**, donated £500 to **Prostate UK** in lieu of sending paper Christmas cards to their clients.

**Alison Marsh** for organising a Ladies Night in the village of Othery, which raised £970 for **Prostate UK** as well as awareness amongst local people about prostate cancer.

**Barry Atkin** for raising £1000 in lieu of donations for his 60th Birthday.

**Tennants Auctioneers** who donated £1035 from the proceeds of their fine art sale.

**LX Group of Gerrards Cross Golf Club** for raising £1400 through raffles held at a recent Charity Lunch.

**Arnold and June Powell** for raising over £3000 from collecting donations in lieu of their Golden Wedding Anniversary and from the proceeds of the sale of Arnold's book *Raging Against Time*, which is an autobiography covering his first ten years of medical practice.

And finally thank you to **Joanna Ward**, who, after recovering from injuries last year, is taking part in this year's Flora London Marathon on behalf of **Prostate UK**. You can sponsor Joanna by visiting her Justgiving page at [www.justgiving.com/joannaward](http://www.justgiving.com/joannaward)



The Seniors Section of the New Forest Golf Course in Lyndhurst raised £1,500 during 2007. Ivor Griffiths, Seniors Captain 2007, (pictured with cheque) detailed how the Club collected this money in a variety of ways, ranging from voluntary contributions, fines applied by the Captain, fines decided amongst the members themselves and special events. Thank you to everyone involved.

## Join a Food Chain in Awareness Week

This year's Prostate Cancer Awareness Week is from 10-16 March and we have a fun way for you to get involved. Taking part in a Food Chain is all about enjoying good food and good company, whilst raising awareness and funds for a very worthy cause, **Prostate UK**.

How does it work? A Food Chain starts with just one person hosting a lunch or dinner party for up to eight friends. In return the guests are asked to make a suggested donation to **Prostate UK** of £10 each. To keep the chain going, the guests are asked to host their own lunch or dinner and each invite friends. By talking about the cause, you can help make your guests be prostate-aware and raise vital awareness amongst everyone in the Food Chain.

We will happily provide an information pack to raise awareness at your Food Chain event, and we will also provide a recipe suggestion for a perfect pudding for your party! For further details, please call 020 8877 5845 or email [fundraisingteam@prostateuk.org](mailto:fundraisingteam@prostateuk.org)

## Valentine's Dinner with Jo Brand

Instead of the same old dinner à deux, do something different on Valentine's Day and join us for a very unique and enter-taining fundraising



evening in aid of **Prostate UK** and Wellbeing of Women. Tickets are still available for this very special joint

event on Thursday 14 February 2008 at Lord's Cricket Ground in London.

This will be a wonderful occasion for anyone who has been touched by prostate or gynaecological diseases. It will also be a great get-together for anyone who has taken part in the Hike for Hope treks in Jordan and Kenya.

Tickets cost £120 per person (or £1,200 for a table of 10) and this includes a Champagne reception from 7pm, a three-course meal with wine and first-rate entertainment by Jo Brand and our compère, Henry Kelly. There will also be the opportunity for guests to watch and learn the extra-ordinary art of Sabrage where a Champagne bottle is opened using a Sabre. There will be an auction and we are seeking donations of high quality, interesting items, especially things that money just can't buy. Please don't miss this fantastic evening for two extremely worthy causes.

Please use the enclosed order form or call 020 8877 5840 or email [fundraisingteam@prostateuk.org](mailto:fundraisingteam@prostateuk.org) for further information.

## Events Diary

**14 February 2008**

*Alternative Valentine's Dinner*

Lord's Cricket Ground

**10 - 16 March 2008**

*Prostate Cancer Awareness Week*

**11 June 2008**

*Ambassadors' Dinner*

Goldsmiths' Hall

**15 June 2008**

*Pants in the Park*

Battersea Park

**28 June 2008**

*Round the Island Race*

Isle of Wight

**28 June - 2 July 2008**

*Wight Walk Challenge*

Isle of Wight

**17 October 2008**

*Annual Luncheon*

The Dorchester, London

## Fun Running for Cancer Charities



The village of Hagbourne has held a May Day fun run for cancer charities since 1993. The instigators, John Lawson and the late Col. Tony Smith, were amazed with the response and found 200 runners and around 50 walkers signed up to take part. The race has become so popular that they have continued the run every year since (except for the 'foot and mouth' year)

with entries staying steady. Not only that but they have raised over £24,800 for various cancer charities and it has become a *must* in the village calendar.

In 2007 they chose to support **Prostate UK** and they have raised a fantastic £1476.

Many thanks from **Prostate UK** to everyone involved in the Hagbourne Fun Run.

## Isle of Wight

June will be a busy month on the Isle of Wight with many fundraising activities taking place. We are fortunate to once again be chosen as a preferred charity for the JPMorgan Asset Management Round the Island Race (RTI) on 28 June. Long-term supporter Susie Hobday (wife of the late Kit) has already signed up to sail and we urge any of you thinking of taking part to raise funds for **Prostate UK**.

As well as the RTI Race, our annual challenge event this year will be a 69 mile three day walk along the Isle of Wight Coastal Path from Sunday 29 June to Tuesday 1 July. Twenty four people, including our Chairman Professor Roger Kirby, are already signed up for the challenge but we welcome any individuals wishing to join the walk for one or more days. Or perhaps you would prefer to cycle round the island? A detailed itinerary will be in the next issue of *Update* and you can simply choose a day to join the group and make your own accommodation/ transport arrangements.

## Peter Finch

Peter Finch, one of Prostate UK's most dedicated supporters and fundraisers, passed away in December aged 67 after losing a 12-year long battle against prostate cancer.

A spirited fighter for justice, Peter, who was diagnosed in 1995, was determined to shame the Government into offering equal support to



prostate cancer sufferers as they give to women's cancers. To that end, he set himself the challenge of a sponsored 500 mile solo swim in a year, the equivalent of 25 Marathons. This was despite the fact that four years after a radical prostatectomy, the cancer returned and spread to his bones. Even whilst undergoing a heavy treatment regime, he aimed to swim a minimum of two miles a day. At the time of his death, he was only about 75 miles short of his target and had raised over £12,000.

Peter's indomitable spirit, his wonderful sense of humour and his positive attitude to dealing with his illness will serve as an amazing legacy to all of us who had the privilege to know him. Our thoughts and prayers are with his family.

## Carol Concert

Our Christmas Carol Concert at St Paul's Church, Knightsbridge was a resounding success raising over £5000. Guests arrived early to enjoy a glass of mulled wine and a mince pie, before enjoying a special Christmas evening in beautiful surroundings. Anthony Andrews, Ken Loach, Corin Redgrave and Bill Smith (Chief Executive of Lazard Asset Management), all performed their Christmas readings wonderfully. The musical programme was spectacular and included performances from the Sheldon Consort, the boy's choir the London Oratory Schola, and music from the Emerald Ensemble. We would like to thank Lazard Asset Management – this is the third year running that they have sponsored our Christmas event and it was a delight to once again meet their guests.

## Getting Back to the Roots

### Ben Grey explains research that we are supporting into how stem cells affect BPH

Benign Prostatic Hyperplasia (BPH) affects approximately half the male population over the age of 50 years. Symptoms relate to problems passing urine and can significantly affect a patient's quality of life. Treatment is available in the form of medication or surgery. However, such treatments deal with the consequences of BPH rather than the root cause.

Prostate stem cells are believed to be responsible for the control of normal growth and the repair of damage within the prostate. Alterations to the genes responsible for controlling these stem cells are in turn believed to be the cause of the uncontrolled proliferation of cells that subsequently results in enlargement of the prostate and the symptoms that are seen in BPH.

Identification of stem cells for further study has proven very difficult as they are rare and, as yet, there have been no



*Professor Noel Clarke FRCS (Urol), one of our medical panel who will be supervising Ben's research*

satisfactory biological markers to aid their isolation for further study. We have successfully adapted a technique called the Hoechst dye efflux assay to combat this problem.

We have already demonstrated that the subpopulation of cells isolated by this technique is enhanced for characteristics that are fundamental to stem cells. Using specialist technology called Affymetrix microarray, our aim is to characterise the genetic differences between the stem cell and non stem cell populations and identify new biological markers that would aid identification of stem cells for further study.

Furthermore, we aim to learn how normal prostate tissue function becomes disordered and leads to diseases like BPH and prostate cancer. A greater understanding of these key genetic control mechanisms in normal and diseased prostates will identify new markers to aid the diagnosis of BPH and its differentiation from other prostatic diseases.

Finally, by directly targeting stem cells and the pathways involved in disease, the root cause of BPH development and propagation can be addressed and the efficacy and specificity of treatments markedly improved.

## Farewell

By the time you read this we will have lost two very valuable members of our small team. Andrea Kon has been our media consultant for over three years and has ensured a steady flow of press articles – about 100 every year – covering everything from individual stories to our major events. Andrea is starting a creative writing course and intends to then get stuck into producing that novel which she has been thinking about for years – we wish her the best of luck. Candice Parr, our Events Manager, well known to many of you, departs to have her first baby and we all wish her and her husband good luck and we look forward to welcoming her back in the future.



*Ben Grey MRCS, clinical Fellow in Urological Oncology, University of Manchester, Paterson Institute for Cancer Research*

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## A Nice U-Turn

Three years ago, the National Institute of Health and Clinical Excellence (NICE) said men across the country should be offered High Intensity Focused Ultrasound (HIFU) free on the NHS. Now they have reversed the decision.

Trials indicate that HIFU may be an appropriate treatment for early stage prostate cancer. Compared with surgery or conventional radiotherapy treatment, it is not invasive and is far less likely to lead to devastating side effects such as impotence or incontinence. However, it is a new treatment and costs some £13,000 compared with £3,000 for a six-week course of radiotherapy and £5,000 for surgery.

Since NICE made its original ruling, permitting the use of HIFU, just 300 men have been given the treatment on the NHS.

The cost of all new technologies fall as the rate of application rises. HIFU is no exception. Its cost would fall if the number of patients receiving it rose. NICE's shortsighted decision will prevent this happening.

## New BPH drug

The young Scottish company Ardana, set up to exploit research from the Edinburgh based Human Reproductive Science Unit, seems to be making progress with its drug Teverelix. The results from its phase II study suggest that the drug works well to treat the symptoms of Benign Prostatic Hyperplasia. The attraction of the drug is that patients would only need two maintenance doses per year. Before it reaches the market, however, the lengthy and expensive process of a Phase III trial must be gone through.

## Goats milk

One of our readers has been undergoing hormone therapy treatment since early 2006. He has been suffering the rather common side effect of hot flushes. Then, for no particular reason, he decided to change from taking cows milk to goats milk. He was amazed and reports 'The hot flushes disappeared almost immediately and have not returned.'

Have any other readers had similar experiences?

## A Prostate Health Clinic in your community

In December the Department of Health published its 144 page Cancer Reform Strategy intended to improve cancer services.

One idea suggested is the creation of Community-based Prostate Health Clinics, where men could receive advice and support on prostate health issues.

Advice would be offered to:

\* Men without symptoms considering having a PSA test or equivalent;

\* Men with urinary or other potential symptoms of prostate cancer;

\* Men considering having a biopsy following a PSA test; and

\* Men diagnosed with benign prostate disease.

Access to these clinics would be via GP referral or direct access for men concerned about their prostate health.

The stated aim is to provide the best possible information and support to men making difficult decisions and at the same time to save significant levels of NHS resources.

We will be promoting this idea at the seminars we are running in 2008.



*Our thanks to Bertie Gore Browne who after a chance conversation with trustee Roy Kendrick held a successful 'Mini Royal Ascot' event in their local village last summer. They used a marquee which had been erected in the village for a wedding a few days earlier, to raise a fantastic £1500 from the event. Other Prostate UK supporters who may be planning to hire a marquee could consider using it for a similar fundraiser.*

## Community based BPH service a success

A before and after story of how patients with suspected Benign Prostatic Hyperplasia (BPH) are treated shows benefits in time and money. Patients used to wait thirty weeks to be seen at outpatients in Barking, Havering and Redbridge NHS Trust. The cost of diagnosing how to treat their BPH-like urinary symptoms was around £400. Now patients are referred to a Primary Care assessment service.

Patients receive a full clinical assessment of BPH/LUTS, including ultrasound scans of prostate, bladder and kidneys, along with uroflowmetry. Images of the ultrasound scans are

transmitted to a radiologist at the University of Portsmouth, who reads and discusses them while the patient is being examined. Cost per patient is now about £100 whilst referrals to secondary care have been cut by 76% and waiting times for those referred to less than 13 weeks.

To reach this happy state of affairs a capital investment of some £32,000 was made and the GP who administers the scheme, Dr Ashok Desphande, re-trained, while being mentored by a consultant and, in the process, gained a postgraduate diploma in urology.

## Alex's 90th

Congratulations to Alex May who celebrated his 90th birthday on December 23. His was one of the very early radical prostatectomies. He used to help the charity by looking after Deeds of



Covenant (remember those?) and can be remembered stuffing the very first *Updates* into envelopes round Tony Kilmister's dining table. Alex is in fine form completing a full round of golf recently. We look forward to writing about his telegram from the Queen in ten years time.

## simplystunning



Readers may recall how stunned we were in January last year to receive a huge donation of £150,000 from the Simplyhealth Charitable Committee, which enabled us to make a 24% increase to the amount awarded in grants as well as expanding our programme of UK-wide training seminars. (*Update* 29) They have done it again! In early November we received a further £100,000 and discussions are ongoing as to how we can best use this magnificent donation to fund both medical research and the training of healthcare professionals, to provide free information on all prostate diseases and to campaign to raise awareness. Thank you, Simplyhealth!

## Spreading the word!

We are very conscious that the profile of prostate disease urgently needs raising: awareness is poor, particularly compared to, for example, Breast Cancer, and we need to correct this. In recent years the threat posed by prostate disease has started to become better known and in our case much of this is due to the magnificent work done by our supporters. For example, many of you will have heard the well known LBC DJ, Nick Ferrari, have his PSA test live on air (administered by one of our Trustees and our Chairman!) and this annual event always leads to a flurry of calls and helps to break down barriers. But we too need to be more proactive. In November and December we ran a series of *trial advertisements* in both national and regional newspapers, and our hard-working staff found themselves inundated by telephone calls from men (and their wives) seeking information or advice. We plan to launch a nationwide campaign later this year and would welcome any feedback from our readers when they see it.



## In memoriam and legacies

We are extremely grateful for all the funds we receive from in memoriam donations and legacies. Our thoughts and warmest wishes are with all those people who have lost a loved one and yet, at a time of personal tragedy, think of others. To name just two of the many, thank you to Mrs McBride for the £480 received in memory of her late husband Mr Henry Robert Jones McBride, and thank you to Mrs Mary Stokes for her extremely welcome legacy of £33,520.

As the largest single source of income to UK charities, legacies make a vital difference to good causes across the country. A legacy allows you to make your mark on the world by providing for a cause that is close to your heart. Whether large or small, a legacy will make a huge difference to the future of many men and their families. Please contact us if you would like further information on how to leave a legacy to **Prostate UK**.

## Seminars

Our seminars *The ABC of Prostate Diseases* aimed at medical professionals (GPs, Practice Nurses, Specialist Urology Nurses etc) are proving extremely popular. They qualify as *in service* training and are completely free, an important consideration when training budgets are being squeezed. We have now scheduled the following:

8 February 2008 Cardiff

18 April 2008 Leeds

9 May 2008 Reading

20 June 2008 Plymouth

3 October 2008 Manchester

14 November 2008 Cambridge

6 February 2009 London

17 April 2009 Birmingham

To register please see  
[www.prostateuk.org](http://www.prostateuk.org)  
and click training