

BLUE SKY NEWS

ISSUE 84 | APRIL 2023

Nuclear medicine
**RESEARCH
DISCOVERIES**

Theranostic miracles in practice

Survivorship

**ONE MISSION
MANY VOICES**

Promoting fair care for survivors



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Send somebody you love flowers or a hamper from Interflora and 5% of all purchases from the Prostate Cancer Foundation of Australia Gift Collection will go to our work.

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Jeff Dunn and Steve Callister

A PERFECT MATCH

Welcome to your April 2023 edition of Blue Sky News. Inside we look at the latest news in nuclear medicine, with Australia leading the world in theranostic research and treatment.

We also give you an update of our work on the PSA guidelines, with overwhelming public support for the introduction of reminders so eligible men can get checked.

We are proud to match your donations with our mission.

With your Will, we can find a way.

If your life has been impacted by prostate cancer, please consider leaving a gift in your Will to PCFA's Prostate Cancer Future Fund.

When you make the decision to leave a gift in your Will to PCFA, your legacy will help to create a world without prostate cancer for future generations.

Find out more by calling our team today on 1800 22 00 99.

Adjunct A/Prof Steve Callister
National Chairman

Professor Jeff Dunn AO
Chief of Mission & Head of Research

➔ Ask for a free guide to Gifts in Wills by emailing enquiries@pcfa.org.au

CIAO AMICI: NEW BOOKLETS IN EIGHT DIFFERENT LANGUAGES



With over 300 different ancestries common to Australians, it's no surprise that more than 300 languages are spoken at home.

According to census data, nearly 33,000 Australian men impacted by cancer over the age of 45 speak a language other than English at home and may not have access to cancer awareness materials they can easily understand.

The head of PCFA's Telenursing Service, Bernard Riley, says communication is key to coping with prostate cancer.

"Around 28% of Australia's resident population were born overseas and 22% speak a language other than English at

home, reflecting the rich diversity that characterises modern Australia.

"At the same time, it can be a challenge when it comes to health care, making it harder for people to access vital information and services when cancer is diagnosed."

To support these men, PCFA awareness booklets are now available in eight different languages: Italian, Greek, Vietnamese, Arabic, Filipino, Hindi, and both simplified and traditional Chinese.

"Promoting equity, diversity and inclusion is paramount to Prostate Cancer Foundation of Australia," Bernie says.

"Our Survivorship Essentials Framework sits in harmony with efforts to achieve Universal

Health Coverage and optimal health for all people, irrespective of where they live or what language they speak.

"We are very proud to play a part locally and nationally in a worldwide movement promoting equity in cancer care and quality of life throughout survivorship.

"At the individual level, knowledge is power, and access to cancer information can help save men's lives."

If you know someone who might need one of our booklets, download them now from www.pcfa.org.au/awareness/general-information/multilingual-resources/ or contact our team to learn more. We can also connect you with a national Translating and Interpreting Service.

POPULATION DIVERSITY AND CANCER IN AUSTRALIA

22%

OF AUSTRALIANS SPEAK ANOTHER LANGUAGE AT HOME

32,800

AUSSIE MEN WITH CANCER AGED 45+ SPEAK ANOTHER LANGUAGE AT HOME

103

LANGUAGES ARE COMMON TO THESE AUSTRALIAN MEN

For more information call 1800 22 00 99 or email telenurse@pcfa.org.au

NUCLEAR MEDICINE:

THE NEXT GENERATION OF CARE



The landscape for nuclear medicines is vast, with researchers rapidly working on ways to make theranostic treatments available to men nationwide.

For Aussie men with advanced prostate cancer, the future is theranostic, involving a combination of therapy and diagnostics to halt the spread of disease.

The approach uses radiation targeted at the molecular level to image and treat prostate cancer, tracing prostate cancer cells around the body by targeting a protein called Prostate Specific Membrane Antigen (PSMA).

Clinical trials co-funded by PCFA have proven that PSMA imaging is more accurate at detecting cancerous prostate cells than conventional imaging such as CT and bone scans – a discovery which enabled the listing of PSMA PET/CT on the Medicare Benefits Schedule in July 2022.

Since then, thousands of Australian men have accessed the technology, in a shift that is sure to see survival rates improve over time.

Following approval of the first PSMA-targeted radiation therapy last year in the United States, work has rapidly advanced on radioligand development elsewhere, including Australia.

Telix Pharmaceuticals, headquartered in Melbourne, has developed Australia's first approved PSMA-PET imaging agent, known as Illuccix®, and is now working on a therapeutic compound for prostate cancer, also targeting PSMA.

“Some of the best prostate cancer research in the world is being led from Australia,” says Telix Group CEO and Managing Director, Dr Christian Behrenbruch.

“Theranostic imaging agents such as Illuccix are helping us to stage prostate cancers more accurately, allowing us to see and inform treatment of cancers that have escaped the prostate and spread around the body.

“The beauty of theranostics is that these radioactive imaging agents can detect small cancer cells, even very small

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metastases, that can't necessarily be seen by older forms of imaging. Better information to guide treatment decisions, and the potential of highly targeted therapies, creates pathways for precision medicine that were not available to us previously.

“One of the major benefits of theranostic treatment and nuclear medicines more broadly is that the targeted nature of the compounds helps to minimise the potential for damage to surrounding cells arising from the radiation.”

“Our aim is to develop therapies that are not only effective in stopping the spread of cancer, but to create pathways for treatment that minimise the impacts on the patient and preserve

quality of life in the short and long term.”

The work could be revolutionary for men with prostate cancer in Australia.

Patient access is key to the company's strategy, with special significance in the Australian context, where the decentralisation of the population requires thinking differently.

Telix Director of Global Patient Advocacy and Government Affairs, Simone Leyden, says the patient voice is key to success.

“With over 24,000 Australian men newly diagnosed each year, it's important that the patient's perspective is considered in the development and introduction of all new treatments.

“We are currently running two

major clinical trials in prostate cancer therapy here in Australia, and will commence the ProstACT GLOBAL Phase III study in advanced metastatic disease later this year, in pursuit of our goal to support patients across the full prostate cancer spectrum.

“Each of these will be underpinned by a new approach to patient engagement, promoting every man's physical, mental and emotional health as well as treating the clinical disease.

“Our ongoing collaboration with Prostate Cancer Foundation of Australia will support these efforts, so that no man walks alone.”

Supporters can contribute to clinical trial research by donating to PCFA's Prostate Cancer Future Fund.

THE POWER OF THERANOSTICS IN PRACTICE



➔ Donate online via pcfa.org.au/donate or call 1800 22 00 99



Telix Director of Global Patient Advocacy and Government Affairs, Simone Leyden, says the patient's perspective must be considered in the development and introduction of all new treatments.



World-leading urologist Adjunct Professor Peter Heathcote and PCFA's Chief of Mission Professor Jeff Dunn AO will co-Chair the high-powered review Steering Committee.

A NEW DAY DAWNS: AUSTRALIAN EXPERTS CONVENE ON EARLY DETECTION

A 16-person Steering Committee has been formed to oversee Australia's review of the guidelines for PSA testing, with an aim to modernise the way we manage prostate cancer diagnosis and treatment.

In November 2022 Prime Minister Anthony Albanese joined our Chairman Adjunct A/ Prof Steve Callister to announce a review of Australia's Clinical Guidelines for PSA Testing.

Now, a consumer consultation process is about to begin, with new research by PCFA confirming 98% of Australians support the introduction of reminders for eligible men to get tested.

Community consultation will be fast-tracked, with the overarching process expected to take at least two years, allowing for an exhaustive review of new evidence concerning the merits of more proactive screening.

Among the evidence to be considered, the Committee will hear expert advice from a multi-disciplinary research team tasked with examining national and international data to help unpack options for a new way forward.

The Steering Committee will be co-Chaired by Professor Jeff Dunn AO, PCFA's Chief of Mission, and Adjunct Professor Peter Heathcote, a Past-President of the Urological Society of Australia and New Zealand and one of Australia's leading urological surgeons.

"Estimates suggest that over 600,000 Australian men will be diagnosed with prostate cancer between 2020 and 2044, and 116,385 men will die from the disease," Professor Dunn says.

"We can save many lives if we simply detect the disease earlier, before it spreads outside the prostate. New guidelines will help us do that."

The prospects for survivorship are excellent, says Dr Heathcote.

"Australia has among the highest rates of prostate cancer in the world. That is why we should be making the case even more strongly for screening.

"We need to give clinicians the tools to confidently discuss PSA testing with their patients, while taking what we have learned from large-scale studies in Europe showing the benefit of using the PSA test to screen selected asymptomatic men.

"With the right approach we can reduce the burden of prostate cancer on Australian men, their families, and the health system.

"This includes managing how we communicate with patients about screening and the discovery of low-risk cancers where Active Surveillance may be the best option.

"The guideline review is Australia's opportunity to become a world leader in this space. Most importantly, it is a chance to save men's lives, and to save thousands of families from the pain of a prostate cancer diagnosis."

THE GUIDELINE REVIEW: AREAS OF INTEREST



**BASELINE PSA TESTS
FROM A SET AGE**



**CLEAR RULES FOR MEN
WITH A FAMILY HISTORY**



**YEARLY RATHER THAN
TWO-YEARLY TESTS**

70+

**NEW RULES TO TEST
MEN OVER AGE 70**

➔ To find out more, call 1800 22 00 99 or email enquiries@pcfa.org.au

FACING THE GENETIC TIGER:

EXPANDING ACCESS TO GENE TESTING FOR PROSTATE CANCER

Australian men with advanced prostate cancer now have access to precision medicines that can help stop the spread of tumours linked to genetic variations. In parallel, new research is looking at whether genetic testing should be more widely introduced to help target genetic variants that may be driving some forms of the disease.

In April 2022 the Australian government listed AstraZeneca’s Lynparza® (olaparib) for eligible men with prostate cancer, responding to a lengthy advocacy campaign by PCFA and others.

Since then, thousands of men have benefitted from no-cost genetic tests to determine eligibility for Lynparza, which has been found to lower men’s risk of death by 37% compared to other forms of treatment.

The life-extending drug, known as a PARP Inhibitor, works by blocking proteins that promulgate cancer growth, and is only effective in men with cancers linked to BRCA gene mutations which cause prostate cancers to become more aggressive.

A/Professor Shahneen Sandhu, who is currently leading PCFA’s EVOLUTION Phase II Clinical Trial, says BRCA mutations affect 10-12% of men with metastatic castration-resistant prostate cancer (mCRPC).

“Evidence shows that men diagnosed with prostate cancer who have mutations in the BRCA1 or BRCA2 genes have higher risks of more aggressive prostate cancers and poorer clinical outcomes.

“In particular, men with faults in their BRCA2 gene are five times more likely to be diagnosed with prostate cancer and at a younger age and this high-risk group is twice as likely to have a more serious, potentially life-threatening, form of prostate cancer.

“One of the advantages to Lynparza is that it is taken twice daily as a tablet, with a relatively low risk of serious adverse events and side-effects among patients.

“In terms of treatment pathways, it’s offered to men when their prostate cancer becomes resistant to other forms of treatment, which means it’s important for men with advanced prostate cancer to undergo genetic testing early so that we can determine whether to target the tumour with Lynparza or other novel medicines.

“Identifying BRCA-mutations in mCRPC as early as possible has the potential to change the way we manage advanced prostate cancer, slowing down



the spread of the disease and improve overall survival time.”

In parallel with the listing of Lynparza, PCFA is funding a landmark research project to examine levels of community support for expanding access to prostate cancer genetic testing to more men with prostate cancer.



A/Professor Shahneen Sandhu

Chief Investigator A/Prof Haitham Tuffaha says the research may help shift current practice towards more personalised care.

“With many thousands of men at risk of their prostate cancer spreading each year, finding more effective and less toxic treatments is critical.”

“My research, with much-needed funding from PCFA, will help to examine the benefits

of introducing guidelines for genetic testing in the Australian context, which are likely to include advancements towards prostate cancer prevention and early detection in those with a family risk of the disease.”

For more information about genetic testing and counselling, call our Telenursing Service on 1800 22 00 99.

We're here to help.



You can donate to the project via pcfa.org.au/donate or by calling **1800 22 00 99**.

34-year-old community philanthropist and advocate, Shannan Gove.



A SON'S PROMISE: ENDING THE PAIN OF PROSTATE CANCER



In January 2022 Tony Gove lost his battle with an aggressive form of prostate cancer, aged 63. Now, his son Shannan is delivering on a promise to help change the way Australia manages the disease.

We meet Shannan Gove at a cafe on Bond Street in Sydney, just around the corner from his company's Sydney office.

The 34-year-old is a co-Founder of Rosterfy, an Australian start-up with a growing list of clients that includes the US Super Bowl. The company supports businesses with automating volunteer and workforce management, riding the wave of tech solutions for tomorrow's world.

But that's not why we are meeting. We are meeting to talk about PCFA's Future Fund. And specifically, what it will buy.

“Tell me how it will work,” Shannan says.

We discuss the gaps in research funding for prostate cancer, the bastardry of current treatments, and PCFA's belief that with a major investment in research, we can beat it.

The aim of the Prostate Cancer Future Fund is to eliminate avoidable deaths from prostate cancer in our lifetime, to honour men like Tony Gove.

“Dad was the fittest, most vibrant man I knew – he was stronger and more active than many men my own age. From the outside looking in, all was well, but Dad had symptoms of prostate cancer that nobody but my Mum really knew about.

“Over the course of eight years Dad was fighting fit, and each year he got his PSA score and each year it was in range. All the while, Dad had symptoms, but his PSA score was within normal range, and his symptoms were dismissed as benign.

“His diagnosis with metastatic prostate cancer floored us. It left me feeling like we need to do much more as a nation to raise awareness and make sure men know it can strike out of nowhere, and it's deadly.”

It's an experience we understand. In many cases, men are not made aware of their risks, or are discouraged by GPs who give outdated advice that PSA

testing can do more harm than good, a statement that has been overturned by recent evidence. Likewise, because many prostate cancers are low-risk, some health professionals are too quick to disregard possible warning signs of aggressive cancers.

We talk about the review of Australia's clinical guidelines for PSA testing, and our ambition to fundamentally change the way Australians think about prostate cancer.

The Gove family hail from Geelong, which has one of Australia's highest rates of excess deaths from prostate cancer.



Shannan and Tony conquering Alpe d'Huez in France in 2017

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Tony and Shannan Gove on Shannan's wedding day

Excess deaths refers to a rate of deaths above the Australian average, what epidemiologists call “a real difference” based on a complex dataset that takes into account population profiling and controls for factors like age to make like comparisons across regions.

“So what do we do to improve awareness and early diagnosis?” Shannan asks.

He’s smart, to the point, and by the look in his eyes, determined.

Great question. If only the answer was easy. We talk about the role of PCFA Specialist Nurses and the Telenursing Service, about the disparities of care in different regions, and the inequities inherent in the public/private system. Three things are key – earlier detection, timely treatment, and public education like that seen for other major cancers.

A new set of Clinical Guidelines for PSA Testing will help to address some, but not all these issues, improving early detection so that more men survive.

In the scheme of things, however, research offers the most viable prospect for finding ways to effectively prevent, detect, treat, and eliminate prostate cancer.

We discuss how prostate cancer gets around half the funding currently being poured into other major cancers, for reasons that relate largely to how different cancers are socialised in the Australian context, with action on breast cancer setting the high bar. We emphasise that an equalisation of funding levels will accelerate new discoveries to resolve some of the puzzles of prostate cancer.

At a higher level, an even greater scale of investment could help to defeat the disease altogether, delivering breakthroughs on a par with the creation of the cervical cancer vaccine for women.

Areas for investment include collaborative research grants, new funding for genomics, a focus on theranostics and next generation radiotherapy,

and support for the emerging pipeline of nuclear medicines that could find better ways of treating prostate cancer than current standards of care. Our immediate priority is clinical trials – to accelerate the research needed to save men’s lives *today*.

“Why should people give to PCFA?” Shannan says.

Because we can guarantee it will go directly to prostate cancer. We go into detail on our funding model, our independent approval process, our willingness to work with the most capable Australian research institutions, our readiness to fund the very best work by the brightest researchers, and our capacity to bring researchers together to change the game.

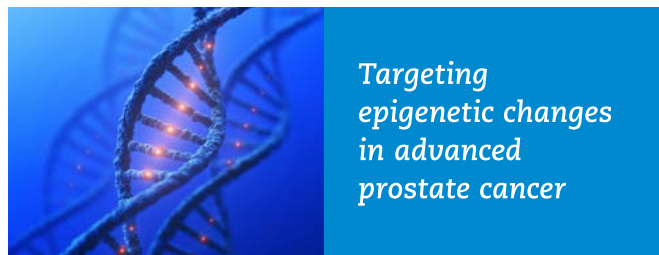
Shannan nods, “So in a nutshell what you are saying is if we can raise strong capital for the Future Fund, we can win this fight?”

More than that, we believe we can do it in our lifetime.

“I’m in,” he says.

New research: FOUR PROJECTS MAKING PROSTATE CANCER HISTORY

Thanks to you, we have just funded four new research projects in our latest round of research grants. These projects add to our \$50m investment in prostate cancer research since 2008, delivering outcomes for Australian men and families.



Targeting epigenetic changes in advanced prostate cancer

*Dr Joanna Achinger-Kawecka
Garvan Institute of Medical Research*

This project will help identify new epigenetic drivers of treatment-resistant neuroendocrine prostate cancers (NEPCs), using emerging technologies and pre-clinical models to try and restore men's response to treatment. Hormone treatments targeting androgens are the current standard-of-care for men with metastatic prostate cancer, but many patients will experience the emergence of treatment-resistant NEPCs over time. The aim of the research is to help solve this problem.



Manipulating the immune response for prostate cancer treatment

*Dr Laura Porter
Monash University*

This project will help to advance more effective and targeted treatments for men with metastatic prostate cancer, using the immune system to eradicate prostate cancer proliferation with CAR T-cell therapy, whereby T-cells bind to cancer cells and destroy them. To date, CAR T-cell has not proven effective against prostate cancer, but this research will seek to identify factors that strengthen the treatment response to slow the spread of prostate cancer and improve survival.



Developing a physiological prostate cancer model for rapid drug testing

*Dr Kate Guan
University of New South Wales*

This project will map the metabolic pathways involved in resistance to a specific type of hormone therapy and target identified pathways with metabolism inhibitors to restore treatment response in men with metastatic prostate cancer. The research aims to identify metabolism-targeted agents that can effectively block anti-androgen resistance or synergise with anti-androgen treatments to improve survival outcomes.



Inequalities in care and real-world outcomes for men with advanced prostate cancer

*Dr Kerri Beckmann
University of South Australia*

This project will investigate therapies for men with metastatic prostate cancer to identify patterns of disadvantage. It will also seek to better understand any adverse events and the survival outcomes related to different types of therapies. The outcomes will inform best-practice care for men, advancing our work to overcome disparities such as a 24% higher rate of death in regional areas.

➔ To donate go to pcfa.org.au/donate or phone 1800 22 00 99

WE'RE HERE TO HELP: PCFA NURSING SERVICES

Building local connection with individual impact



DID YOU KNOW?

This year PCFA Specialist Nurses will support **2 in 3** newly diagnosed men.



104 NURSES NATIONWIDE

128 SUPPORT GROUPS

On average, your local PCFA nurse supports around 300 newly diagnosed men each year, providing about 1,700 consultations to new and existing patients in the local community.

