



POOR LIFESTYLE HABITS LINKED TO MORE SIDE-EFFECTS OF PROSTATE CANCER TREATMENT

Men with poor lifestyle habits experience more debilitating and often permanent side-effects of prostate cancer treatment than those with healthier lifestyles, according to new research presented today at the National Cancer Research Institute (NCRI) Cancer Conference in Liverpool.

The study found that men with prostate cancer who smoked, were inactive, or overweight during and after radiotherapy, suffered far more from side-effects such as rectal bleeding, erectile dysfunction and incontinence than men who led healthier lifestyles.

The study, carried out at The Primrose Oncology Research Unit and funded by Macmillan Cancer Support, is the first in the world to show the importance of physical activity during and after radiotherapy.

Professor Jane Maher, Chief Medical Officer at Macmillan Cancer Support, leading oncologist and co-author of the research, said:

'As well as affecting their health, effects of radiotherapy like impotence and incontinence, can have a devastating and long-lasting impact on men's sex lives and relationships. It's clear that good lifestyle habits can dramatically reduce side-effects of radiotherapy so I'd urge men with prostate cancer to keep active, not smoke and eat well.'

The study found men with prostate cancer who walked briskly for more than two hours a week, played sport regularly or attended a gym, were twice as likely to have no side-effects and normal erections than sedentary men. Even if they had erectile impairment, they were much more likely to respond to medication.

Professor Jane Maher adds:

'It's going to be a big challenge to get men to move more so as well as information booklets the NHS must give prostate cancer patients counselling before treatment, prescribe them physical activity and, if necessary, refer them to smoking cessation clinics and nutritionists.'

This study backs up Macmillan's recent Move More report that highlights the enormous benefit of physical activity to cancer patients. The report includes research that shows physical activity can reduce prostate cancer patients' risk of dying from the disease or of it coming back by up to 30%.¹

Mark, 50, a former teacher trainer from Cornwall had radiotherapy treatment for prostate cancer two years ago and has experienced a number of long term effects of treatment. He said:

'If you told me 10 years ago I would be self-catheterising before going to bed and not spraying on the aftershave to encourage a romantic evening, I wouldn't have believed it - but keeping active has really helped. Whenever I feel fatigued, I get on my bike, go for a walk, go surfing or sailing. Straight away I feel so much better and have such a deep sleep afterwards. A bit of exercise definitely helps ease side-effects.'

Prostate cancer is the most common cancer in men with around 40,000 men

diagnosed each year in the UK.

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Notes to Editors:

- Lifestyle During and After Prostatic Radiotherapy and the Risk of Late Pelvic Toxicity was written by Robert Thomas^{1,2,3}, Mea Holm⁴, Madeleine Williams¹, Emily Bowman⁵, Patricia Bellamy³, Jervoise Andreyev⁶
¹The Primrose Research Unit, ²Bedford and Addenbrooke's Cambridge University NHS Trusts Hospital, ³Cranfield University, ⁴University of Oxford, ⁵MacMillan Cancer Support, ⁶The Royal Marsden Hospital.
- The study was a retrospective evaluation of a cohort of 470, alive, men treated with radical radiotherapy for prostate cancer between 2000 and 2010 at Addenbrooke's Hospital.
- 'Doing recommended levels of physical activity can help reduce prostate cancer patients' risk of dying from the disease by up to 30% compared to those doing less than an hour a week. This statistic isn't just based on those having radiotherapy. Evidence highlighted in Macmillan Cancer Support (2011) report 'The importance of physical activity for people living with and beyond cancer: A concise evidence review.
The recommended level of physical activity for adults is 150 minutes of moderate intensity physical activity a week. See Department of Health (2011) Start Active, Stay Active, A report on physical activity for health from the four home countries' Chief Medical Officers. Link to guidance below:
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_127931
- More information about prostate cancer can be found at www.macmillan.org.uk/prostate

About Macmillan Cancer Support:

Macmillan Cancer Support improves the lives of people affected by cancer, providing practical, medical, emotional and financial support. Working alongside people affected by cancer, Macmillan works to improve cancer care. One in three of us will get cancer. Two million of us are living with it. If you are affected by cancer Macmillan can help.

Call the Macmillan Support Line on 0808 808 00 00, Monday to Friday, 9am to 8pm. Calls are free, including from mobiles or visit

www.macmillan.org.uk

www.ncri.org.uk/ncriconference

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About the NCRI Cancer Conference

The National Cancer Research Institute (NCRI) Cancer Conference is the UK's major forum for showcasing the best British and international cancer research. The Conference offers unique opportunities for networking and sharing knowledge by bringing together world leading experts from all cancer research disciplines. The seventh annual NCRI Cancer Conference is taking place from the 6-9 November 2011 at the BT Convention Centre in Liverpool. For more information visit www.ncri.org.uk/ncriconference

About the NCRI

The National Cancer Research Institute (NCRI) was established in April 2001. It is a UK-wide partnership between the government, charity and industry which promotes co-operation in cancer research among the 22 member organisations for the benefit of patients, the public and the scientific community. For more information visit www.ncri.org.uk

NCRI members are: the Association of the British Pharmaceutical Industry (ABPI); Association for International Cancer Research; Biotechnology and Biological Sciences Research Council; Breakthrough Breast Cancer; Breast Cancer Campaign; Cancer Research UK; CHILDREN with CANCER UK, Department of Health; Economic and Social Research Council; Leukaemia & Lymphoma Research; Ludwig Institute for Cancer Research; Macmillan Cancer Support; Marie Curie Cancer Care; Medical Research Council; Northern Ireland Health and Social Care (Research & Development Office); Roy Castle Lung Cancer Foundation; Scottish Government Health Directorates (Chief Scientist Office); Tenovus; The Prostate Cancer Charity; Welsh Government (National Institute for Social Care and Health Research); The Wellcome Trust; and Yorkshire Cancer Research.

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