FIRST - THANK YOU to Len Sierra for providing so much detailed information on Hormone Therapy for all of us. AND, a big Thank You to those who participated both inperson and by Zoom - you added immensely to the conversation and to the learning process.

THANK YOU, ALL!!

HORMONE THERAPY - When? Effects? Alternatives.....

Men to Men

This is an attempt to summarize some of yesterday's presentation and conversation with attachments below:

- The ultimate gift for Hot Flashes the "Klein" Fan
- EMBR2 another Hot Flash prevention device
- LU-177 an updated article from UChicago Medical
- Nubeqa the drug Len mentioned with less side effects than Xtandi
- GU Medical Oncologist the key resource doc with knowledge about drugs
- Casodex note that there appear to be newer and better drugs available less side effects

Lutetium-177 PSMA Therapy for Prostate Cancer (Pluvicto)

Article from UChicago Medicine Comprehensive Cancer Center website 9-19-22

PSMA Scan - New technology is the best available method to see prostate cancer anywhere in the body

Lutetium-177 vipivotide tetraxetan PSMA therapy (Pluvicto) is a new theranostic medicine for advanced metastatic prostate cancer. It's a type of radiation that specifically targets a molecule on the surface of prostate cancer cells called PSMA. This therapy is used with the companion diagnostic gallium-68 gozetotide (Locametz), which is more commonly known as a PSMA PET scan. That latter uses imaging to identify cancer that make this PSMA molecule. Both lutetium-177 PSMA and gallium-68 PSMA were approved by the FDA in March 2022 and are proven to significantly improve prostate cancer survival rates and quality of life, as well as extend the time it takes for the disease to progress.

The University of Chicago Medicine was the first in Illinois to offer this novel theranostic agent, and our physicians are engaged in groundbreaking molecular therapy research to further advance the ways prostate cancer is treated.

How does lutetium-177 PSMA therapy work?

The idea behind theranostics is to harness the power of radioactivity, which can damage and kill cancer cells without indiscriminately attacking healthy cells in the body. Prostate cancer cells make something on their surface called PSMA – prostate specific membrane antigen. That PSMA is what the radioactive molecules lutetium-177 PSMA and gallium-68 PSMA attach to. In the case of gallium-68 PSMA, this radiotracer contains a low amount of radiation that lights up the cancer cells on a positron emission tomography (PET) scan so that we can see where the cancer has spread and whether it binds to the radiotracer.

PSMA PET scan demonstrating widespread metastatic prostate cancer. As a result, the patient received Pluvicto therapy.

If the cancer cells do light up, that tell us they will also bind to lutetium-177 PSMA, which contains a similar

PSMA tracer but a stronger type of radiation. During treatment, the PSMA graps on to the lutetium-1//PSMA; the radiation it carries is absorbed into the cancer cell, damaging its DNA and ultimately causing cell death.

Who is a candidate for lutetium-177 PSMA therapy for prostate cancer?

If you have prostate cancer that has spread beyond the prostate and progressed after other therapies (including hormonal therapies and at least one chemotherapy), you may be eligible. Prior to treating your cancer with lutetium-177 PSMA and in order to make sure that you qualify, you must first have a <u>PSMA PET scan</u>, which is available at the University of Chicago Medicine.

What are the benefits of lutetium-177 PSMA therapy for prostate cancer?

This therapy extends the quantity and quality of life for patients who otherwise would have limited treatment options. More often than not, patients who are eligible for this therapy are already experiencing symptoms related to their cancer that are impairing their quality of life. As most patients respond to the treatment, their symptoms tend to get better and their quality of life improves. It's also very well tolerated, so from a risk/benefit, quality of life perspective, this therapy is highly impactful.

What are the possible side effects of lutetium-177 PSMA therapy for prostate cancer?

With lutetium-177 PSMA therapy, some patients experience fatigue and nausea. The radiation can impact your salivary glands, which can cause dry mouth. This is because aside from prostate cancers cells, a few normal organs express some PSMA, including the glands that make saliva. We also monitor a patient's blood cell counts, which can dip temporarily during the treatment, although this is usually not symptomatic.

What happens during PSMA PET imaging with gallium-68 PSMA?

The PSMA PET imaging test is a specific type of scan that shows us where in the body the cancer is by using the gallium-68 PSMA radiotracer. For this, patients change into a hospital gown to receive an intravenous injection of the radioactive element in their arm. After an hour, which gives time for the radiotracer to travel throughout the body, you'll lie still on the PET table for roughly 25 minutes as the machine scans your body. Those images are then sent to your nuclear medicine physician for evaluation, who sends a report on the images to your cancer doctor.

What does prostate cancer treatment with lutetium-177 PSMA involve?

Usually a few weeks later, we follow the PET scan up with the lutetium-177 PSMA, another injectable radioactive element that specifically targets the cancer that showed up on the PET scan. An IV is placed in the arm to deliver the treatment; the injection only takes a few minutes. There's a period of observation for one to two hours, and then patients go home.

We typically check patients every three weeks to assess for side effects, and this includes taking a blood sample. If you're doing well and responding well, we continue with therapy. The treatments are once every six weeks for a total of six treatments.

How do you prepare for lutetium-177 PSMA therapy?

Patients don't need to fast or do any other preparations before receiving the diagnostic imaging or treatment infusion. We provide all the supportive care the patient will need.

What happens after lutetium-177 PSMA therapy?

View our <u>Pluvicto patient guide (PDF)</u> about what to do for the two to three days after therapy to ensure the safety of the patient and family.

What sort of clinical trials is UChicago Medicine undertaking in this area?

We're participating in a Phase III clinical trial that is looking to add this same therapy as a first line treatment for patients with newly metastatic prostate cancer. The future is in using this very effective therapy in earlier disease states.

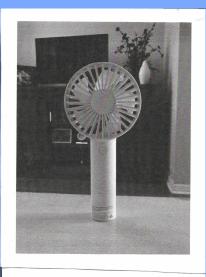
Why should someone come to UChicago Medicine for lutetium-177 PSMA therapy for prostate cancer?

At UChicago Medicine, we've treated more patients with this combination than anyone in the area because we were the only hospital in the region to be involved in lutetium-177 PSMA and gallium-68 PSMA's expanded access program prior to their approval. We have expertise across modalities — from the imaging and radioactive material handling to our healthcare providers who help patients navigate the process safely and efficiently. As theranostics is a new type of therapy, having the most experience in the region is critical to helping patients navigate the process. We are leaders in nuclear medicine and have participated in numerous clinical trials for

thermostics. And with the <u>only modical evolution in the state of Illinois</u> and our partnership with <u>Amongs</u> <u>National Laborators</u>, we continue to be at the forefront in thermostics research.

Request an Appointment

To request an appointment for La-177 PSMA therapy, call our cancer intake line at 1-833-762-6222 or complete the request form below.





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