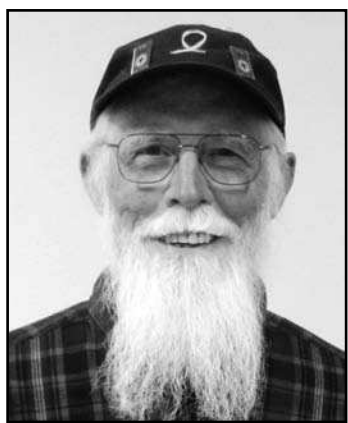


Us TOO Florence Behind the headlines



BY BOB HORNEY
CANCER SURVIVOR
US TOO CHAPTER LEADER

As I said last month, I was rethinking my desire to grow up to be a urologist. Here are a couple reasons:

First and foremost, I note a disturbing lack of respect among health-care professionals for the work they do.

For instance, look at the American Academy of Family Physicians (AAFP) buying into the U.S. Preventive Services Task Force's (USPSTF) recommendation that men should not receive PSA screening for prostate cancer, citing more harm than benefit.

All of a sudden, two decades of family/primary care physician referrals of early asymptomatic prostate cancer to urologists due to PSA test results vanished.

Looking back at the USPSTF

recommendation against PSA screening and its supporting data (13 pages — nearly 9,000 words), they never said who was doing all the over-diagnosing, over-treating and causing more harm than benefit.

It made me wonder: Who are these doers of evil, according to the USPSTF?

Having traveled down the prostate cancer road, I knew they were blaming the urologists, but my word search through the entire document never found the word "urologist."

What the USPSTF and AAFP have collaboratively done is move many men away from a diagnosis of curable prostate cancer to one of slowing the cancer's progress and easing the pain — as much as possible — for as long as possible.

That raises an important question: what is the answer to this dilemma?

My suggestion? How about supporting the urologists (as before), so they can do what they were trained to do?

Having had Dr. Bryan Mehlhaff present at our Us TOO Florence evening meetings for more than 11 years, Dr. Doug Hoff at our lunch meetings for more than five years and Dr. Roger McKimmy now taking over for Dr. Hoff, our group "knows" from personal experience and listening to the

above named urologists, exactly how much care, thought and expertise goes into evaluating every PSA test result and, if necessary, biopsy result.

We aren't afraid of the PSA test causing so-called over-diagnosis followed by over-treatment.

It is in our best interest to know our PSA number (beginning with a baseline PSA at age 40) and then work with the urologists at Oregon Urology Institute to determine our next steps — which is contrary to what the USPSTF recommends.

Us TOO International, our parent nonprofit prostate cancer education and support organization, quotes a Chinese Proverb: "To know the road ahead, ask those coming back."

For 15 years, Us TOO Florence has been the "go-to" group on the Oregon Coast for prostate cancer information.

Not just prostate cancer information, but the place to talk with prostate cancer patients about their personal choices for treatment/nontreatment and the outcomes of their choices.

And, just as important, having a urologist at nearly every meeting to keep everyone up to date on the latest emerging clinical advances from diagnosis through life after treatment/nontreatment.

In short, rather than reacting

to statistics taking 10 to 20 years to compile, we are dealing with the here and now — both in personal experiences, with those advances occurring while the statisticians are compiling their numbers, and hearing from the urologists who are implementing the improved therapies.

The other reason I probably don't want to become a urologist is because it is much more pleasant to converse with a patient about potential curable therapies for his early prostate cancer than to lament the fact that a PSA test would probably have had him referred several years earlier while the cancer was treatable.

Yes, this is occurring even though it has only been a few short years since the 2012 USPSTF recommendation.

What a great feeling it is for urologists to treat men with curable prostate cancer and see them go on to live productive, fruitful lives.

On the other hand, it is undoubtedly very disheartening to be the bearer of bad news that the diagnosis came too late for a cure, knowing it was quite possibly due to a family or primary care physician being advised by the AAFP to discontinue the life-saving PSA blood test.

Ok, I'm convinced; it's not my cup of tea...

Improve driving skills with AARP

Even the most experienced drivers can benefit from brushing up on their driving skills.

The AARP Smart Driver Course, hosted by Lane Community College Florence Center, is designed especially for drivers age 50 and older, but is open to all drivers.

Learn the current rules of the road, defensive driving techniques and how to operate a vehicle more safely in today's increasingly challenging driving environment.

Participants will also learn how to manage and accom-

modate common age-related changes in vision, hearing and reaction time.

AARP membership is not required to take the course and there are no driving or graded tests in this small classroom course.

Also, most drivers over 55 may save money on car insurance by taking this course, under Oregon Law ORS 742.490.

Class fee is \$20 with a \$5 discount to current AARP members. The next classes are March 17 and April 21.

Visit LCC or call 541-997-8444 to register.

Siuslaw Friendship Club to elect new officers Thursday

The Siuslaw Friendship Club will elect new officers for the 2016-17 year tomorrow at its March 10 meeting.

The nominations are: President Janet Van Kleek, vice-president Pam Thompson, secretary Jeanette Bratcher and treasurer Dee Darrow.

The club meets on the second Thursday of the month, September through June, for lunch and a general meeting at the Elks Club, beginning at 11 a.m.

A primary goal of the club is raising funds to support Florence charities such as Food Share, Food Backpacks

for Kids, Siuslaw Outreach Services (SOS) and the Florence Area Humane Society (FAHS).

In addition to luncheons and fund raisers, the club sponsors card games: five crowns on Tuesday, pinochle on Thursday and hand-and-foot on the second and fourth Fridays of the month.

Annual dues are \$15.

Come for a meeting and/or a card game and get to know the members.

For more information, contact membership chairman Betty Fieldson at 541-997-2842.

Heart attack symptoms in women often vary from men

Paramedics from Western Lane Ambulance District (WLAD) respond to hundreds of heart attack or cardiac related medical calls annually. Of those hundreds of cardiac cases, more women than men are affected, and heart attacks are generally more severe in women than in men.

Failing to recognize and respond to symptoms of a heart attack may be part of the reason women experience a greater proportion of sudden cardiac deaths than men.

Women tend to display different heart attack or heart disease symptoms than men, which complicates time to treatment.

Research by the National Institutes of Health (NIH) shows that 95 percent of women studied knew that their symptoms were new or different a month before

experiencing their heart attack.

According to the NIH study, rather than the common chest pain symptom shown by men, 70 percent of women reported unusual fatigue, 48 percent complained of sleep disturbances and 42 percent suffered from shortness of breath.

Fewer than 30 percent had chest pain or discomfort prior to their heart attack.

Dr. Roberta Bogaev, M.D., a cardiologist and medical director of heart failure and transplantation at the Texas Heart Institute, stated that, "More and more we're finding out that men and women experience heart disease very differently.

"Physicians need to take women's health complaints seriously and understand that not all guidelines apply to

women, whose heart symptoms may appear more non-specific.

"It's important for women to have a good working relationship with their doctor and be aware of their own risk factors for heart disease."

Other signs and symptoms involved in women's heart attacks and cardiac-related issues are: indigestion, anxiety, unexplained weakness, unusual fatigue, cold sweat and dizziness.

Time to treatment is imperative for patients. Every minute of delay causes heart muscle to die and can lead to patient illness, disability and death.

Dr. Adam Holbrook, PeaceHealth Peace Harbor Hospital Emergency Department (ED) physician, said, "Women who are experiencing heart attack symptoms

unique to them such as fatigue, shortness of breath, anxiety, indigestion, weakness and of course chest pain, should immediately call 911 or present themselves to the ED without delay.

"When in doubt, always err on the side of caution," Holbrook said.

Paramedics from WLAD have encountered many of these types of critical incidents over the years and encourage the women of the community to heed the warning signs of heart attacks and cardiac problems and not delay treatment.

Paramedic instructors will be on hand at the Florence Elks Lodge on Monday, March 14, at 7 p.m., to speak to the Ladies of the Elks regarding signs and symptoms of women heart attacks and cardiac related issues.

Local ABSE seeks donations of toys, games, books

The Adult Basic and Secondary Education (ABSE) classroom at Lane Community College Florence Center needs donations of games, craft materials, books and puzzles appropriate for children ages 3-12.

The ABSE department offers Tuesday and Thursday evening classes at the Florence Center to help adults who are beginning English language learners to develop reading, writing, speaking and listening skills.

The 5-hour per week class also offers child care on site at no cost while the parents are in class.

Childcare provider costs are paid through a contract with Siuslaw School District to help the district's parents better support their children's education and English skills.

ABSE will accept dona-

tions at the main desk at Florence Center, 3149 Oak St.

Include your name and email address if you would like acknowledgement of your donation.

Contact Leonora Kent at kentl@lanec.edu in Florence or call ABSE Florence at 541-463-4835 for more information.

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