Dear PROGRESS participants,

Men living with prostate cancer face a number of challenges, and perhaps none more difficult than this: how do you gain control over such a remote and lethal illness? How do you mount a personal attack against an enemy that you can’t see – and in some cases can’t even feel?

Too many men facing these questions become fatalistic and passive. Men seem to think of themselves as either living or dying, and a positive diagnosis for prostate cancer thrusts them into ranks of the latter.

Those of you participating in PROGRESS are the exception – you have shown a commitment to living. By participating in this study, you are not only taking charge of your individual illness but you have also joined the fight against the entire disease. You are helping scientists understand why cancer is so often shared within families and are helping researchers develop strategies to short-circuit this genetic legacy. You deserve the highest praise for playing such an active part in this urgent mission.

You are not only helping scientists; you are also helping yourselves. I know that in my case, playing an active role in the fight against prostate cancer has made a dramatic difference in my own well-being.

When I was diagnosed with prostate cancer four years ago, I was completely shocked. At the age of 46, I had an advanced case of cancer. Other forms of cancer had claimed the lives of my father, my aunt, my mother-in-law and four other members of my family.

From the beginning, I resolved to take a different approach than my relatives before me. I changed my diet, altered my lifestyle, consulted with medical experts around the country and began learning everything I could about the disease. I concluded that one of the most powerful and overlooked weapons in the battle against prostate cancer is not prescribed by a doctor or administered at a hospital – the one thing that can mean the difference between recovery and recurrence is knowledge. Today my PSA is holding steady at zero.

I believe that right now the future has never looked more hopeful for those of us with prostate cancer. This is due in large part to the promise of the PROGRESS study. This research may soon give physicians the information they need to distinguish between harmless and aggressive forms of prostate cancer and may someday put a stop to the disease at its most basic level before it can express itself.

Prostate cancer has affected generation after generation of American men, but it has never come up against a group as energetic or as committed to change as we are. Through efforts like this one, I believe we can be the first men stricken with this disease to stop it before it touches the lives of our children and our children’s children.

Once again, let me express my thanks for your continuing help.

Cordially,

Michael Milken

CaP CURE is the name of Michael Milken’s prostate cancer research foundation. In addition to supporting PROGRESS, CaP CURE is involved in many other prostate cancer projects. The new Therapy Consortium was formed to accelerate the clinical evaluation of promising and innovative new treatments for advanced prostate cancer. Taking a different approach, scientists participating in the Nutrition Consortium are developing strategies to prevent the progression or recurrence of prostate cancer through diet. These are just a few of the many prostate cancer research projects supported by CaP CURE.

For more information about CaP CURE, you may call their toll-free number: 1-800-757-2873
**PROGRESS News**

Since our last newsletter, several changes have occurred in the PROGRESS team. As of October, one of the lead scientists, Dr. Janet Stanford, has returned to the Fred Hutchinson Cancer Research Center in Seattle after spending a year at the University of Utah. She is very pleased to be back in Seattle to work more closely with PROGRESS.

In September we welcomed our new Study Manager, Suzanne Kolb. Many of you already know Suzanne, who has worked with the study since its beginning. She replaces Susan Brandzel, who has accepted another position. We were sorry to see Susan go, but we are fortunate to have the continuity and expertise provided by Suzanne.

We also welcome our new Administrative Assistant, Iona McKenzie, who joined the PROGRESS team this month. We are very pleased to have her on the team to help process ongoing correspondence with our growing number of participating families.

With these changes, we hope to be able to better serve you and to maintain steady progress in our search for genes linked to prostate cancer.

You may continue to contact us in Seattle through our toll-free telephone number. In addition, please note our new address and fax number. As always, we would be pleased to hear from you and we encourage you to call if there is any news to report about your family.

**FHCRC - The PROGRESS Study**

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**Prostate Cancer News**

**Chromosome 1 Findings**

In our last newsletter, we reported that a group from Johns Hopkins University and the National Institutes of Health had identified a suspicious area on the long arm of chromosome 1 that may be responsible for some cases of familial prostate cancer.

We have now analyzed and published results based on data from the first 49 PROGRESS families. We did not find evidence that the previously reported suspicious area on chromosome 1 was associated with familial prostate cancer in PROGRESS families. This difference in results suggests that there is more than one gene responsible for familial prostate cancer and that different genes may be important in different groups of families.

If you are interested in receiving a copy of our paper published in the American Journal of Human Genetics, 1997, please let us know and we will be happy to send it to you.

**Future Contact**

There are now 131 PROGRESS families who have completed the data collection phase of the study. We are currently analyzing data in search of additional suspicious chromosome areas that may be linked to familial prostate cancer. As new leads are discovered, we will keep you informed of our findings.

In addition, as we have started to analyze data on a growing number of families, we sometimes need to recontact participants to clarify information provided on the questionnaire. We appreciate your ongoing help with the study and your willingness to provide such information.