



Stories That Inspire: Prostate Cancer by Gogs Gagnon

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Stories of Hope

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My name is Gogs Gagnon, and I'm a retired computer programmer. I've worked for Apple Computer, IBM, and the Government of British Columbia. And my proudest achievement in the computer world is developing the first income tax program approved for personal

use by Revenue Canada. I've developed millions of lines of code in many different computer languages and still find it fascinating to this day. Although I'm retired, I still take on the occasional contract work for the BC Government.

During my 35-year career, I've was incredibly active and fit. I rode my bike to work every day, trained in the martial arts and was in the gym most days. I had no health issues, wasn't taking any medication, and full of energy. Therefore, it was a shock when my doctor confirmed that I had prostate cancer. I was 57 and had absolutely no symptoms, no issues in the bathroom or the bedroom, for that matter. But yet, the cancer was in the final stage before spreading. It was a shock and devastating to hear the news.

It all started about five years earlier. That's when my doctor recommended that I have annual physicals — a head-to-toe examination. Complete with a full set of blood work. That's when I first heard of the PSA test. And my results were slightly above the normal range. A digital rectal exam revealed nothing unusual, except for an enlarged prostate, which is typical as men age. Therefore, my doctor wasn't too concerned

and recommended monitoring my PSA.

Over the years, my PSA continued to rise. A prostate biopsy was negative for cancer. And the digital rectal exam continued to reveal nothing out of the ordinary. And my enlarged prostate didn't seem to be an issue. I slept through the night without the need to get up to pee. I wasn't having any trouble achieving a firm and long-lasting erection. And I had no aches or pains and thought nothing of my rising PSA. However, over the next five years, my PSA continued to rise.

By this time, my wife and I had moved from one city to another. And we found new doctors. I immediately booked an annual physical and was anxious to meet the new doctor. Once again, my PSA results were even higher. My new doctor confirmed my enlarged prostate but said it felt smooth and healthy. But she recommended an MRI, which revealed a significant anomaly that was suspect of aggressive prostate cancer. And the MRI located the abnormality just outside the reach of the digital rectal examination.

As a patient, we tend to learn as we go. On reflection, I assumed too much. When the doctor told me my prostate was smooth, I thought that meant my entire prostate was

smooth. Not just the part they can feel. And I thought a negative prostate biopsy means there is no cancer in the prostate. I later learned that my prostate biopsy was random or blind. In this case, the doctor takes tissue samples from areas where cancer most likely will be found. Now that the MRI highlighted a suspicious irregularity, my new doctor recommended another prostate biopsy. But this time, it would target the anomaly instead of random sampling.

The results were positive for aggressive prostate cancer. I immediately thought the worst and thought my life was over. I felt an urgent need to deal with the issue now. I asked for surgery. But my doctor said it was too early to make a decision. There were still more tests required and many options to consider. And my doctor strongly recommended that I visit the cancer clinic and seek multiple opinions.

On recalling this moment, I realize that I was in shock, not thinking clearly and didn't yet have all the facts. What I needed was time to recover from hearing the word cancer before moving too quickly. Although I followed my doctor's advice, I already opted for surgery in the back of my mind. It's so important to have

an open mind. Please learn as much as possible about your specific case before making a decision. It's not a decision to take lightly.

Going into surgery, I understood the potential side effects, including urinary incontinence and erectile dysfunction. But I was mainly concerned about cancer and getting rid of it. However, it's critical to think about the quality of life and sexual health before choosing treatment. Once you've had treatment, there is no going back. And it's important to realize that while one treatment may work for one, it may not work for another.

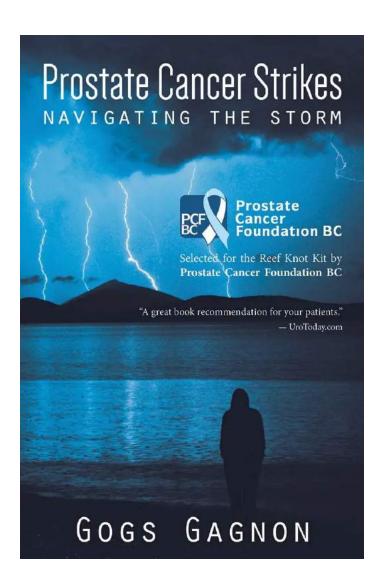
In my case, the surgery went without complication. The tumour was substantial and in the final stage before breaching the prostate. Once again, I had no symptoms and no idea the cancer was already so advanced. Without regular PSA testing, I wouldn't have known my PSA was rising. And cancer would have been free to grow and spread undetected.

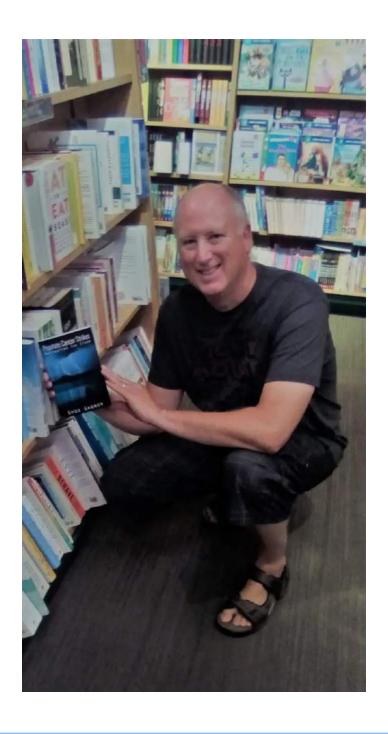
As far as side effects, I regained urinary control over six weeks. I'm happy in this department. Even my flow has improved. And it took a good 17-months for my erections to return. I'm thrilled about that, but they are not

as spontaneous as before surgery. And not always reliable. Viagra does help, but it's not perfect. I'm grateful to have a loving and supportive spouse.

One thing my healthcare team didn't warn me about was my mental health. I understood going in that there would be physical side effects. But I didn't consider my mental health. It's so important not to ignore this potential side effect and to find healthy ways to cope. For me, researching and writing have become my primary coping mechanisms. So much so that I ended up writing a book about my prostate cancer.

The name of my book is "Prostate Cancer Strikes: Navigating the Storm." And I'm proud to say that Prostate Cancer Foundation BC distributes a free copy to anyone newly diagnosed anywhere in Canada. You can alsoorder a copy from Amazon and other online bookstores in both paperback or electronic versions. Or visit your local bookstore or library and ask for a copy. For more information, please follow my blog on gogsgagnon.com and subscribe to my YouTube channel. I'm also on Twitter, Facebook, LinkedIn and Instagram.





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