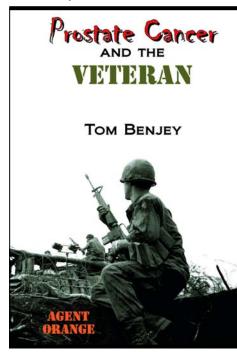
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South Middleton Township resident Tom Benjey wrote "Prostate Cancer and the Veteran" after his own struggle with cancer and trying to cover medical costs

Survivor argues against ending prostate screenings

A government panel recommended ending routine PSA tests for prostate cancer, though the medical community does not agree with the assessment.

By Naomi Creason, ncreason@cumberlink.com

Tom Benjey never really had any health problems. Even at 64 years old, the South Middleton Township resident and Vietnam War veteran had never come down with anything serious. So it was that much more of a shock when he was diagnosed with prostate cancer.

The news came with Benjey's first test for PSAs, or protein-specific antigens. The blood test gives doctors a PSA number - zero to four being in the normal range and four or higher a possible indication of prostate cancer. When Benjey got checked in 2009, his number came back a little higher than four

"It's a scary thing, getting a diagnosis like that," Benjey said. "They put me on the 'watchful waiting' list, where you monitor (the PSAs) to see if it gets worse, which may seem like an odd thing to tell someone.

But, there are a dozen different treatments, and most of them come with some very nasty side offects."

A year later, Benjey's PSA number was around 8.8 and he went through with proton therapy treatment for his cancer at Indiana University of Pennsylvania. He detailed his journey and useful information he collected along the way in his new book, "Prostate Cancer and the Veteran."

Benjey has become a proponent of early testing for prostate cancer, but a report last week from the U.S. Preventative Services Task Force recommends ending routine PSA tests. It's a decision that is unsettling for Benjey.

"One of the problems with prostate cancer is that you don't feel any of the symptoms unless its really bad," he said. "If you don't catch it early, it can spread to the spine and other areas of the body - and you don't want to die from that. From what I hear, it's very painful. There was a similar government panel that recommended cutting mammograms. I think mammograms are a lot like PSA tests. It costs a certain amount to do them and you only find a few cases, but if you're one of the few, it's very important."

Medical community reaction

One of the reasons for getting rid of routine PSA tests involve cost-cutting, which was argued in a release from Urologists for Patient Access to Care.

"PSAs are safe, non-invasive, painless, low in cost and they save lives," said Dr. Scott Owens of Camp Hill in the release. "In the current climate of rising health care costs, we should be looking for more preventive health practices like PSAs, not discouraging them."

According to Dr. Brij Sood, medical director of the PinnacleHealth-Fox Chase Regional Cancer Center, the panel's recommendation is not what urologists and oncologists would recommend, but the decision to not have PSAs may revolve around other issues than just cost.

"The recent report says that screening doesn't make a difference - that's not the view of most physicians in the medical field," Sood said. "I personally think screening is fine as long as we can come up with a better way to diagnose prostate cancer. We don't know who is affected by cancer that needs treatment. We end up treating all patients, which includes 30 to 40 percent of people who are being treated unnecessarily. The test is sensitive and it doesn't tell us which patients have aggressive tumors."

Benjey and Sood note that PSA tests are not incredibly reliable. The tests looks at the amount of PSAs present in the blood. Those PSAs are produced by prostate cancer cells, but they are also produced by normal cells as well. Some men will have normally higher numbers and some who show higher numbers won't necessarily develop cancer until years or a decade later.

Also, unlike other cancers, doctors believe that almost every man will develop the cancer even though many may not ever reach the levels where it would kill them.

"Prostate cancer is basically related to the aging population," Sood said. "Nine out of 10 men will live to 80 years old and get prostate cancer. How many of those cancers will kill a person, however, is the question."

Treatment, however, was never a question in Benjey's case.

"In my case, at 64 and my dad at 98, I knew I was going to deal with it," he said. "You don't want it metastasizing to other things."

Sood added that researchers are working on a better way to test for prostate cancer, though those tests may not be available for another five years.

In Focus

Tom Benjey's prostate cancer diagnosis in 2009 wasn't the only thing that caught him by surprise. After doing research into the disease he found that some organizations reported a link between prostate cancer and Agent Orange, the herbicide used during the Vietnam War.

According to Dr. Brij Sood, medical director of the PinnacleHealth-Fox Chase Regional Cancer Center, there isn't an official connection between prostate cancer and Agent Orange.

"It's not a simple connection like smoking is to lung cancer," Sood said. "Some of the studies show a possible link. The problem is, there's a small group that this applies to. We don't use Agent Orange anymore, so there aren't more people being infected, and the people that were exposed to Agent Orange were exposed to a lot of other things during the war. They're also at an age where they might get prostate cancer anyway."

Benjey wrote a book, "Prostate Cancer and the Veteran," detailing information about prostate cancer and veterans hospitals and about his journey and what he had to do to get his healthcare costs covered.

"I was 19 when I got an all-expense paid trip to the Far East," Benjey joked of his time in Vietnam. "I didn't know then that I would have to keep all of these papers."

What Benjey needed was a Department of Defense discharge notice and dates of service to prove he was in Vietnam at the time Agent Orange was being used. With the help of a sergeant he knew was transferred to Vietnam at the same time, Benjey got his paperwork.

He also got word that he was exposed to Agent Orange a lot more than he realized.

"I didn't think I was around Agent Orange at all," Benjey said. "I was talking to the sergeant about prostate cancer (which he also had), and he said 'You remember those C-123s that were taxing over us.' I said, 'Yeah, I do remember. They were there all the time.' And he said they went by the U2 hanger, which was filled with 55-gallon barrels of Agent Orange. Here, it ended up that where I was stationed was a major re-fueling area for Agent Orange planes. I still didn't get it nearly as bad as those guys in the bush who were sprayed on."

After eventually getting proton therapy treatment for his cancer, Benjey decided he wanted to do more to make sure people knew what they could do if they found themselves in the same situation and with the same diagnosis.

"Many veterans like myself just don't know anything about the disease, or its link to Agent Orange," he said. "Retired military men around here, who were career people, might know, bug the bulk of us who went over there don't know a thing about it. From what I'm reading, veterans are coming down with all kinds of diseases, and they've not been informed about it. I thought I'd do something for veterans."

Benjey's book is available at Whistlestop Bookshop and Wardecker's Mens Wear in Carlisle and also online at Barnes & Noble.