

## FOCUS ON **Your Health**

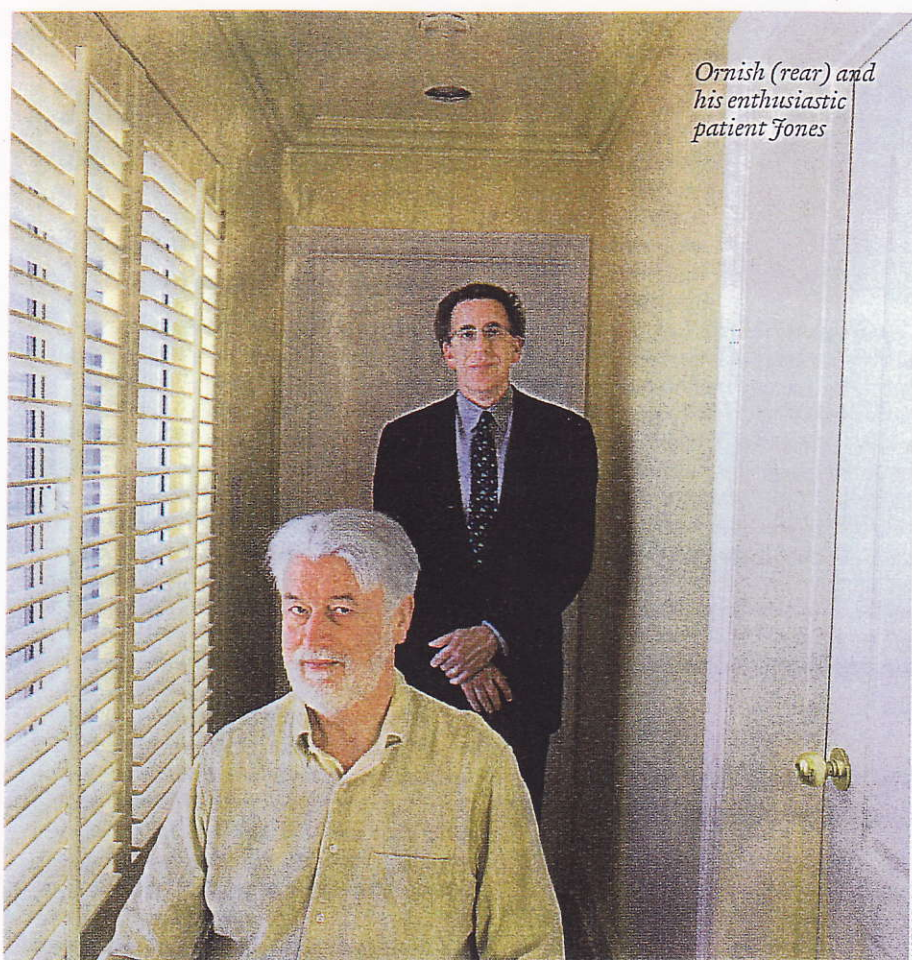
### THE PULSE

Only **3 in 10** adult Americans exercise either vigorously (jogging for **20** minutes three days a week) or moderately (walking for at least **30** minutes five days a week). Married men in the West exercise the most.

SOURCE: THE CENTERS FOR DISEASE CONTROL

# The Prostate Plan

Fresh findings suggest that changes in diet and lifestyle may slow prostate cancer. If the results hold up, surgery and radiation won't be the main choices.



*Ornish (rear) and his enthusiastic patient Jones*

BY DAVID NOONAN AND  
KAREN SPRINGEN

**W**HEN JOHN STONE found out he had prostate cancer, he researched the conventional interventions, including surgery and radiation, and quickly learned the harsh truth—they don't always work, and can cause impotence and incontinence. After months of indecision, the 57-year-old

real-estate developer from Groveland, Calif., heard about a research project being conducted by Dr. Dean Ornish in San Francisco. Now, two years after his diagnosis and a year after starting the Ornish program—which is based on dramatic diet and lifestyle changes—Stone has come to a startling conclusion. Speaking for himself and his wife, Sandy, he says: "Prostate cancer is the best thing that ever happened to us."

That extreme statement reflects the ex-

trême changes required of Stone and other prostate-cancer patients taking part in Ornish's study, the first results of which were presented over the weekend at the Scientific Conference on Complementary, Alternative and Integrative Therapies at Harvard. Ornish's regimen is intense. It includes a vegan diet of fruits, vegetables, whole grains and beans (with soy products instead of dairy, and just 10 percent fat), no alcohol, three hours of aerobic exercise a week, an hour of meditation and other stress-management techniques each day, and weekly participation in a support group. Compliance is no cinch, even with cancer as the motivator.

The routine gets results, according to the study. After the first three months, Ornish reports, patients in the study showed an average 6.5 percent decrease in their PSA (prostate-specific antigen) level, a crucial blood marker for the disease. Ornish kept track of how well patients followed the guidelines and found PSA dropped an average of 9 percent among those who adhered closest to his regimen. His findings, he says, suggest diet and lifestyle changes may slow, stop or even reverse the progression of early prostate cancer. "Your body often has the ability to begin healing itself if you stop the behaviors contributing to the problem," says Ornish, a clinical professor of medicine at the University of California, San Francisco, best known for his equally unconventional work on heart disease. Ornish coauthored the study with Peter Carroll, chairman of urology at UCSF, and the late William Fair of New York's Memorial Sloan-Kettering Cancer Center.

For Stone, "a big meat-and-cheese man" who rarely exercised and once reached 300 pounds, the program has done more than lower his PSA (currently at 6.9 after peaking at nearly 10; anything above 4 is a red flag). It's changed his life. He's dropped

PHOTOGRAPHY BY TIMOTHY ARCHIBALD FOR NEWSWEEK

about 50 pounds, to 195, and lowered his cholesterol from about 200 to 135. He says he's fitter than he's ever been and even enjoys meditation and support-group sessions, things he once considered a joke. And Sandy, who's followed the program with him, has dropped 40 pounds. Best of all, Stone says, he's lost his fear. "If I'm having my PSA checked every three months and I don't have some rapid increase, it's a very liberating feeling," he says.

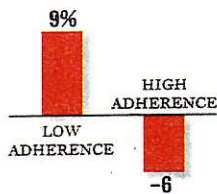
Not everyone is impressed by Ornish's study, which compared two groups of 42 men who had not received conventional treatment for their biopsy-documented prostate cancer. The 6.5 percent decrease in PSA levels after three months is not significant, says Joseph Smith, president of the Society of Urologic Oncology and chairman of the department of urologic surgery at Vanderbilt University. "It doesn't impress me." Most oncologists consider anything less than a 50 percent decrease to be insignificant, he says. Ornish acknowledges the drop in PSA levels is "not that big a change," but says it is statistically significant. "You don't need it to go down," he says. "You just need it to not go up."

Ornish is hardly alone in recognizing the power of fruits and vegetables. "Even without direct evidence that a certain diet will lower your risk of cancer, it makes sense for so many other things," says Dr. Leslie Ford of the National Cancer Institute.

## Live Well

Patients who can't stick to a healthy regimen see a rise in levels of the cancer-marker PSA.

Average Change in PSA AFTER ONE YEAR



SOURCE: DR. DEAN ORNISH

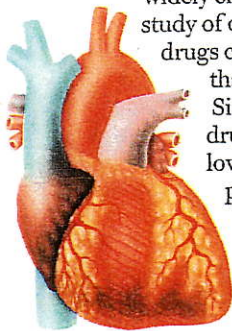
Prostate cancer is the second most common form of cancer among men, after skin cancer. This year, doctors will diagnose some 198,000 Americans with the disease, and more than 31,500 men are expected to die from it. Alan Jones, another of Ornish's patients, doesn't intend on being one of the latter statistics. The 62-year-old Episcopal dean of Grace Cathedral in San Francisco, Jones saw his PSA remain stable at 6.4 while taking part in Ornish's study. Like John Stone, he was reluctant to submit to surgery or radiation, with their side effects and recurrence rates (as high as 40 percent within two years of surgery). Jones also reports lower cholesterol. The irony of the situation is not lost on him. "I had to get cancer to get healthy."

## BRIEF CASE

### CHOLESTEROL

## The Statin Supplement

**S**TATIN DRUGS LIKE LIPITOR AND Mecavor are the standard treatment for high cholesterol. But noted cardiologist and nutritionist Dr. Stephen Sinatra has new and controversial advice on dealing with their dark side. Last year the widely cited, largest-ever study of cholesterol-lowering drugs called statins "safer than aspirin." While Sinatra agrees that the drugs can significantly lower the risk of heart problems, he's concerned they can interfere with a coenzyme called Q10 that's essential to the heart muscle.



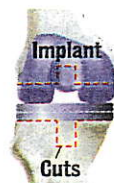
Sinatra gives statins to people who've had heart surgery or a heart attack and can't lower their cholesterol naturally. He also prescribes statins to reduce high C-reactive-protein levels, which are a newly recognized marker for heart disease. Sinatra tells his statin patients to take coenzyme Q10 to offset any loss from the statins, but he advises people at less risk to lower their cholesterol with nutrition and exercise. The American Heart Association says more research is needed to determine coenzyme Q10's safety or usefulness.

### JOINTS

## Replacing Knee Replacement Surgery?

**A**S MANY MIDDLE-AGED JOGGERS know, the knees can be a very weak link. Each year more than 2 million Americans damage the cartilage that keeps the two main knee bones from rubbing. While there are various ways to repair the joint, major surgery to install an artificial knee is often the best choice. But a new kidney-shaped disc made of a composite called cobalt chrome might help people postpone that surgery for years, while allowing them to continue running and jumping. The UniSpacer Knee System is designed to replace damaged cartilage. In an hourlong surgery, the spacer is set

between the knee bones, where friction holds it in place. About 400 spacers have been installed so far, with no unusual complications.

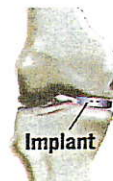


### Standard knee replacement

**PRO:** Reliable, conventional way to restore knee function for up to 10 years.  
**CON:** Requires extensive invasive work on the bone.

### Knee repair with UniSpacer

**PRO:** The implant slides into place with minimal surgical prodding.  
**CON:** Will not work for extensive arthritis damage.



### HERBAL REMEDIES

## Depressing Results

**L**AST YEAR AMERICANS BOUGHT about 165 million doses of St. John's wort, an herb commonly used to treat depression. A double-blind trial of 340 people run by Duke University Medical Center might cut into those sales. Researchers compared the effects of St. John's wort (900 to 1,500 milligrams daily) with the antidepressant Zoloft (50 to 100mg daily) and a placebo in people with major depression (other studies suggest the herb alleviates minor depression). While Zoloft had a slight positive effect, St. John's wort was even less effective than the placebo, according to the study in last week's Journal of the American Medical Association. Studies have also found that St. John's wort can have bad interactions with drugs used to treat HIV/AIDS and some heart conditions, as well as drugs that prevent organ-transplant rejection.

STEPHEN P. WILLIAMS



CLOCKWISE FROM TOP RIGHT: STANFORD KAY—NEWSWEEK (2); GAIL JANIKUS—PHOTO RESEARCHERS; NO CREDIT; CARLYN IVERSON—PHOTO RESEARCHERS