

HEALTH & SCIENCE

Diet May Reverse Prostate Cancer

Study of Early-Stage Cases Finds Reduction in Marker For Disease's Regression

By THOMAS M. BURTON
And LAURA JOHANNES

A study of dietary changes in prostate-cancer patients suggests that low-fat eating, coupled with lifestyle changes, can stop or reverse the progression of the disease in its early stages.

The research was headed by Dean Ornish, the University of California-San Francisco medical professor best known for low-fat diets in treating heart disease.

While the study was small, the results were intriguing. Researchers followed 84 men with cancers that were relatively unaggressive and hadn't spread beyond

"Not all prostate cancer needs to be treated aggressively, and small low-grade cancers can be handled well with surveillance and lifestyle changes," Dr. Carroll said.

Separately, a study on prostate surgery published in today's New England Journal of Medicine said that men who had their prostates removed by surgeons who perform at least 16 prostatectomies annually suffered fewer complications than patients whose surgeons performed fewer than four a year.

The study suggests that patients considering surgery for prostate cancer should not be afraid to ask their doctors how many operations a year they perform, said E. Darracott Vaughan Jr., president of the American Urological Association. However, Colin C. Begg, the study's author, cautioned, "We found a very wide variation even among high-volume surgeons."

The Ornish dietary study doesn't prove that a low-fat diet will lengthen

over, in his view, the low-fat diet approach will work for prevention of prostate cancer, as well. "I think the evidence that it would be useful for prevention is clear."

The dietary study is consistent with previous scientific evidence. Last year, doctors at the University of California-San Diego, the University of South Carolina and elsewhere had already found that a plant-based diet combined with stress reduction could slow prostate tumor progression. But that work didn't include the essential step of randomly assigning patients to a control group, to compare the effects of the diet.

The findings on surgery strengthen the growing body of evidence that, in medicine, practice makes perfect. Over the years, many studies have found mortality after major surgical procedures is lower at larger, high-volume medical centers. The research published today is unusual in that it focuses not on mortality, but on complications from surgery. "Since the mortality is so low in prostate cancer, what really matters is the outcome for the patient and the patient's quality of life," said Dr. Begg, a researcher at Memorial Sloan-Kettering Cancer Center in New York.

The researchers examined medical records from 11,000 men who had surgery between 1992 and 1996 and counted major complications in the month after surgery, such as bleeding or heart attacks. They also cataloged trouble urinating or incontinence, which can occur months or years later. The researchers didn't study impotence because this side effect is often not recorded in computerized medical records, Dr. Begg said.

The scientists found that both surgeon volume and hospital volume made a significant difference in the outcomes. In a group of "high volume" surgeons, defined as those performing 16 to 58 prostatectomies annually, 26% of patients had postoperative complications such as bleeding, heart attacks or kidney trouble. In a group of "very low volume" surgeons, defined as those performing four or fewer prostatectomies a year, 32% of patients had these complications.

Within a year of surgery, 28% of patients operated on by very low-volume surgeons experienced trouble urinating, compared with only 20% of the very-high volume surgeons' patients.

The results appear important, as more than 30,000 Americans die annually of prostate cancer and aggressive treatment like surgery often means unpleasant side effects.

the prostate. All had already opted for "watchful waiting" instead of surgery or radiation. Half were randomly selected to be put into a program with the low-fat diet, aerobic exercise and stress management. At three months and after one year, the low-fat diet group had lower PSA, or prostate specific antigen, a blood marker associated with regression of the disease. The other group had higher levels of the blood marker, suggesting disease progression.

Peter R. Carroll, chairman of urology at UCSF, who collaborated with Dr. Ornish on the research, stressed that the findings may not be applicable to men with advanced or very aggressive cancers. But the results appear important, as more than 30,000 Americans die annually of prostate cancer and aggressive treatment like surgery often means unpleasant side effects.

lives, though a higher and fast-rising PSA does suggest a more lethal cancer. Dr. Ornish said he hopes to continue his work to evaluate the question of longer lives, as well as whether his approach can avoid cancer recurrence. But the yearlong work already showed that none of the 40 low-fat-diet patients needed surgery or radiation, which often cause impotence and incontinence. By contrast, seven of 43 patients in the control group did have such procedures.

The findings are expected to be presented Saturday at Harvard University at the Scientific Conference on Complementary, Alternative and Integrative Medical Therapies.

Charles E. Myers Jr., a urologist in Charlottesville, Va., and former director of the University of Virginia's cancer center, said the research "doesn't address survival, but it shows a dramatic effect." More-