

The Helpful Messenger

PCaHELP March 2026 Newsletter

**How's
your
prostate,
mate?**

PCaHELP
PROSTATE CANCER HELP ASSOCIATION INC

**Need Help?
Talk to someone who cares!**

Dedicated help line:
0411 581 000
www.pcahelp.org

PCaHELP is proudly supported by
ConnectGroups
-helping everyone & everyone

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This newsletter is jam packed with information that we hope you find useful

If you would prefer to be removed from our mailing list please don't hesitate to email admin@pcahelp.org with the word "Unsubscribe" in the subject line

*Published by:
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MAY 2026 SYMPOSIUM

On Saturday 9th May 2026, PCaHELP will host an amazing Symposium to enable attendees to gain further information about living better with prostate cancer.



We are arranging another great line-up of guest speakers who will educate and advise us in a non-judgemental and confidential environment, aimed at men and their families affected by prostate cancer. Wives, partners and carers are welcome and encouraged to also attend.

The Symposium will be held during the morning and will include welcome tea and coffee, morning tea and a light lunch on completion of presentations. It will be free to attend,

Further details and online registrations will be available soon.



PROSTATE CANCER SUPPORT GROUP LEADERS COME TOGETHER IN PERTH TO INCREASE KNOWLEDGE AND THEIR ABILITY TO HELP

A team of 16 support group leaders, co-leaders and team members attended a two day Mental Health First Aid training course held at Quest Innaloo on Thursday 19th and Friday 20th March 2026. The aim of the program is to extend the concept of first aid training to include mental health problems so that participants were empowered to provide better initial support to someone who is developing a mental health problem or experiencing a mental health crisis.



We know that one in five Australians will experience some form of mental illness each year, and that the risk is much higher for men affected by prostate cancer, especially those undergoing Androgen Deprivation Therapy (ADT).

The course explored a wide range of mental health issues, including depression, anxiety, psychosis, substance use problems, gambling problems, and eating disorders. It provided basic knowledge to help the first aider recognise that an illness may be developing and included methods of developing an action plan to help someone who is injured or ill.

It also included providing first aid for suicidal thoughts and behaviours, non-suicidal self-injury, panic attacks, following a traumatic event, severe psychotic states, severe effects from alcohol abuse, severe effects from drug use, and aggressive behaviours.

If you or anyone in your carers circle are experiencing any mental health concerns please don't hesitate to reach out to one of our Accredited Mental Health First Aiders

Perth Integrated Events Team very kindly subsidised the cost of hosting this course based on a pre-payment for funds raised for the Tour of Cowaramup 2026. Please support them at:

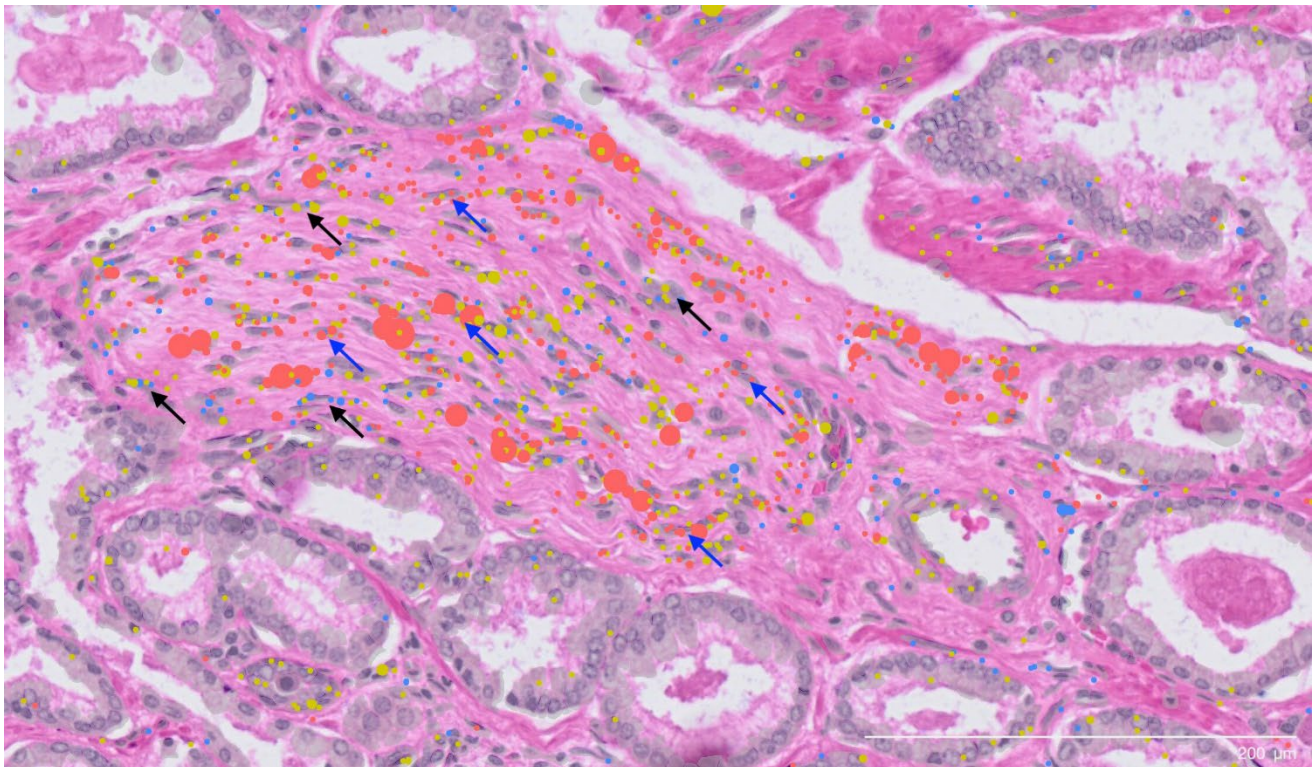


Training was delivered by Darren Peterson from Take Charge Wellbeing who made it a pleasure for participants with lots of interaction and practical examples



Those completing the course undertook an accreditation exam and gained the above certification

CELLULAR 'ATLAS' OF PROSTATE CANCER OPENS NEW AVENUES FOR EARLIER DETECTION



The newly discovered cell type shown clustering around a prostate cancer nerve bundle. This high-resolution microscopy image highlights one of the study's surprising discoveries: a previously unknown cell type called perineural cancer-associated fibroblasts (pnCAFs). The image zeroes in on a nerve bundle within a prostate adenocarcinoma (tumour) sample.

By: Garvan Institute of Medical Research
Edited by: Sadie Harley, reviewed by Robert Egan

Prostate cancer affects one in five Australian men, making it the most common cancer in the country. Now, researchers at the Garvan Institute of Medical Research have produced the world's most detailed cellular "atlas" of early-stage prostate cancer, revealing the earliest changes that lead to the disease.

The study describes a never-before-identified cell type and shows that many cells appearing healthy under the microscope have already begun their journey towards malignancy. These findings could reveal new risk factors, lead to earlier detection methods and help determine which patients are at risk of developing aggressive disease.

The study is published in [Cancer Research](#).

The research team, led by Professor Alexander Swarbrick, Co-Director of the Cancer Ecosystems Program and Lab Head at Garvan, analysed tissue from 24 patients recently diagnosed with early-stage prostate cancer.

The samples were drawn from the Garvan St Vincent's Prostate Cancer Biobank—the largest in the southern hemisphere, with contributions from more than 16,000 patients over three decades. The team then used advanced single-cell RNA sequencing to examine the genetic activity of every single cell in a tissue, and spatial transcriptomics to map their exact locations in the tumour landscape.

This resulted in a comprehensive atlas, identifying 11 major cell types, 50 minor subtypes, and numerous cell state classifications within prostate cancer tissue. This level of detail provides the global research community with an invaluable resource for studying how the tumours form and opportunities to design new therapeutics.

"We've captured a molecular readout showing years of cancer development," says Professor Swarbrick. "What's particularly surprising is the significant number of cells that look perfectly ordinary but have already acquired DNA changes associated with cancer. This suggests that current diagnostic methods using conventional microscopy may not be granular enough to detect these early mutations."

Implications for early detection

Standard diagnosis relies on visually identifying structural irregularities in cells under a microscope. However, this study revealed that the progression from healthy prostate tissue to cancer involves multiple cellular states that are invisible.

The researchers found that many [epithelial cells](#)—the cells that line organs and are where most cancers originate—showed early genomic alterations, even in tissue that appeared "normal." This suggests that molecular testing could one day be used to detect these invisible warning signs, potentially allowing for diagnosis before the cancer can be seen by a pathologist.

Clinical lead Professor Anthony Joshua, Lab Head at Garvan and Head of the Department of Medical Oncology at St Vincent's Hospital Sydney, emphasizes the clinical significance of these findings.



The cellular "atlas" detailed in the study.

The specific colours used vary between individual patient samples to provide the best visual contrast for each distinct tissue region (such as benign tissue, Gleason Grade 3, and Gleason Grade 4 cancer).

"Currently we don't know how prostate cancer starts. Understanding the sequence of events that lead to life-threatening disease—and finding the signatures of cancer in normal-looking cells—is essential for creating better predictive tests and therapies.

"While most prostate cancer patients respond well to current treatments, this atlas provides foundational knowledge of the disease's first stages that could help us pinpoint those at high risk of dangerous progression, who need more intensive intervention," he says.

Surprise discovery of new cell type

Among the study's most significant findings is the identification of a previously unknown cell type—called [perineural cancer-associated fibroblasts](#), a type of connective tissue cell located near nerves in cancers.

"These perineural fibroblasts in tumours appear to have specialized machinery to communicate with nerves. We don't yet know what these cells are doing, but the role of nerves in tumours is getting increasing attention in the cancer field. We've been able to classify these cells at the molecular level for the first time, giving them a distinct identity," says Professor Swarbrick.

The tendency for tumours to grow in and around nerves in prostate cancer has long been associated with worse patient outcomes. This discovery of [specialized cells](#) that interact with these nerves provides a new piece of the puzzle in understanding how prostate tumours may recruit nerves, or spread to other parts of the body along the nerves to cause metastatic disease.

Next steps

The research team plans to expand the number of patients studied and investigate specific cellular populations, particularly those cells that look healthy but harbor genetic changes.

"We've had a peek through the window, but it's still somewhat blurry," says Professor Swarbrick. "Now we have more precise questions about these pre-malignant cells, and we can apply more focused techniques to be crystal clear about the sequence of genetic events that drive this cancer."

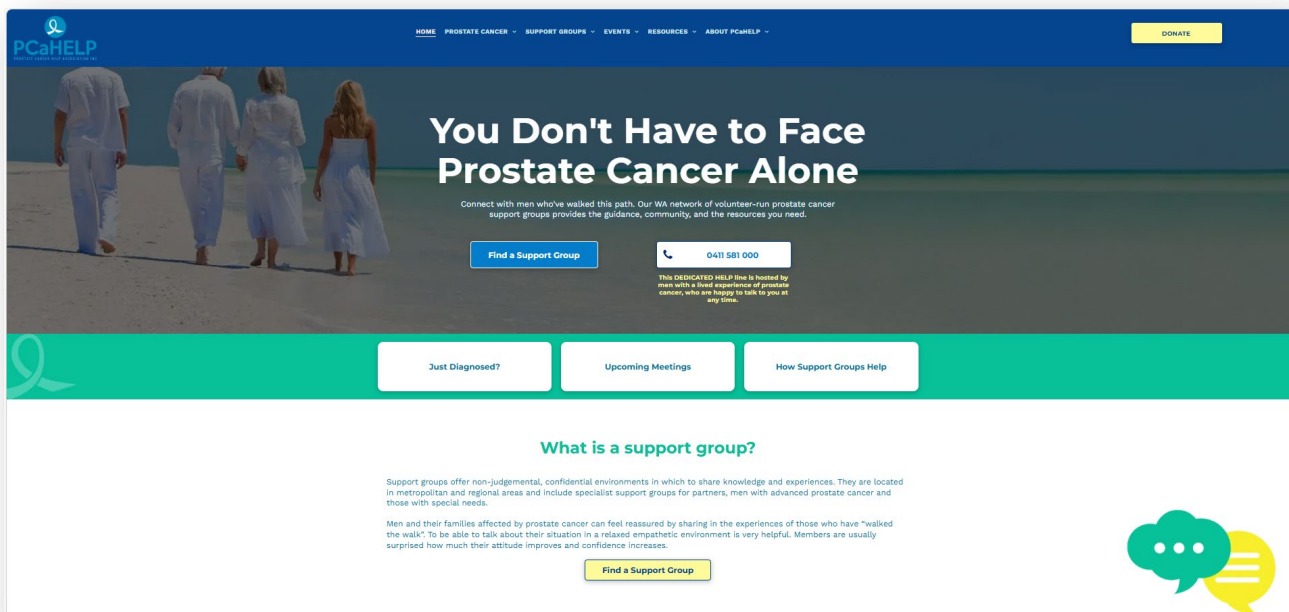
Future work will also focus on understanding the function of the newly discovered perineural fibroblasts, which may reveal why prostate tumours that contain more nerves have worse outcomes.

While the team emphasizes this is fundamental science rather than of immediate clinical application, the findings pave the way for future development of predictive tests. Given the high incidence of prostate cancer, even small improvements in early detection and treatment selection could benefit thousands of Australians.

Source: <https://medicalxpress.com/news/2026-03-cellular-atlas-prostate-cancer-avenues.html>

PCaHELP WEBSITE UPDATE

The PCaHELP website has been given a new look thanks to the incredible work of Ablaze Marketing.



This is a soft launch with further updates to be implemented over the coming weeks.

Don't forget to have a look at <https://www.pcahelp.org/>

Let us know if there is anything else you would like to see by emailing admin@pcahelp.org

STUDY FINDS FGFR1 BOOSTS CHOLESTEROL UPTAKE IN PROSTATE CANCER CELLS



By: Wah Myint, Texas A&M University
Edited by: Alexander Pol

Researchers at Texas A&M Health have identified a molecular mechanism that increases cholesterol levels inside prostate cancer cells—an important process that may help explain how some tumours progress and become resistant to treatment.

The study, led by Ziyang Liu '25, a former student in the lab of Fen Wang at the Institute of Biosciences and Technology and the Naresh K. Vashisht College of Medicine, found that a cell-signaling receptor called fibroblast growth factor receptor 1 (FGFR1) helps prostate cancer cells increase their internal supply of cholesterol. Cholesterol is a key building block for steroid hormones and cell membrane that can fuel tumour growth.

When the research team removed FGFR1 from prostate cancer cells, cholesterol levels dropped. Genes responsible for taking up low-density lipoprotein (LDL)—often called "bad cholesterol"—and producing cholesterol within the cell became less active.

Understanding prostate cancer progression

Prostate cancer is the most commonly diagnosed cancer among men and the second leading cause of cancer-related deaths in men. The standard first-line treatment is androgen deprivation therapy (ADT), which lowers the levels of male hormones that drive tumour growth.

Although many patients initially respond to this therapy, most cases progress within one to three years to a more aggressive form known as castration-resistant prostate cancer as tumours develop resistance to treatment.

One of the biological processes contributing to this transition is steroidogenesis—the production of steroid hormones derived from cholesterol. Because these hormones can fuel tumour growth even when androgen levels are suppressed, understanding how cancer cells obtain and regulate cholesterol has become an important focus of prostate cancer research.

Key molecular findings

In the study, Liu and colleagues found that FGFR1 activates sterol regulatory element-binding protein 2 (SREBP2), a major regulator of cholesterol metabolism. This activation occurs through ERK-dependent phosphorylation and cleavage of SREBP2 to switch on genes involved in cholesterol uptake and production.

Once activated, SREBP2 increases the expression of the low-density lipoprotein receptor (LDLR) and several enzymes involved in cholesterol synthesis. Together, these changes allow prostate cancer cells to import more LDL particles and produce additional cholesterol internally.

Computational analyses of clinical datasets also found that higher FGFR1 expression was associated with increased LDLR expression and with disease features linked to prostate cancer progression.

Revealing how cancer cells acquire cholesterol

Using bulk RNA sequencing, the researchers determined that genes involved in regulating intracellular cholesterol levels were among the most significantly affected targets of ectopic FGFR1 in prostate cancer cells.

These findings provide new insight into how prostate cancer cells regulate LDL-mediated cholesterol uptake—a key pathway that supplies cells with cholesterol needed for tumour growth and hormone production.

"Our study reveals how prostate cancer cells hijack the FGFR1 signaling pathway to boost their cholesterol supply, highlighting new opportunities to target cholesterol metabolism in advanced prostate cancer," Liu said.

By clarifying the molecular mechanisms that control cholesterol metabolism in prostate cancer cells, the research may help identify potential targets for future therapies aimed at slowing or preventing disease progression.

"Cancer cells frequently rewire metabolic pathways to sustain growth, and evade therapeutic treatment," Wang said. "Our group has previously shown that aberrant FGFR1 signaling drives several metabolic programs in prostate cancer, including glycolysis, choline metabolism and iron metabolism. This study adds cholesterol metabolism to that list and further highlights FGFR1 as a multifunctional pathway that could be exploited for future immunotherapy strategies."

The findings are published in the International Journal of Molecular Sciences.

Source: <https://medicalxpress.com/news/2026-03-fgfr1-boosts-cholesterol-uptake-prostate.html>

Download publication at: <https://www.mdpi.com/1422-0067/27/3/1190>

SUPPORTER PROFILE



Restorative Health Clinic offer Personalised Treatment For Men's Sexual Health Issues and are proud supporters of PCaHELP

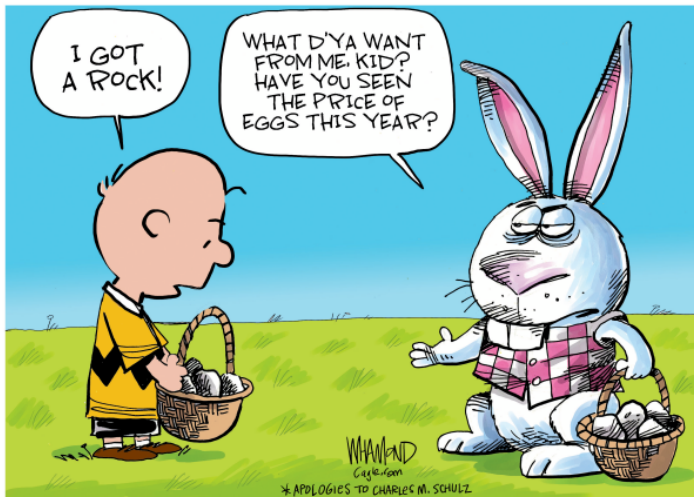
For more information please contact
Melissa Hadley Barrett
Men's Health and Urology Nurse Practitioner | Sexologist
Or her team at

Website: <https://rshealth.com.au/>

Email: admin@rshealth.com.au

Phone: 1800 413 141

HAPPY EASTER



**Wishing you all a very
Happy Easter**

May Easter bring you peace and
love,
From the heavens and above.
And may the joy of this holy day,
Stay with you in every way.

CALENDAR OF EVENTS 2026

Our calendar of events this year has been prepared and we hope you will put these dates in your diary as we would love to see you there.

More information about each event will become available progressively on our website at:
<https://www.pcahelp.org/events>

Saturday	9 th	May	2026	PCaHELP Symposium
		July	2026	Christmas in July – Gala Dinner (date TBC)
Saturday	5 th	September	2026	PCaHELP Annual Conference
Sunday	18 th	October	2026	Tour of Cowaramup
Wednesday	11 th	November	2026	Have a Go Day
Saturday	14 th	November	2026	PCaHELP Seminar
Saturday	14 th	November	2026	PCaHELP Christmas Dinner
Saturday	5 th	December	2026	PCaHELP Annual General Meeting

LIKE US ON FACEBOOK



If you use Facebook please keep an eye on our Facebook page and like our posts. The more likes we get, the more people will know about us and what we do. We will always try and keep you up to date <https://www.facebook.com/pcahelp.org/>

HOW CAN YOU HELP?

1. Spread the word – share this newsletter and tell people about PCaHELP and the events they host
2. Make a donation to PCaHELP at <https://donate4pcahelp.raiselysite.com/> – a few dollars makes a huge difference, especially if everyone gives
3. Volunteer to help at our events throughout the year, or even consider registering as a team member to assist our committee with special projects in 2026, and don't forget to support your local prostate cancer support group

THANKS TO THE FOLLOWING SUPPORTERS WHO MAKE ALL OUR WORK POSSIBLE

