I was diagnosed at age 50 in 1999 with a Gleason of 3+3 and had surgery to remove the prostate. My Cancer does not produce much PSA. It was 2.13 at diagnosis. About 2 years later PSA started to rise and I elected to do radiation which did not impact the PSA rise but did produce a bad case of radiation proctitis.

In 2004 I saw Dr Myers, joined the Richmond Us Too group and began supplements and lifestyle changes together with Avodart. In 2004 I went to Cleveland for a Prostascint scan which did not locate the cancer. As PSA continued to rise I repeated that scan in 2006. That CT scan of lungs done at the same time revealed nodules growing in size and number which after wedge resection and biopsy, confirmed metastatic prostate cancer.

Dr Myers started me on Lupron and Casodex and cancer went into remission with unmeasurable PSA after 6 months. We stopped this regime after 12 months on this medication.

PSA rose slowly over the next 3 years but CT scans remained clear. In 2010 my CT scan showed cancer in my lungs once again which was confirmed with needle biopsy.

Dr Myers then placed me on Ketoconozole and Estrogen patches. This treatment regime proved to be very effective at putting the cancer into remission. PSA was 2.15 when I started but became unmeasurable in 4

months and after 1 year we stopped the ketoconozole and continued with the estrogen patches. I applied 3 patches each day until I reached 9 total patches on my abdomen. I then removed the three oldest patches each day replacing them with new patches. My PSA rose slowly but no nodules reappeared in my lungs until 2016. The patches were an effective treatment and my quality of life was very good during the period that I used them.

In 2017 I started Xtandi Leukine and Firmagon together with Metformin, Lipitor. I have not achieved complete remission with this regimen but lung nodules are stable.