### **Blog follows:**

# 66 point drop in PSA after a month of bicalutamide



<u>Scribbler55</u>•

21 hours ago•14 Replies

My PSA has been steadily rising since around 2013. I was diagnosed with prostate cancer in 2018, although had resisted the biopsy for several years. I had a TURP in Aug. 2019. I also resisted ADT because of the side effects. But scans and a biopsy discovered some spots of prostate cancer on my hips.

So I decided to give bicalutamide a try. I have long used cannabis and cannabinoids as medicine since finding it helpful for glaucoma beginning in my youth. I've read the studies that found cannabidiol (CBD) worked in synergy with bicalutamide to blast tumors. I've also been taking Cannabigerol (CBG), a lesser known cannabinoid said to be good for bones and inflammation and fighting cancer, among other things.

Anyways, I had a PSA test Sept. 29 and the number was 64.77. On Sept. 30, I began taking 150mg bicalutamide daily. Had a PSA test yesterday Nov. 3 and it was 1.09!

My doc says these results are not unexpected from bicalutamide. I have not so far experienced a lot of side effects from the bicalutamide which I attribute to the cannabinoids. Doc said he doesn't want me on this longer term. He pulled a metabolic panel and there have been changes in some numbers over the month on bicalutamide. We are going to meet in a week and a half to talk about possible radiation and other meds.

Is this steep of a drop unusual?

## 14 Replies

oldest • newest



ctarleton 20 hours ago

Such a drop-off is not unusual. Your doctor might now recommend that you start on one of the longer term ADT drugs now that bicalutamide has reduced the likelihood of an initial "testosterone flare". With confirmed bone mets, perhaps also a bone agent such as Zometa or Xgeva. To review an overview of your situation and some potential drug/treatment options ahead of your next meeting with your doctor, you might be interested in reviewing these NCCN Guidelines for Prostate Cancer.

nccn.org/patients/guideline...



Scribbler55 in reply to <a href="ctarleton">ctarleton</a>18 hours ago

Thanks for the link!



LearnAll20 hours ago

Scrubbler55, Bicalutamide dropped my PSA by 88% in 30 days. It was stopped..Lupron and zytiga was started. After 9 months, I demanded that I do not consent to this SOC and would like to be on Bicalutamide again....I told Doctor that all risk is mine and I will check PSA, Bone ALP ,CBC and Metabolic panel every 2 weeks. After 8 weeks of being on this, my PSA is 0.3 and Bone ALP is 10.2 and ALP is 59. Feel great and happy. Of Course, I am on vegan diet and lots of herbs and spices plus 5 mile walk every day. BTW, latest MRI did not show any mets in bones or lymph nodes. More info is in my profile.

I am staying free of lupron /zytiga as long as my Bikky (becalutamide) helps me. I love my Bikky...the tiny little darling. :upron +zytiga were corroding my body fast. About CBD ,I agree with you.

(JUST SHARING...Not Boasting)



Scribbler55 in reply to LearnAll18 hours ago

Thanks LearnAll. I do not want to go on Lupron. The original plan was to do a month of the bic but start the Lupron two weeks in. I researched both and asked if I could just do bic monotherapy and he agreed. I've had several heart surgeries to repair congenital issues over the decades and am also on warfarin. I don't want to hurt my heart and the side effects are not as harsh. But, I don't want to hurt any of my organs. I will know more where things are headed on the 16th.



LearnAll in reply to Scribbler5517 hours ago

With Bicalutamide..the only side effect I have is MILD gynecomastia..hardly noticeable.

If you have heart issues, do not take Zytiga. Bicalutamide has almost no adverse effect on heart. Also Eat lot of foods rich in Flavonoids such as Onions, Garlic, Grapes, berries tea etc. A very recent study said that flavonoids prevent Bicalutamide resistance.

A member on this forum, Magnus was able to use just Bicalutamide for 5 1/2 years...another forum member was able to use Bicalutamide for 8 years. Only a word of caution: Make sure you monitor your PSA and bone specific Alkaline phosphatase (BALP) once a month. By this way, you can catch early if bicalutamide is failing.

I just noticed that you are on Warfarin. In this case, you might need to adjust dose of Warfarin lower...because Onion, Garlic, Ginger, Turmeric all are mild blood thinners and can increase effect of Warfarin. Discuss this with your doctor.



RICH22 in reply to LearnAll11 hours ago

i swear by bikky -- been on 50mg for over 2 years, steady PSA<0.1 -- take finasteride and tamsulosin with it, to keep urine tube open and gland from expanding... do kegel exercises as often as possible. original biopsy showed GL 4+3, with PSA around 17. Flimsy erections but orgasms are super.



**LearnAll** in reply to <u>RICH22</u>8 hours ago

In many men, Flimsy erections can become better erections by taking Arginine (amino acid supplement) Seafood is also loaded with Arginine. it needs to be used under careful medical supervision because PCa men have heart problems due to ADT treatments. Heart status need to be checked by doctor before prescribing Viagra or Cialis.



Tall\_Allen 19 hours ago

No, not at all unusual. That's why bicalutamide was used before there were drugs that worked even better.



Rainyday1213 hours ago

My husband went from over six hundred to under point zero nine in one month. He takes Zoladex and Erleada!



wagscure2596 hours ago

Great response. One word of caution - once PSA rises and other lab indicators increase bicalutamide use should be re-examined as it can become an activator of PCa.



Magnus 1964 6 hours ago

Bicalutimide is an older ADT drug with fewer side effects. My advice, stay on bicalutimide until your PSA starts to rise. Then you can move on to other treatments.



gourd\_dancer3 hours ago

Scribbler, you are an adult and have the ability to make adult decisions. And for this reason, I would never criticize how anyone treats their metastatic disease. However, I will offer up a suggestion. Take it or leave it.

Fifteen years ago I made the same suggestion to a Brit who was convinced that blowing dope and drinking his own urine would give him a long life with no side effects.

Research and then discuss with your treating physician, micro-metastases. With that, I wish you a long life.

#### Gourd Dancer



<u>Scribbler55</u> in reply to <u>gourd\_dancer</u>3 hours ago

Thanks for the input. I do not believe "blowing dope" will cure my prostate cancer. I have however found it to be an excellent pain reliever for my severe arthritis, glaucoma, cancer pain, etc. It also helps with my mood and eases depression.

I have done a great deal of research both as a cancer patient and a lifelong glaucoma sufferer.

There is scientific evidence that CBD in synergy with bicalutamide targets cancer better than CBD by itself:

ncbi.nlm.nih.gov/pmc/articl...

#### **KEY RESULTS**

Cannabidiol (CBD) significantly inhibited cell viability. Other compounds became effective in cells deprived of serum for 24 h. Several BDS were more potent than the pure compounds in the presence of serum. CBD-BDS (i.p.) potentiated the effects of bicalutamide and docetaxel against LNCaP and DU-145 xenograft tumours and, given alone, reduced LNCaP xenograft size. CBD (1–10 µM) induced apoptosis and induced markers of intrinsic apoptotic pathways (PUMA and CHOP expression and intracellular Ca2+). In LNCaP cells, the pro-apoptotic effect of CBD was only partly due to TRPM8 antagonism and was accompanied by down-regulation of AR, p53 activation and elevation of reactive oxygen species. LNCaP cells differentiated to androgen-insensitive neuroendocrine-like cells were more sensitive to CBD-induced apoptosis.

#### CONCLUSIONS AND IMPLICATIONS

These data support the clinical testing of CBD against prostate carcinoma.

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The other cannabinoid I'm using in quantity is CBG, cannabigerol. which has steeply dropped in cost this year.

I came to find out about CBG from a world-renowned published cannabis researcher, CBG also known to fight inflammation and help build bones.

These supplements are legal derived from hemp.

It has been shown via research that cannabis and cannabinoids help other medications work better.

For example, opiates and cannabis offer better pain relief than either alone. There is a fair amount of research on this synergism.

64.77 to 1.09 is a 98.32% drop in PSA.

I think the cannabinoids helped achieve that result.

My goals are to use the cannabinoids to both enhance the therapeutic effects of bicalutamide, etc. and to mitigate the many side effects.

Now at a few days over a month on the Bicaloo, I've had a smooth ride with only transient side effects, but nothing that has really hurt my quality of life.

I believe as the study notes that cannabinoids deserve to be looked at deeply. This community shows that cannabis therapy could really improve some outcomes and quality of life for some patients, IMHO.



RVALuna31 minutes ago

55, I have had a drop of 90% the first month on Bicalutamide starting at 12.2 with multiple Mets. Now at 2 1/2 years it has shown first rise from 0.0258 to .0482 with doubling time of 5 months. I will add the CBD oils which has done wonders for my wife's 30 years of Fibromyalgia in compacities/pain. Thanks I am 26 years from surgery and 21 years since BCR.