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Larry Bans, M.D.

Prostate Solutions of Arizona Takes Aim
at Prostate Cancer Awareness

Larry Bans, M.D., and the Team at Prostate Solutions of Arizona Take Aim at Prostate Cancer Awareness

By Tonya Poole



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PHOTO BY KING LAWRENCE

One in six American men will be diagnosed with prostate cancer — that's approximately 230,000 newly diagnosed cases this year, nationwide. And in 2006, about 30,000 men will die from prostate cancer. Those are sobering numbers, but progress in detection and diagnosis methods over the last 30 years has continued to improve the odds for men battling prostate cancer, and new and innovative treatment options provide an increasingly promising outlook.

Prostate cancer survivor and urologist, Larry Bans, M.D. — the only urologist in the state of Arizona devoted exclusively to diseases of the prostate — says it's critical to increase public awareness about prostate cancer if cure rates are to continue rising.

"The overall attitude surrounding prostate cancer today is far more hopeful than it was 20 or 30 years ago," says Bans. "But we can't get comfortable with that. Early detection and appropriate treatment plans are still the best way we can reach and successfully treat patients with prostate cancer, and to have those things, the public needs to be aware of the signs, the options and the availability of care."

Bans says he's passionate about the fight against prostate cancer because he, too, was diagnosed with the disease in December of 2002, after he noticed that his own PSA (prostate-specific antigen) level had risen, and a follow-up biopsy came up malignant. "I was lucky," he says. "I had a radical prostatectomy promptly, and haven't had any problems or recurrence since then."

At the time, Bans had been a practicing urologist with Urology Associates in Phoenix. After 20 years with the team, Bans found himself doing more and more



The team at PSA.

prostate cancer-related work in the group and, thanks in part to his own diagnosis and recovery, made the decision in 2003 to strike out on his own, focusing on prostate cancer diagnosis and treatment — a field he felt was critically underserved. He opened his doors at Prostate Solutions of Arizona (PSA) in early 2004.

A Cornell Medical School graduate and former urology resident at Indiana University Medical Center — world renowned for its research in testicular cancer — Bans' decision to practice urology, and later prostate cancer, were largely influenced by Dr. John Donahue, Bans' mentor and close friend at Indiana University. "He was a wonderful chairman," he says. "And he really helped to build that medical center into a state-of-the-art men's cancer and chemo facility."

But his decision to go to medical school, he says, began back in 1956 with a throat culture. "I was about four years old, and I went to the pediatrician with a horribly sore throat," he says. "I remember being one of his first patients, and he did this great new thing on me that few other doctors were doing at the time: a throat culture! Then he called my mother and prescribed an antibiotic. Within an hour I felt better. And I said to myself, 'Wow! I want to do things like that for people, too.'"

Today, Dr. Bans heads up the only exclusive prostate practice in Arizona, and one of a very small handful of private practice Urologists devoted solely to the prostate in the country. The need for prostate care in Phoenix alone drove more than 1,000 men in the region to call in to book appointments before the doors at PSA had even opened for the first time, and to date, Bans has seen more than 3,200 patients in two years.

Services range from benign prostate problems, to cancer therapies, to the same radical prostatectomy procedure that helped to save his own life — to the tune of more than 100 procedures each year.

Despite its steady stream of patients — Dr. Bans works solo with his R.N. and office manager, Robert Maxwell, medical assistants Annette Saucedo and Rosalia DeLeon, and front office receptionist Frances Rangel — the practice began and has continued to grow as one of the most digitally advanced private, solo, cancer-related practices nationwide. Set up with state-of-the-art medical technology and business systems, Bans and his team are better able to turn their attention to research, patient care and treatment programs. "DoctorSolutions, Inc. (DSI) stepped in as the business arm of my practice to take things like medical records, billing, accounting and collections off my hands," he says. "And we've made the office completely electronic — everything from Color-Flow Doppler ultrasound, to the urinalysis results, to our medical records, are automated and digital. It was important to me that the office be cutting edge, so we can deliver the best possible treatment without having the manual administration of those things taking time away from patients."

THE COMPREHENSIVE PROSTATE PROGRAM

In addition to his work with detection, diagnosis, surgery and other treatments, Dr. Bans has — in an effort to increase public awareness and track, monitor and treat prostate cancer patients — pulled together his more than 25 years of research and expertise in the field into a Comprehensive Prostate program. Bans believes that an advanced standard

of care that not only tests for PSA levels but tracks fluctuations, “velocity: and patterns in the prostate over time is a better and more reliable indicator of prostate health, and increases a patient’s chances of early detection and treatment.

“There’s typically been a great deal of controversy over the accuracy of PSA levels in the urology community,” says Bans. “And that’s largely due to the variables that can affect those levels, like age and regular daily fluctuations. We knew we needed to develop a better plan to look at those things more accurately over time.”

The Comprehensive Prostate program establishes “baselines” used to follow a patient’s PSA and DRE (digital rectal examination) results and, in some cases, TRUS (transrectal ultrasound) and MRI evaluation and monitoring. Results are comparatively analyzed over the years to watch for changes and velocities (the rate at which changes are happening) that may indicate the presence and growth of cancerous cells. Much like annual mammographies help to track changes in breast tissue when screening for breast cancer, Dr. Bans says the program is critical to combating the inaccuracies and inadequacies that often accompany simple, one-time testing procedures.

Gleason Grading

Prostate cancer is diagnosed using a categorization known as a Gleason Grade. The Gleason Grading system was first introduced by Dr. Donald F. Gleason in collaboration with the VA Cooperative Research Group, and today is the most commonly used prostatic carcinoma measuring system.

Gleason Grades run from 1 through 5, and categorize the cancer cells based on “architectural pattern.” For instance, grades 1 and 2 are cancer cells that still resemble healthy prostate tissue and contain well-defined boundaries. These are considered well-differentiated cells and will behave most closely to normal prostate cells and be less aggressive. Grade 3 is the most common grade on the Gleason scale, and indicates that the cells are only moderately differentiated with boundaries that have lost definition. Grades 4 and 5 are cells that no longer resemble healthy tissue and have lost most or all definition, indicating a more aggressive cancer.

Once the Gleason Grade has been determined, a Gleason score will be calculated based on the appearance of cancer cells in more than one area of the prostate tumor. Using the two most commonly occurring grade areas in the tumor, the score is determined by adding together those grades, most prevalent first. For instance, if a tumor contains a majority of grade 2 pattern cells, and a minority of grade 3 pattern cells, the overall Gleason score will be $2 + 3 (= 5)$.

The educational video from Dr. Bans and PSA, “Your Prostate Biopsy Is Positive: Here’s What You Should Know,” explains in further detail the Gleason Grading and Scoring system.

To order a copy for yourself or your office, call (602) 426-9772 or visit www.psa.md.



Much of the program’s effectiveness can be attributed to the increasingly accurate imaging technologies in recent years. In the past, imaging alone hasn’t been particularly helpful in localizing or diagnosing prostate cancer in most cases, but today the industry enjoys rapidly improving technologies, like the Color-Flow Doppler, that can, in many cases, localize cancers in deeper regions of the prostate, providing for an earlier detection. The Color-Flow Doppler, endorectal MRI scanning (provided exclusively by John Simon, M.D., at Simon Medical Imaging), genetic testing and a number of other innovative detection technologies help Bans to get a better, more accurate look at prostate tissue and to more effectively recommend the course of action and treatment for each patient.

The program started in 2005, during Prostate Cancer Awareness Month, and suggests that men should begin screening for prostate cancer at the age of 40 and continue with subsequent examinations and evaluations, increasing in scope with age thereafter. While the program is a sound recommendation for all men, Bans says it’s an especially useful tool for men with high-risk factors, such as family histories of prostate cancer — particularly if the father or brothers have been diagnosed. African-Americans also are at increased risk. Though while genetics certainly play a role in some cases, Bans says about 80 percent of prostate cancer is thought to be sporadic, or not attributed to genetics. Therefore it’s important for men over 40 with no family history, too, to seek out early testing and evaluation.

“What it comes down to is that PSA levels alone are not a reliably accurate indicator of the presence or risk of prostate cancer,” says Bans. “In the early 90s, I was part of a team that conducted a controlled-group research on a group of men. We found a 25 percent decrease in cancer risk in men on the test drug, but when we biopsied people at the end point, seven years later, we found that even men who had normal PSA levels now had prostate cancer. So PSA testing alone is not enough. There is no truly safe PSA level.”

Nonetheless, Bans feels the PSA test is still an important component of the Comprehensive Prostate program, and of any prostate cancer testing program, and recommends its use alongside other methods to ensure the most accurate diagnosis available.

TESTING POSITIVE FOR PROSTATE CANCER

For patients whose battery of test results give Bans a reason to believe cancer may be present, a needle biopsy of the tissue is performed to confirm the presence of cancerous cells. If the biopsy is positive, evaluation of the cancer cell patterns will yield a Gleason Grade and Score: a widely-used measure of cancer growth and severity (*see sidebar*). Bans and his team will work with the patient to determine the best course of action, which may include radiation therapy, cryotherapy, surgical removal and possibly alternative treatments — though Bans is careful to note that patients should always consult a prostate specialist before beginning even vitamin and supplement-based plans.

“There’s a lot of research going on out there right now into alternative therapies,” says Bans. “And while some of it is very exciting, we can’t exclude medical science from the equation. The mineral selenium is a great example. It’s thought in many circles that men with prostate cancer may have lower selenium levels than the average population. So, I see a lot of patients taking it, but what they don’t always realize is that high levels of selenium can actually be toxic to the body and cause damage in the DNA structure.”

To address the myriad of patient questions surrounding a positive biopsy, and questions from other urologists working with prostate cancer patients, Bans and his team have developed a 30-minute educational video: “Your Prostate Biopsy Is Positive: Here’s What

Prostate Cancer Statistics

An indiscriminatory disease

Unlike many other diseases, men of all ages, races/ethnicities, family histories and regions of the world are potentially at risk for prostate cancer.

Second most common form of cancer in men in the United States

Second only to skin cancer, prostate cancer affects approximately one in every six American men, resulting in about 230,000 new cases this year.

Early detection and comprehensive treatment are key

Despite progress, prostate cancer is still responsible for an average of 30,000 deaths each year, and remains the second leading cause of cancer-related death in men. Detection, diagnosis and comprehensive treatment are critical.

You Should Know.” Designed for patients to view in-office with their families, the video discusses a range of topics, from Gleason grades, to clinical staging and diagnostic testing, to the array of treatment



PHOTO BY KING LAWRENCE



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options available. Short- and long-term complications are discussed, as they relate to treatment options.

“This project was done from my perspective as a physician and a patient,” says Bans. “People really need to know what happens next, what their options are. A large part of fear, especially when it comes to medical issues, arises from confusion, conflicting information and just plain not knowing.”

The video is the latest in Bans’ crusade to increase public awareness about prostate cancer, in hopes to continue pulling the mortality rate attributable to the disease down farther and farther each year. He credits public awareness and education as the reason for the decline in cancer-related deaths over the years, but says there’s still much work to be done, and progress to be made. He continues to lecture and offer presentations on his work, and is forging forward with the practice to offer patients the best available treatment options — including a prostatectomy procedure available at Prostate Solutions of Arizona that’s achieved a 99 percent success rate in preserving urinary continence.

Down the road, Bans plans to expand his practice to include an alternative therapies subpractice, devoted to the research and application of vitamin and supplemental therapies. “People are out there taking these

things randomly,” he says. “They need to have specialists they can turn to and to trust that they’ll know what is and isn’t helpful and harmful based on their circumstances.”

He’s also considering collaboration with other physicians and medical specialists on a local or regional foundation to promote prostate cancer awareness across the Southwest, and to offer local patients a network of support and education.

In the meantime, Bans says he’s incredibly pleased with the success of the practice in such a short time, and that his success is evidence that there is a need for physicians who truly specialize in diseases of the prostate exclusively (both benign and malignant).

“I feel incredibly fortunate to have been diagnosed early and so successfully treated myself,” says Bans. “And just as fortunate now to use my own personal experience with the disease to treat, and to relate to, my patients in a very unique way.”

To learn more about Prostate Solutions of Arizona, the Comprehensive Prostate Program, the educational video, “Your Prostate Biopsy Is Positive: Here’s What You Should Know,” or get referral information, call (602) 426-9772, or send an e-mail to info@psa.md. You can also visit them online at www.psa.md. Prostate Solutions of Arizona is located at 2525 East Arizona Biltmore Circle, Suite C-236, Phoenix, AZ 85016. ■