

MEN DON'T CRY

Men Don't Cry - Prostate Cancer Stories **CBC Version** **January 29, 2003**

10:00:08

Narrator

Prostate cancer is now the most commonly diagnosed cancer among Canadian men. One in eight men will get prostate cancer. About forty-two hundred men are expected to die this year in Canada. Some experts estimate that the number of men diagnosed with prostate cancer will almost triple in the next twenty years and there are no easy solutions in sight for this coming epidemic.

10:00:44

Documentary filmmaker John Zaritsky had no idea he would become a statistic himself when he started making this film. But just as he was finishing production, the fifty-nine year old director was diagnosed with prostate cancer.

10:01:03

John Zaritsky

Nobody is happy to hear the news but in a way I felt lucky in that I had spent a year watching other men cope with prostate cancer. This film is not about me; it's about three men who have made the difficult decisions I'm now facing decisions about impotence, incontinence and even survival.

10:01:28

Dr. Larry Goldenberg

If I were to come to you and say, "I can give you five more years of life but you're going to be impotent", okay,

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versus, "You're not going to get those five years but you can be potent 'til the day you die."

10:01:43 You have to make that decision. Do you want those extra five years and give up your sexual functioning? Those five years to see your grandchildren grow up, to be with your spouse, play golf, be with your friends but not have sex. Or, do you want to be sexually active and die five years sooner. That's up to you. I mean, I can just lay out the options to you.

10:02:08

Jake Unger

I had to think about surgery. I've never been I call it "carved on". I've never had surgery of, of any kind.

10:02:18

Gary Marshall

Rust is cancer of the, of the car you know cut it out its gone and replace it with new metal, you're fine. In my case, well they're going to cut it out and it's going to be gone.

10:02:27

Bob Hunter

I'm not worried about dying. I take Woody Allen's view: it's not death that worries me it's the way you go that's the, that's the scary part.

10:02:37

MEN DON'T CRY
Prostate Cancer Stories

MEN DON'T CRY

*A film by
John Zaritsky*

10:02:46

Narrator

The prostate is a walnut-sized gland located at the base of the bladder. It produces a liquid that is part of semen. Doctors are deeply divided about whether men over fifty should be tested for prostate cancer in the same way that women are routinely screened for breast cancer. A simple blood test for prostate specific antigen or PSA can often detect cancer in the prostate at an early stage. But Bob Hunter, like many men, put off having the test for several years.

01:03:19

Bob Hunter

I've tried to figure out why I was resistant and I've read someplace that this is a typical male behaviour pattern. I think part of it is simply it had something to do with my sexuality I guess. Or the other part is maybe I didn't want to know. I'm sure I can't really give you the real answer. It was probably just denial – it might have been that I was just “chicken”.

01:03:41

Narrator

“Chicken” has never been a word used to describe Bob Hunter who, as co-founder of Greenpeace, risked his life on many occasions for environmental causes. After leaving Greenpeace, Hunter became the ecology specialist for Toronto television station, City TV.

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01:03:59

Bob Hunter

....if you lower greenhouse gas emissions by one ton per household. That sounds like a lot but it's really very easy to achieve.

01:04:07

Narrator

He had turned fifty-eight when he finally decided to have a PSA test. Within days, Hunter was called in to see his urologist.

01:04:16

Bob Hunter

He had a very long face and he told me I had a reading of ten and it was past the point of watchful waiting or anything and if I didn't get it tended to immediately it would metastasize into my other organs and, "there's no point waiting Mr. Hunter, we're going to have to operate immediately."

01:04:32

And I said, "Okay, just a couple of seconds, a couple of questions. For instance, are there any side effects?" "Oh well, yes there's a seventy percent chance of incontinence, there's a sixty-five percent chance of impotence." And I said, "Impotence? You mean impotence?" And he said, "Yeah, yeah."

01:04:52

And I paused for a while and he kind of looked at me, he said, "You know a lot of guys have psychological problems with that." And I thought... at that point I wanted to hit him. Psychological problems? Can't get it

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up and have to wear a diaper enough to give me psychological problems?

01:05:08

Bobbi Hunter

He called the office and he said, you know, with a terror in his voice, "Everything's just fine, not to worry." And, "The numbers are just a little high but it's all right." And I go, "Oh, okay." Twenty-eight years with a fella, you know when they're telling you the truth or not.

01:05:31

Bob Hunter

I didn't know that she'd actually already researched this thing. She knew damn well, even the figure I was giving was too high. But she decided not to, you know she gave me my breathing space.

01:05:40

Bobbi Hunter

Well we proceeded to kind of go into a bit of a denial. We decided not to deal with the issue because we had about three major things on our plate in that month. All wonderful things and we thought, "Well, let's not talk about this now, let's go through this wonderful month."

01:05:58

Bob Hunter

I got to go to Amsterdam to talk to the Greenpeace International gathering and then we got flown down to L.A. and I got some kind of eco-pioneer award.

01:06:08

MC

Ladies and gentlemen, please welcome the Wyland Foundation's Eco Pioneer Award recipient who also

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happens to be celebrating his twenty-fifth wedding anniversary, Mr. Bob Hunter.

01:06:19

Bob Hunter

It was suddenly like having this wonderful, almost like a “last hurrah” kind of thing going on you know. Being feted and wined and dined and handed little awards and stuff, and in my own mind I kept thinking, “Geez this is like somebody winding up their life or something like that.”

01:06:34

Bobbi Hunter

For a person to discover you have cancer, you know, try to set it up that you're going to go off and get an award, an accolade you know. It was terrific.

01:06:48

Narrator

After the ceremony, the couple finally ended their silence and discussed Bob's cancer for the first time.

01:06:54

Bobbi Hunter

It was a release. You know we hadn't actually been able to. That fear, when you're so close to somebody, you know the idea of the loss is devastating, so that's what we were trying to express to each other.

01:07:18

Bob Hunter

So we cried a little bit and then she said, “Okay.” So as it turns out she had been on the Internet researching. She knew all the options damn near by this time and we started talking, “Okay, which route do we go?” and we decided to get scientific about it.

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01:07:33

Bobbi Hunter

Well like, "Let's not panic. It doesn't necessarily mean that this is the end. Let's start asking questions; let's start researching."

01:07:52

Narrator

Jake Unger, a sixty-two year old truck driver in British Columbia wasn't surprised when he was told he had prostate cancer.

01:08:01

Jake Unger

I had thought for a long time when my turn was going to be 'cause my father had prostate cancer and he's passed on. My brother has a bad case of prostate cancer now and he's eight years younger than I am. Yeah, I'd say I figured my number was up.

01:08:25

Narrator

Jake went to see Dr. Clark Jamieson an urologist in Prince George.

01:08:32

Dr. Clark Jamieson

There's a lot of good things going for you. You're only sixty-two, you have a fairly low-grade cancer.

01:08:41

Jake Unger

Uh hmm.

01:08:42

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Dr. Clark Jamieson Now, there's the two main ways to go about killing the cancer in the prostate gland. Number one is to operate and just totally remove the prostate gland with all the cancer that's in it, okay?

01:08:55

Jake Unger Uh hmm.

01:08:56

Dr. Clark Jamieson Number two is to give you radiotherapy to the prostate gland. The surgery has the advantage that it can be done here in Prince George.

01:09:06

Jake Unger Right

01:09:07

Dr. Clark Jamieson So, when we do that there's a couple of things that can happen. Number one, the nerves that allow you to have erections go very close to the prostate gland on either side and they're easily damaged. There's a significantly high rate of inability to get erections afterwards. The second thing is, when we're down there, we're working right on top of the muscle that controls your urination.

01:09:33

And that muscle can sometimes be affected by the surgery, okay? Now we'll go to the radiotherapy. The chances of having erectile failure after radiotherapy are less than they are with the surgery.

01:09:46

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Jake Unger Umm.

01:09:47

Dr. Clark Jamieson Also, the chances of having loss of urinary continence totally are much less than with the surgery, okay?

01:09:56

Jake Unger Okay.

01:09:57

Dr. Clark Jamieson Now it sounds, on the surface, like maybe we should just go with the radiotherapy; that might be the smartest thing to do but what we've found from experience is that the long-term cure rates are not as good with radiotherapy as they are with the surgery, okay? My feeling is that probably at your young age, sixty-two, surgery's probably the best way to go.

01:10:25

Jake Unger I had to think about surgery. I've never been, I call it "carved on". I've never had surgery of any kind. I think there was a fear of the unknown.

01:10:42

Dr. Clark Jamieson Most men are indecisive and have difficulty with this because they're faced with a pretty momentous decision and I would say that Jake is pretty typical of most men.

01:10:58

Narrator Gary Marshall, a Vancouver auto-body worker was fifty, an age when some doctors feel PSA testing should start.

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Marshall had a routine physical and after a digital rectal examination uncovered a suspicious lump, his doctor ordered a PSA test.

01:11:23

Gary Marshall

So anyways, I go into the room and I sit down and he opens his booklet and he's looking at it for a little while and I think, "Whoa!" So he says, he comes up, says, "Yes you have it." And I says, "You're kidding!" And he says, "No, you have prostate cancer." And when somebody tells you you have prostate cancer, any cancer, man it just deflates you.

01:11:46

I was thinking, "This is a one-way street." He gave me some brochures, and I walked to my car and I read these brochures. And it was baffling; it was really, really baffling 'cause you don't anything about prostate cancer. And I went for a long drive just to collect my thoughts. So I went back to work and I thought, "Ahhh!" I went home.

01:12:10

And my wife Ann, she comes home, she's all, quite optimistic. She says, "Well how did it go?" And how do you tell your wife the news? How do you let her down? So I says, "Yeah I have it, I have prostate cancer." And she says, "You're kidding?" You go to work every day, come home, you do, you're doing everything right. You know, why me?

01:12:32

You're always hearing of the other fellow. The other fellow is not a concern but when it hits you it's a concern.

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01:12:44

Narrator

All men first diagnosed with prostate cancer are sent to see a urologist who is a surgeon.

01:12:50

But Dr. Larry Goldenberg says he isn't in competition with doctors offering other forms of treatment.

01:12:56

Dr. Larry Goldenberg

I don't like to think of myself as a salesman. I'm not trying to sell this to the patient; I'm trying to make sure that the patient understands the options, what it is I can offer him, what the consequences are of that treatment, and that he is comfortable making his decision.

01:13:14

Before hand I tell them, "I'll do my best but my priorities are to get the cancer out, second priority is to try to achieve normal urination, and then as a third priority, try to preserve sexual functioning." So whether a man is going to be potent, whether we're successful in doing a nerve-sparing operation depends on the first two priorities.

01:13:37

Narrator

A North Vancouver urologist had recommended surgery to Gary but he and his wife Ann sought a second opinion from Dr. Tom Pickles, a radiation oncologist at the B.C. Cancer Society.

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01:13:50

Dr. Tom Pickles How important is it to you in terms of the different treatments to be able to preserve a chance of having a normal erection?

01:13:57

Gary Marshall Well, it's not the issue right now.

01:14:00

Dr. Tom Pickles Okay

01:14:01

Gary Marshall Like there's going to be side effects no matter what after the operation. Radiation there's going to be some dysfunctional work in there but at the moment I just want to get better.

01:14:12

Dr. Tom Pickles Okay. I often encourage people to go with their gut instincts 'cause the bottom line is the patient has to live not just with the side effects of the procedure that he chooses but also the success or failure rate of it. So my job I see is to guide people where there is a clear evidence of superiority of one or other treatment.

01:14:34

But where there isn't clear superiority, to listen to what they're telling me and to reinforce the decisions that they're coming, they're formulating.

01:14:46

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Narrator But when Gary considered his options, he couldn't forget the experience as a ten year-old visiting his grandfather in a hospital room.

01:14:54

Gary Marshall And here I see this man laying in bed and his shirt was open, and his chest was bright red. And I said to Dad, "What is that?"

01:15:01

And he says, "He has lung cancer and that's radiation to try and fix him." And I looked at the poor man and I was just, "Oh, what's he going through?"

01:15:13

Narrator Surgery made more sense for Gary.

01:15:18

Gary Marshall When a car comes in with some rust that's perforated with holes, well the best way to repair that is cut it out completely and then it will not come back again. And then you're guaranteed. And to radiation, like to me is just a cover-up, which we can do in the body shop too. We can grind it down and we can fill it but it's still there and eventually it's going to come back, which it does.

01:15:41

So that's my way of thinking, you know, related to the car industry to surgery, you know. It's easier for people to understand that way. You know, 'cause rust is cancer of the car. Cut it out, it's gone. You know I want to live for another, at least twenty-five years; I'm fifty now but that's the biggest thing in my mind.

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01:16:05 These side effects, I don't worry about them. I mean, impotence and your sex life might not be well as it should be but it'll come back in time. It's just survival.

01:16:32
Narrator Bob Hunter remained decisive about one thing – he didn't want surgery.

01:16:37 Instead he tried different herbal remedies containing female hormones, which succeeded in reducing his PSA numbers, but he experienced some surprising side effects.

01:16:48
Bob Hunter I was now displaying, my feminine side was more. It's not that I was mincing around or even that I was crying at movies more or any of that particular. It's just that my shift was a little different. And the kids started noticing that they'd want a ride, and instead of me saying, "For God's sake, I'm so damn busy, don't you see?" I'd be saying, "Sure dear, where do you want to go?" Emily.

01:17:09
Emily Hunter Hi Dad.

01:17:10
Bob Hunter Sweetheart.

01:17:11
Emily Hunter How are you?

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01:17:12

Bob Hunter Not bad. How are you? Are you good with supper around, I don't know, five-ish, five-thirty?

01:17:17

Emily Hunter Yeah.

01:17:19

Bob Hunter So the running gag in the family was that, "Geez, this is pretty good. What's happened to Dad? He's so nice and everything."

01:17:29

Emily Hunter So it was really weird for me 'cause I didn't know how to deal with him and didn't know how to treat him because you know, one second we'd be laughing and then the next second I, like I didn't, like he was like angry at me. And it was very weird; I kind of didn't want to be around him for a while at times just because I really didn't know how to interact.

01:17:48

It was just like, he was on the planet Mars and I didn't know where that was. So it was really weird going through the process and just seeing how he'd, how his personality's changed from treatment.

01:18:02

Bob Hunter So it was wonderful that the PSA level was going down and therefore the cancer wasn't spreading but on the other hand, my sex life had gone to hell. If the point of

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avoiding surgery had been to avoid impotence, I was now back, oops here I am anyway.

01:18:18

Narrator

Even worse, his PSA levels started to climb.

01:18:22

Bobbi Hunter

I was nervous his numbers were getting higher rather than lower and they were creeping up pretty quickly, so I was, you know I'm not afraid of surgery, I've had success with surgery and I thought Bob was young and healthy, he was fifty-eight at the time. Yeah, that he could probably come through it.

01:18:40

Bob Hunter

It was a quality of life issue I guess but all I knew is that the quality of my life was liable to become so bad that I wouldn't be enjoying myself any longer and I'd be troubling everybody around me. And they would be in a bind because they'd still love me even though I was turning into this snarly, frustrated old goat.

01:18:55

Narrator

On the Internet, the Hunters learned of a new improved form of external beam radiation called Three D Conformal Radiation that sounded promising but came with a drawback common to all radiation treatments.

01:19:07

Bob Hunter

If I took the Three D Conformal Radiation treatment and it didn't work, I wouldn't be able to fall back on the surgery

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for some reason I still don't understand, whereas if I did the surgery and it didn't work, I could still take the Three D Conformal Radiation. So now you're, you're balancing all this in your head and it's, it just got trickier and trickier.

01:19:34

Narrator

Finally Bob decided that the reduced risks of impotence made Three D Conformal Radiation the right choice for him. It was a type of radiation that pinpoints its cancerous target more precisely.

01:19:48

Bob Hunter

As for the irony of a guy who spent his, half of his career opposing all things nuclear, and here was radiation coming to my rescue. So I thought to myself, "Well I guess that's what they call a paradox."

01:20:02

Bobbi Hunter

I was not as keenly, you know, excited about this process as Bob, I have to say that. And he was just thrilled, "No surgery", I was going, "Yeah, but you know, there's no options either." He was convinced it was going to work and I said, well you know, from the beginning, it's his decision.

01:20:28

Narrator

His treatment would consist of daily doses of radiation over a seven-week period and patients were told to show up at the hospital with a full bladder.

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01:20:37

Bob Hunter

In a brilliant burst of ridiculous planning, somebody who designed the hospital had, in the middle of the prostate ward where all these guys are sitting around with full bladders, there was a fish tank bubbling away.

01:20:51

And little fish. And when I complained about it the nurse says, "You know whose bright idea was this?" She said, "God it was worse. The original plan called for a fountain."

01:21:03

Bobbi Hunter

He's a charmed kind of character, living a charmed life and it looks like he may have got through one more time.

01:21:17

Narrator

Jake Unger still wanted to avoid surgery and instead decided to take the day -long drive to Vancouver to find out about a new form of radiation therapy called brachytherapy.

01:21:27

Dr. Tom Pickles

Let me just outline what would happen if you chose brachytherapy. I'll just go through the process. We insert about thirty radioactive needles about a hundred and ten radioactive seeds with you asleep. That whole process takes about an hour and a half. Now the risk of a significant side effect long-term is about one in twenty. But most people, their urinary function will return close to what it was before we started messing around with you.

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01:21:58

Jake Unger Uh hmm.

01:21:59

Dr. Tom Pickles I don't think it matters which of those treatments you pick in terms of your chances of being free of cancer in five or ten years time. They're all good treatments. So what you should do is choose which of the treatments you want on the basis of which one suits you best.

01:22:24

Narrator At a family picnic, Jake Unger talked it over with his younger brother Arnold who himself is fighting a long battle with prostate cancer.

01:22:34

Arnold Unger That was quite a shock that two brothers in the same family would get it. I know it's a hereditary disease but it's just really hard to imagine that my only other brother would get prostate cancer as well.

01:22:52

Narrator After both surgery and radiation failed him, Arnold is now a test subject in an experimental drug program for prostate cancer victims who have run out of options.

01:23:03

Arnold Unger If these tests fail me, possibly they'll help my sons and my grandsons.

01:23:25

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Jake Unger Well my brother has had a pretty rough go on his cancer trip, and he said to me, "If I were you I would do the brachy." So that has sort of had an impact on me.

01:23:42

Narrator Jake's decision to have brachytherapy came as a big relief to his wife Margaret.

01:23:48

Margaret Unger 'Cause I had two sisters that had breast surgery and what they went through with surgery I think that I'd like another route if there is another way.

01:23:59

John Zaritsky Uh hmm. Yeah. Did you tell Jake that, that you didn't want him to do surgery?

01:24:03

Margaret Unger No, no, I let him make his own decision.

01:24:05

John Zaritsky You didn't tell him at all?

01:24:06

Margaret Unger No, not until he decided and then I said that I was glad that he chose that.

01:24:14

Narrator Three weeks later, Jake Unger returned to Vancouver for his brachytherapy procedure. Small radioactive pellets are implanted into the prostate gland with long needles

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directed to a specific location by an ultrasound image of the prostate gland.

01:24:33 The operation lasted one and a half hours, and over the next several months the pellets should destroy the cancerous tumour but they will remain in Jake forever.

01:24:45
Jake Unger Hey, I'm back.

01:24:48
Narrator Five hours after his operation ended, Jake Unger was back on his feet.

01:24:55
Jake Unger They put you to sleep and when you wake up, things are just tickety-boo, so I'm well loaded. I could run a power plant probably. Piece of cake.

01:25:09
Narrator Jake is in the minority. Two out of three prostate cancer patients will opt for surgical removal of their prostate, as Gary Marshall did. Six days after his operation, Gary celebrated his fifty-first birthday.

01:25:24
Gary Marshall Look at all that flame there, holy smokes!

01:25:26
Daughter Happy Birthday, Dad!

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01:25:31

Gary Marshall

I turned fifty-one today and it's a special birthday especially, I'm feeling, you know, six days after the operation, I feel good.

01:25:40

I move around real good; no pain. Yeah, it's great. It's just like it never even happened you know, like prior to the operation when you're first diagnosed, well you know, you always wonder, worry. But there's nothing to worry about now, like everything's behind me now, like probably two, three months from now I'll forget all about it like it never happened. You know 'cause you just push ahead – life goes on.

01:26:11

Narrator

Although his operation was successful, Gary will have to wait three months to learn whether his PSA levels have come down.

01:26:35

Fourteen months after his radiation treatment, Bob Hunter got some bad news about his PSA levels from his radiation oncologist, Dr. Juanita Crook.

01:26:46

Dr. Juanita Crook

Your last reading obviously has jumped up significantly and you know that indicates that there is a problem.

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01:26:52

Bob Hunter Right.

01:26:54

Dr. Juanita Crook Um, I think it's important at this point to realize that this was probably... was a situation where we closed the barn door too late, the horse was out; so what people tend to do if whatever treatment they've chosen for their prostate cancer has not worked, to start second guessing themselves and say, "Ach, I should have done this, I should have done that."

01:27:16

I think whatever you chose to do, you'd be in this scenario now because it's still so soon after your primary treatment. And what this indicates is that there's something somewhere else.

01:27:26

Bob Hunter Okay.

01:27:27

Dr. Juanita Crook And the places that prostate cancer tends to go to if it's somewhere other than the prostate is either in the lymph glands, usually in the pelvic area, or in bone. What's causing the PSA to shoot up now is something that was not in the area that was radiated, i.e. it was not in your prostate at the time.

01:27:45

Bob Hunter Okay. So the little bugger had slipped out already.

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01:27:48

Dr. Juanita Crook Exactly.

01:27:50

Bob Hunter So that'll be a function of maybe I should have acted a little sooner perhaps.

01:27:54

Dr. Juanita Crook Yeah, and again, don't get into the second guessing thing, but...

01:27:55

Bob Hunter Yeah, I know I guess I just...

01:27:58

Dr. Juanita Crook You know, if you had leapt on this immediately, I don't know if it would have made a difference, probably not. So what we want to do is keep it under control; keep your life-style the way it is and keep you well.

01:28:09

Bob Hunter All right, all agreed, all in favour, all opposed, carried.

01:28:19

So, there you go.

01:28:22

Bobbi Hunter You okay?

01:28:23

Bob Hunter Yeah, I'm fine, you know. I mean, I'm telling you I'm not really having any second thoughts or any of that kind of

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stuff and I'm not beating on myself and I'm not blaming anyone or anything

01:28:33

Bobbi Hunter Yeah, yeah.

01:28:35

Bob Hunter So, 'cause that's all totally useless.

01:28:37

Bobbi Hunter Yeah

01:28:37

Bob Hunter And ah, you know, like it's not; I'm not about to croak or something like that. It's just, you know, here we go there's going to be a bunch of stuff I'm going to have to do.

01:28:45

Bobbi Hunter Right.

01:28:46

Bob Hunter Who knows? I may have to wind up being able to get some medical marijuana out of this.

01:28:53

My wife would have preferred that I'd gone the nice clean route, surgery route right off the top I think rather than worrying about my dick but you know, I promised my member a long time ago I was there to protect it.

01:29:16

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- Narrator Bob Hunter is able to maintain his sense of humour but he knows that prostate cancer will probably kill him.
- 01:29:24
- Dr. Juanita Crook He's otherwise healthy so there aren't competing things that will get him first, and it's certainly a strong probability.
- 01:29:34
- Bob Hunter It's like, you know, the gong of doom sounds and the first time you hear it you get all in a kafuffle, the second time you hear it, it's sort of like, "Oh yeah, there's the gong of doom again," and I can begin to see that after fifty more gongs of doom it'll be a sort of a routine. And also each time it's some kind of an interesting exercise you go through.
- 01:29:54
- Like you know, should I give in and be angry, bitter, "Oh my God, why is this happening to me?" kind of stuff. And I've seen people do that often enough. It's a disgusting spectacle. Fabulous, that's all we need. Normally it's a little more complicated than that but not today.
- 01:30:16
- I'm Bob Hunter in Brampton for Cable Pulse Twenty-four. Boom.
- 01:30:22
- Dr. Juanita Crook Certainly we can use other modalities like hormonal therapy to control it for a period of time. That will be effective anything from several months to several years.

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01:30:38

Narrator

Six months after his brachytherapy, Jake Unger has not experienced any side effects; but with any radiation treatment, impotence could still occur in the months and years ahead. For now, he and Margaret are off to spend the winter at Blue Grass festivals in the southern United States.

01:31:14

Three months after having his prostate removed, Gary Marshall reached an important milestone in his life when he walked his eldest daughter Laura down the aisle.

01:31:24

Minister

To join together this man and this woman...

01:31:27

Gary Marshall

One daughter's gone now; I'm very happy for her and I'm happy that I'm here to see her off.

01:31:32

Minister

Who gives this woman to be married to this man?

01:31:35

Gary Marshall

I do. I was a little worried when I was diagnosed with cancer three months ago. I didn't know how things were going to go because you don't know, you really don't know but things have gone well and I'm pretty positive that the PSA level's gone down to zero and I'll be a hundred percent cured.

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01:31:52

Minister

Repeat after me, "With this ring I thee wed..."

01:31:54

Gary Marshall

My wife and I have had relations and it's coming back. It took about a month you know, it's just, well it took a lot of bruising and what-not down there, so the function is coming back. It's something that, you work at it. It's coming back; like the erections are getting harder now and lasting longer so there's no problem there at all.

01:32:17

Minister

You may kiss the bride.

01:32:28

Gary Marshall

My other daughter is going to be married next year. You know, life is going on, I feel good.

01:32:34

Man in green

Gary how are you?

01:32:35

Gary Marshall

Not bad, how're things?

01:32:36

Man in green

Good. How you feeling?

01:32:37

Gary Marshall

I feel good

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01:32:38

Man in green Yeah?

01:32:39

Gary Marshall Oh yeah.

01:32:40

Man in green Excellent! You look great in your suit.

01:32:42

Gary Marshall Thank you! I'm going to be around for a long time 'cause I feel good. Thank you, yeah.

01:32:54

Narrator For six months, Bob Hunter had been taking hormones to control the cancer in his prostate.

01:32:59

Bob Hunter This is a case where lacking a strong opinion, I fall back on objectivity.

01:33:06

Narrator Professionally life had never been better and he recently launched his own weekly talk show. Bob went to see specialists about two "cutting edge" treatments he'd been told would be available if his radiation treatments didn't work.

01:33:19

Bob Hunter Good evening and welcome to Hunter's Gatherings. I'm Bob Hunter.

MEN DON'T CRY

01:33:22

Narrator

Unfortunately, Bob learned that his use of hormones had made him ineligible for either.

01:33:28

Bob Hunter

I might not have gone down the radiation route if I had known that the fall back positions were going to be zilch and zilch. It just strikes me that you know, if you're told to take option A because you will have options B and C,

01:33:40

and then when you get through and A doesn't work and you go to B and C and neither one of them works either, I think you have some right to say, "Just a second here. Why wasn't I getting the straight goods before hand? And don't you guys know what's going on? Can't you talk among yourselves?"

01:33:57

I don't know how they are in other areas but in prostate cancer, my clear impression at this stage is that they're stumbling around in the dark an awful lot and not co-coordinating very well. So that doctor A isn't talking to doctor B, and doctor B and doctor C have completely different philosophies anyway.

01:34:16

Bobbi Hunter

Every step along the way has been quite painful at the time but then we make adjustments, we deal with it together and we take another little breath and stand on that stair and face the next one.

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01:34:28

Bob Hunter

But anyway, so now I'm stranded high and dry now. And so all they can do basically is stay on this testosterone blocker for eight months, and then they take you off for eight months so that you can go back to normal.

01:34:43

The side effects on the testosterone blocker unfortunately are – you get hot flashes, like I'm getting a bit of one now. And some nights it's as many as six times a night, and you wake up each time. In fact, I have to have a fan to put at the bed. It cools. I take the covers off and cool myself and then go back to sleep but it starts to interfere with your sleep pattern after awhile.

01:35:02

And presumably at some point I'll become demented and run up and down the street barking like a dog.

01:35:07

Bobbi Hunter

We both already are aware of the fact that it probably has spread but it hasn't manifested itself in tumours elsewhere and so the next stage is we'll find out that he has, I don't even want to say where it's going to go because it'll be calling it up. I'm not going to say that but somewhere else it'll show up.

01:35:26

And then that's when they attack it with chemo. But then we had a horrible stat from the doctor saying that chemo actually only works for maybe ten percent of the people, so the options keep getting smaller and smaller.

MEN DON'T CRY

01:35:45

Narrator

For eight months, John Zaritsky, the director of this film had watched Bob Hunter, Gary Marshall and Jake Unger make different decisions about treatment methods. But now that he had been diagnosed himself, Zaritsky worried most about what treatment options would be open to him.

01:36:05

Dr. Larry Goldenberg

I'll tell you right up front, as you know I'm a surgeon so I'm a little bit biased, so I want you to keep that in mind but I feel that surgery is an excellent approach to curing men if we can get all the cancer out. And if the pathologist looks at the prostate gland and says, "You've got it all; it's contained within the gland; it hasn't spread to the edges or the margins," then your outlook is really excellent.

01:36:29

John Zaritsky

It depends on the guy and...

01:36:31

Dr. Larry Goldenberg

Absolutely

01:36:32

John Zaritsky

And what your life experience has been and what your priorities are. Now for me, I mean not to gloss over the fact or anything, but my, sex has been a big part of my life and continues a big part of my life, and I assign high, high priority to maintaining my sexual potency. And so as a result, I have this great fear of surgery.

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01:37:00 I fear waking up and you saying, "I had to go in there and you know the tumour was involved with the nerves and so we had to cut the nerves and I'm sorry John but you're sexually impotent." Suddenly overnight like that is something that I can't really deal with. I just...

01:37:23

Dr. Larry Goldenberg You've got tumour in both sides

01:37:24

John Zaritsky ...both sides and so you're likely to hit some nerves on one side.

01:37:26

Dr. Larry Goldenberg And so my priority would be to take the cancer out.

01:37:28

John Zaritsky Exactly, exactly.

01:37:29

Dr. Larry Goldenberg Right? And if I have to sacrifice the nerves to get the cancer out, I'm going to do it.

01:37:34

John Zaritsky Well there you go.

01:37:35

Dr. Larry Goldenberg So you're absolutely right, the, if and, so you have, that's a major, major issue for you and therefore that has to be a big factor in your decision making because you're walking in a mine field.

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01:37:46

John Zaritsky Right

01:37:47

Dr. Larry Goldenberg And if you step on a mine whether it's brachytherapy or surgery and you don't reach the ideal which we all naturally want to reach, you have to be prepared to sit back and say...

01:37:57

John Zaritsky Well, I, wrong decision.

01:38:00

Dr. Larry Goldenberg "I made the decision, I made the decision, I'm living with it."

01:38:02

Narrator John Zaritsky has decided against surgery just as Bob Hunter did three years earlier. Instead, he too has opted for radiation therapy. In spite of the failure of his own treatment, Bob has no regrets and understands John's decision.

01:38:17

Bob Hunter My only instinct in this has been, "avoid the knife, avoid the knife". I mean I still have a sex life. It may be diminished but it's still a sex life –I'll take it thank you very much. I may be sweating at nights but at least I'm alive and I can function during the day.

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01:38:32

John Zaritsky Right

01:38:33

Bob Hunter And I function as well as everything and all my other faculties are together. Hey, that's not bad. It could be a lot worse.

01:38:39

John Zaritsky Right

01:38:40

Bob Hunter Yeah

01:38:41

John Zaritsky Right, right.

01:38:42

Bobbi Hunter You know the thing that we're going through is really an awful but also a really wonderful thing because we both made a commitment to just absolutely enjoying every aspect of life that we can, so we're having a lot of fun. We're having a, really a great time.

01:39:03

Emily Hunter So I make sure every day that my Dad knows I love him and I hope the best, and I hope that he can see me graduate, I hope that he can actually see me go off with my life and I hope that he can see me perhaps getting

MEN DON'T CRY

married, perhaps having children I hope he can see all that.

01:39:25 I really do 'cause I want to see as much of him as I can. But I don't have the answers of the future. All I can do is live every day as I do and so I live it with him and I love him.

01:39:37
Bob Hunter So we decided whenever a cheque comes in instead of bothering to pay off some debt or something like that, we're taking another holiday, so live, love, laugh and be happy.

01:39:48
John Zaritsky Uh hmm

01:39:49
Bob Hunter So that's probably something you sensed anyway but you might as well, I think it just sort of sharpens the sense of getting on with and enjoying things now rather than putting them off 'til later. I can hear my mother's voice in the background somehow.

01:40:07
Bob Hunter Bobbi

01:40:08
Bobbi Hunter *Merci beaucoup*

01:40:09

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Bob Hunter The pain, eh?

01:40:10

Bobbi Hunter You are a pain.

01:40:11

Bob Hunter Right.

01:40:12

Narrator The Hunters are resolved to live for today and to put
aside tomorrow and Bob's uncertain medical future.

01:40:18

Bob Hunter That was the case, *tabernacle...*

01:40:20

Emily Hunter Did you have the mango? That was a Japanese
restaurant.

01:40:24

Narrator Meanwhile they're off to Costa Rica for a family vacation.

01:40:27

Bob Hunter So where to for a holiday?

01:40:29

Emily Hunter Yeah, I want to get a Spanish book. Thank you guys.

01:40:33

MEN DON'T CRY

Bob Hunter That's true, by the beach. And my contribution is to stop whining long enough and say, "sure". It surprises me how terrified people are of death.

01:40:42 I mean it really does amaze me, and maybe one of, a part of it is when I was doing some of my Greenpeace things, we actually took a deliberate risk about getting killed a couple, several times. And then when you're not killed, somehow you get over it a little bit. You're not quite as afraid of it any longer.

01:40:58 And I remember seeing a piece of graffiti on a wall at L.A. back in the Sixties that said, "Death is the biggest kick of all, that's why they save it for the end."