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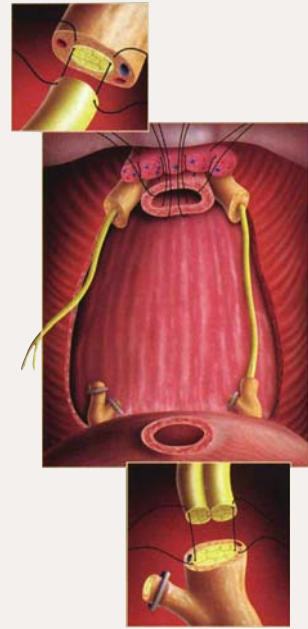
On the Horizon Sural Nerve Graft May Assist Recovery

Surgeons who specialize in prostate cancer are always working to reduce the severity of potential side effects that can follow a prostatectomy. Two of the potentially most difficult side effects of a prostatectomy are urinary incontinence and erectile dysfunction. Surgical techniques are constantly becoming more precise, so that less damage is done to the surrounding tissue. However, there are times when the nerve that runs on either side of the prostate must be removed during surgery because it has been invaded by cancerous cells, or it is likely to develop cancerous cells if left in the body. In this case, there is a promising new technique that transplants a nerve from the patient's own ankle (see illustration at upper left) to reconnect the nerves of the pelvic area. The goal is to re-establish sensory and muscular function to aid in recovery of urinary continence and erectile function.

This new procedure is known as "sural nerve transplant," or "sural nerve grafting." A surgeon will remove a nerve from the lower leg (that is not essential), and connect the nerves from the penis and scrotal area to the nerve bundles transmitting nervous signals to the spine (see illustration to the right). Neither ankle function nor feeling is affected by the removal of this nerve. This technique is still in early evaluation, but may be considered for younger men undergoing prostatectomy who risk losing sexual function relatively early in their lives. Typically, the sural nerve graft is considered if the nerve on the opposite side is not affected. Unlike other body tissues, transplanted nerves are slow to connect, and it may take 18 to 24 months to know whether or not restored sensory and autonomous nerve function will be successful.

Dr. Samadi has undertaken sural nerve transplant during the prostatectomy procedure method with promising initial results. One of his first patients to receive sural nerve graft implant, K. Gretow, is recovering very well, with minimum side effects, and at three months after surgery is sexually active with full erections.

While still experimental, techniques like sural nerve transplant may prove over time to offer improved recovery and quality of life for prostate cancer survivors who have nerve involvement in the area, requiring removal during prostatectomy.



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Welcome to Survivor Outlook! From Dr. David Samadi

Welcome to Survivor Outlook, a new periodical newsletter from our staff at the Department of Urology at Mount Sinai School of Medicine. I'm extremely proud and pleased to join the Department as Chief of the Division of Robotics and Minimally Invasive Surgery. As an active researcher and expert of robotic and laproscopic surgery for prostate and urological cancer and other diagnoses affecting men, I have been part of the huge advance in treatments for prostate cancer – and the recovery improvement following prostatectomy.

With my move to the Mount Sinai School of Medicine, I was very fortunate to bring with me an exceptional operating room team. Together we've done over 1,000 prostatectomies utilizing the da Vinci robot. Since our May 1st move, we've accomplished over 240 robotic prostatectomies at the Mount Sinai School of Medicine, averaging a high volume of nearly 50 cases per month. As a team we've accomplished superb outcomes for our patients with over 95% of our patients realizing a non-detectable PSA as a result of this treatment.



As a prostate cancer survivor, you are in a special place in medical history right now. New surgical options like the state-of-the-art da Vinci® Prostatectomy and constantly improving treatments for recovery of urinary control and sexual function are changing the world of prostate cancer survivors.

We are striving for the perfect "Trifecta"; the absence of cancerous cells as measured by zero or non-detectable PSA, return of urinary control following surgery and also a return to the sexual function experienced prior to treatment. The odds of winning the "Trifecta" have really significantly improved over the past few years. OUR goal at Mount Sinai is to constantly improve your odds for a full, long, and enjoyable life following prostate cancer treatment.

Survivor Outlook will keep you informed on topics of treatment, recovery and life following prostatectomy, share stories about other cancer survivors, and bring you interesting information about our practice.

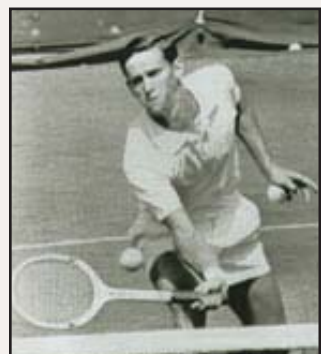
We hope you enjoy Survivor Outlook!

[Sig]

David B. Samadi, M.D.
Chief of Robotics and Minimally-Invasive Surgery

If there are specific topics that you would like to see addressed in future newsletters, please write or e-mail Dr. Samadi through "Contact" link on www.roboticoncology.com.

Survivor Outlook News & Notes



Roy Emerson Volleys Back Against Prostate Cancer

Roy Emerson holds the record for playing on eight winning Davis Cup teams between 1969 and 1967. He won the Wimbledon singles in 1961 and 1964, and he was inducted into the Tennis Hall of Fame in 1982. More recently he, like you, was diagnosed with prostate cancer. As anyone who is diagnosed with cancer, Roy was devastated. "I made up my mind that this disease would not beat me."

He researched his options, and struggled to make the best decision. He was relieved when he found Dr. Samadi, Chief of Robotics and Minimally-Invasive Surgery at Mount Sinai. He discovered that Dr. Samadi is an expert with the advanced robotic da Vinci Surgical System. This method is less invasive than other treatments, reducing blood loss, hospital stay time and recovery time.

Roy's surgical procedure took only an hour and a half. He woke up just a few hours after the surgery and was cared for in the hospital for only one night. Roy was back in the comfort of his hotel room the next day. Roy says "My recovery has been amazing and I was on the court again in five weeks, hitting lightly. I am now looking forward to a zero on my PSA test. Dr. Samadi is a true life saver and I am convinced that choosing him was the best decision I have ever made."

If you have a friend, relative or partner who would be interested in receiving this newsletter, contact our office via e-mail through the "contact" link on www.roboticoncology.com and we would be happy to add them to our mailing list.

Recovery Topics: Winning the "Trifecta!"

Eradicating the prostate cancer that has invaded your body is your surgeon's first priority, but that is not the end of the road in your journey back to health. Your medical team also aims to assist you in regaining your quality of life.

Because of the two delicate nerve bundles and blood vessels in the genital area, both urinary control and erectile function can be affected by prostatectomy. In conjunction with a tailored recovery program focused on regaining both urinary control and erectile function, the goal is to get you back to life as it was prior to your prostate cancer diagnosis.

Dr. Samadi and his team at Mount Sinai use the da Vinci Surgical System to surgically remove the prostate gland, which incorporates a state-of-the-art surgical system that helps your surgeon see vital anatomical structures more clearly and to perform a more precise surgical procedure, resulting in a shorter hospital stay, and less time to regain your urinary continence and sexual function. The da Vinci method removes the prostate, as in traditional surgery, but uses several small incision ports for the instruments rather than cutting through abdominal muscle. During the surgery, the bladder is "moved over" in order to remove the prostate, and it is re-attached, just as in open surgery. Cancer control rates with the da Vinci System are about the same as, or in some studies a bit better than open surgery.

Urinary continence may return in a shorter period because of the delicate precision of the micro instruments. Use of muscle toning exercises called "Kegel" maneuvers will also help regain urinary control.

Erectile function is often affected by prostate surgery, and regaining sexual function will take time, patience and open communication with your medical team and your partner. Even with advanced surgical techniques, not everyone that undergoes prostate surgery will regain the ability to attain and maintain an erection. Using the da Vinci Surgery System increases the odds of recovering sexual function, since it is often possible to spare the nerves that control erections if they are unaffected by cancer.

No matter what surgical method is used for your prostatectomy, post surgery exercises, drugs and medical products can enhance both your return to urinary continence and sexual function. Speak with your doctor and clinical team at Mount Sinai to decide what recovery program is right for you.

Cancer-free, continence and normal sexual function. When that has been achieved, you have "Won the Trifecta!"



Q&A

You are the most important person in your recovery from prostate cancer. Unlike years past, when we put all of our care into the hands of the doctor and didn't question him, today you are encouraged to communicate with your physician as a team member in your

health and recovery. It is important to us that you understand what is happening throughout your care, and why it is important for you to follow through with your care post-operatively.

The following questions are important and common to recovering prostatectomy patients. We will address more questions in each issue of Survivor Outlook.

Q. What are Kegel exercises? How do they help?

A. Kegel exercises will make your pelvic muscles stronger which will contribute to regaining your bladder control. Think of it like lifting a barbell, the more you do it, the easier it is! The same is true of your pelvic muscles, the more you use them, the stronger they will get.

Okay, so what are Kegel muscles, and how I do work them out? Kegel is the name of the physician that discovered the exercise, not the name of the muscle you are working. You are working the pelvic muscles. To know if you are doing them correctly, begin this way – start to urinate, and then try to stop the stream. When you are able to stop the stream, you are using the correct muscles. You will feel a distinct inward and upward pulling sensation. The other way to work these muscles is to clench your anus (such as when you are attempting not to pass gas.) Try to constrict only the pelvic muscles, and keep the thigh, abdominal

Welcome to Forums!

A Forum blog has been launched on Dr Samadi's website, www.roboticoncology.com, for people to ask questions about prostate cancer diagnosis and treatment. Dr Samadi is the Moderator of this Forum which provides useful medical and practical recommendations as needed. The Forum is a free community resource for people to exchange information and share experience. On your first visit, be sure to check out the Help page. You will have to register before you can post: click Register to proceed. To start viewing messages, select the forum that you want to visit from the list of topics shown.

and buttock muscles relaxed. Constricting the wrong muscles will not assist you in strengthening the pelvic muscles. Once you know how to do these, start about 8 weeks after your surgery, and do Kegel exercises for ten minutes, 3 to 4 times a day. Squeezing the muscles slowly and holding them contracted for about 10 minutes is an important way to regain urinary control.


Q. What is "combination therapy" for regaining erectile function?

A. We know that sexual function is not something everyone feels comfortable discussing with your medical team. But you need to know that you are not alone in coping with this situation, and we have a lot of knowledge and experience in helping our patients regain sexual function.

You may receive a prescription for Viagra after the surgery. This will probably not cause erections immediately, but its purpose at this time is to increase blood flow to your penis. This will help to reduce scarring inside the erectile tissue, and help you to retain muscles necessary for erections to occur. Four weeks after your surgery, you may be directed to start using the ErecAid® vacuum therapy device for five minutes twice a day. The ErecAid vacuum therapy system helps bring oxygenated blood into your penile muscles, which helps keep the tissue healthy and increases your chances of regaining erectile function. After recovery, the ErecAid may continue to be used to help you achieve and maintain an erection, for more normal sexual function.

"Combination therapy" is the use of both these methods in a planned program with your medical team's advice. If you play an active role in your recovery, you will have the best chance in achieving the best possible outcome for erectile function in the long run.

The Osbon ErecAid® is the choice for ED patients who prefer a non-invasive, drug-free solution.



- ✓ **Best Success Rate.** Works for over 90% of the couples who try it.
- ✓ **Best Support Network.** Comprehensive patient training & telephone support.
- ✓ **Medicare Reimbursed.** We assist patients with insurance filing.

For more information about the Osbon ErecAid contact us at 1-800-438-8592 or www.osbonerecoid.com.
*See our website for details on clinical studies.

