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MONDAY Q&A Couple's outreach shares their struggle with prostate cancer

Author: Deke Farrow; Staff Writer

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Rick and Brenda Redner of Modesto have written a book they wish no one ever would have to read. It details their journey from Rick's prostate cancer diagnosis a couple of years ago to the surgical removal of the gland, to the physical, sexual and emotional struggles the couple have faced since.

Through the book, as well as their blog, pre- and post-surgery forums and other online resources, the couple hope to offer answers and raise awareness they wish they had as tools when initially dealing with Rick's diagnosis.

"Many men who receive the diagnosis are in a state of emotional shock," Rick said, sitting at home recently with Brenda and their therapy dog, Teddy. "Cancer has a very powerful image, of pain and suffering and death. Too often, men are choosing treatment on the basis of fear."

That's what Rick did, choosing robotic surgical removal of his prostate over other treatment forms available, such as radiation and chemotherapy. "I wrongly assumed every minute that went by without treatment decreased my odds of survival," he writes in the good-naturedly titled book, "I Left My Prostate in San Francisco - Where's Yours?" The idea of surgery that would remove the offending gland "was very appealing to me." He lost sleep, consumed with the thought that cells in his body were rebelling, working 24/7 to kill him. "I wanted it gone."

The couple say that in the book and their online ministry to those also dealing with prostate cancer, they're not trying to either promote or bash robotic surgery, but they want men to be aware of their options. "Very few men are ready for the reality of what life without the prostate is," said Rick, citing urinary incontinence and erectile dysfunction as problems that caused him to withdraw from social relationships and, worse, his wife.

Brenda refers to prostate cancer as "a couple's disease," and getting to a point where they could recover together and then open up to help other couples was a difficult journey, but one they felt a spiritual call to make. "This is a topic that is very isolating," she said. "We needed to give a voice and a place for people to talk about the needs they have."

And while the topic is deadly serious, the Redners have tried to inject their online work and the book with humor, starting with that title. "I know how important a sense of humor is when dealing with

cancer," Rick said. "For a long time, I lost my ability to laugh. When it returned, my healing started."

You write about the fears that went through your head upon being diagnosed (not having long to live, enduring pain and suffering, being financially ruined by the cost of treatment). How did you get the information you needed to move forward, alleviate those fears - if you indeed did - and determine a course of treatment?

Rick: I went to the library and checked out a dozen books about prostate cancer and purchased a few more. I also went online to find additional information about prostate cancer. Unfortunately, the sheer volume of information is overwhelming. It took time to find and sort out the useful information from quackery. I also joined a number of online prostate cancer support groups. I found it incredibly helpful to share my fears with men further along the journey. Our faith, prayer, church family, hymns and praise songs all played a role in my overcoming my fears.

Brenda: As Rick's wife and a nurse, I researched for answers at every top university online and eventually with the top urologist in our area. I had a list of questions and wasn't ready to accept treatment until all my questions were answered. One question was: Without a biopsy, pre- and postsurgery, how do radiation treatments determine the level of cancer removal? Other questions were: What is the prognosis after one year, two years, 10 years with my husband's PSA (prostate-specific antigen blood test) and Gleason (a prostate cancer grading system) scores? Even after the knowledge was obtained, I still felt a degree of uncertainty, as nothing is guaranteed.

Knowing what you know now, what different decisions would you have made, if any? Would you have undergone robotic surgery?

Rick: I was so terrified. Once I heard the word "cancer," I wanted my prostate removed as soon as possible. I deeply regret that I didn't take time off from work to share a romantic vacation with my wife prior to surgery. That remains my deepest regret.

Brenda: As I have watched my husband suffer from the long-term side effects of robotic surgery, there are days I would say the surgery wasn't worth it. Yet, overall, due to the fact that I am such a worrier (which leads me to pray more often), I would say I am very grateful for his healing so far, I can't give up for continued progress, and I need God's grace more than ever to meet up with these ever-pressing needs that prostate cancer surgery presents.

What came as the biggest surprise to you along your journey?

Rick: When I received the news I was cured of cancer, I expected to feel grateful for many years. I had no idea within weeks after receiving the wonderful news, I'd end up feeling deeply depressed for many months. This affected every aspect of my life. The importance of humor, laughter and faith cannot be overstated.

Brenda: The biggest surprise to me was the extent of physical damage, primarily urological in nature, my husband obtained, which takes not weeks or months to heal, but rather years. Recovery from robotic surgery is as unique as a person's fingerprints. Some have full recovery immediately, others do not. We did not experience immediate recovery. I was also surprised at how depressed my husband has been. I was surprised how deeply this has impacted our relationship, which has needed much healing.

Rick, you said you were a very reluctant author. Tell me about how you were called to write your book and begin your ministry.

Rick: In one of my online support groups, there was the opportunity to start an online diary of my experiences with prostate cancer. As I began to do this, I noticed early on that dozens of people were checking out my diary. When dozens turned to hundreds, I knew the Lord was leading me to dust off my experiences as medical social worker and Brenda's experiences as an oncology nurse. It wasn't long before my diary reached tens of thousands of hits. The response was a source of ongoing encouragement as Brenda and I wrote our book.

How did you get to the point where you were willing to talk about such private post-surgical issues as incontinence and erectile dysfunction online and in a book conceivably read by family, friends and total strangers alike?

Rick: I found sharing very private things online very easy because you don't use your real name, so you maintain your anonymity. I'm still uncomfortable with friends, family or co-workers reading our book. In fact, I've asked most of them not to read our book unless they find themselves coping with cancer.

Brenda: Early on, it became evident the diagnosis of prostate cancer creates isolation. Prostate cancer patients and their partners need a place to share their struggles. Even though writing a book required me to be open and vulnerable, I knew sharing our private struggles would allow others to share with each other, too.

If you had to boil down your message to a few things of key importance you want prostate cancer patients and their partners to know pre- and post-treatment, what would those be?

Rick: Don't base your choice of treatment on your fears about cancer. Base your treatment choice on your diagnosis. The word "cancer" causes panic and fear. Take the time to get information you'll need to make the best treatment choice. Don't be surprised if a surgeon tells you surgery is the best option and a radiologist tells you radiation is the best option. Talk with men who are years posttreatment to understand the long-term effects of the various treatment options, then make the best decision you can with the information you have.

Brenda: Take the time to evaluate the best treatment for you and your partner. This disease is a couple's disease, which will impact you both for the rest of your lives. Watch out for too-good-to-be-true treatment modalities. Evaluate the long-term effects of treatment, such as erectile dysfunction and the loss of urinary control. Determine what quality-of-life issues you can and can't live with before deciding on a course of treatment.

Visit: http://www.whereisyourprostate.com/ For more information about prostate surgery.

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