

VETERANS FOR CHRIST, INC.
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Fellow Veterans Grace and Peace to you and your family

PTSD raises suicide risk for those with prostate cancer



In a study led by a researcher at the White River Junction VA, men with prostate cancer and PTSD experienced greater suicide risk than men with prostate cancer and no PTSD, even after adjusting for depression, substance use disorder, and prostate cancer treatment. *(Photo for illustrative purposes only. ©iStock/SDI Productions)*

Studies have shown that [PTSD](#) is one of the most common mental health diagnoses among men with prostate cancer. Yet, research on the link between PTSD and prostate cancer, particularly on how PTSD may influence suicide risk in this population, has been limited.

Now, a VA-funded study led by Dr. Maya Aboumrad of the White River Junction VA Medical Center in Vermont sheds light on these questions. The study found that patients with prostate cancer and PTSD experienced greater suicide risk than men with prostate cancer and no PTSD, even after adjusting for factors such as depression, substance use disorder, and prostate cancer treatment.

Conversely, the researchers concluded that men with prostate cancer and PTSD may have been at lower risk of death from non-suicidal causes due to favorable physical health resulting from greater health care use and early diagnosis of localized—or low-risk—cancer.

The [results](#) appeared online in the journal *Psychooncology* in November 2020.

“We showed that men with preexisting PTSD and a new prostate cancer diagnosis experienced improved non-suicide survival despite being at greater suicide risk,” the researchers write. “We encourage collaboration between oncology and psychiatry providers when treating patients with PTSD and newly diagnosed prostate cancer. We hope this may mitigate some of the increased suicide risk shown in the current study. Given the high prevalence of PTSD and prostate cancer among Veterans, understanding the interplay between the two diseases warrants further study.”

The primary goal of the study was to assess the impact of a PTSD diagnosis on suicide and non-suicide death rates among Veterans with prostate cancer. “This population is of particular interest given its higher rates of prostate cancer, suicide, and PTSD, as well as poorer engagement in preventative care, such as screening for prostate cancer,” the research team writes. “Our secondary [goal] was to examine potential mediating factors for the [link] between PTSD and suicide, including depression, substance use disorder, and receipt of any definitive prostate cancer treatment.”

Patients with PTSD less likely to get prostate cancer treatment

Aboumrad and her team also determined that patients with PTSD and prostate cancer were more likely to use health care services, compared to patients with prostate cancer who do not have PTSD.

“We found that patients who received any prostate cancer treatment had a lower suicide risk compared to untreated patients, and we also found that patients with PTSD were less likely to undergo prostate cancer treatment,” Aboumrad says. “We think it’s possible that prostate cancer treatment may help to reduce suicide risk by alleviating some of the stress and anxiety inherent to a cancer diagnosis. We believe that determining a treatment plan with optimal physiological

and psychological impact for patients with prostate cancer and mental health conditions will require collaboration between oncology and psychiatry providers.”

The study findings, according to the researchers, highlight the importance of considering psychiatric illnesses when treating patients with prostate cancer, as well as the need for strategies to reduce suicide risk.

“In the clinical setting, recommendations to pursue prostate cancer treatment are often determined by tumor characteristics,” Aboumrad says. “Mental health conditions are not routinely considered in this treatment decision-making process. We hope to further explore the potential role of prostate cancer treatment for reducing suicide risk among patients with PTSD and other mental health diagnoses.”

Quitting smoking linked to less pain

Quitting smoking was linked to significantly lower pain levels, in a VA study. Researchers studied data on nearly 2,000 Veterans who smoked an average of 15 cigarettes a day and had chronic pain. Participants were involved in a program of proactive outreach to help them quit smoking. At six and 12 months after the program, researchers asked participants whether they had smoked in the last seven days. Participants at all pain levels who had stopped smoking had significantly less pain at the six-month check-in. After 12 months, participants with severe pain had lower pain. The results show that abstinence from smoking may lower pain levels, according to the researchers.

Secure messaging changes how Veterans access health care

Secure messaging decreased in-person health care visits and increased telephone visits, according to a study of VA health care use. Secure messaging allows patients and health care providers to send messages back and forth online while protecting patient information. Researchers looked at how use of secure messaging on VA's MyHealthVet patient portal affected health care usage in 2016. In-person health care visits decreased by 16% for secure messaging users and 10% for users who did not use secure messaging. Telephone visits increased by 11% for secure messaging users and 7% for non-users. The results show that secure messaging could improve clinic appointment availability, say the researchers. They also point out that secure messaging will likely increase providers' time commitments for not-traditional forms of access. ([*Journal of General Internal Medicine*](#), Feb. 2, 2021)

And be not conformed to this world: but be ye transformed by the renewing of your mind, that ye may prove what is that good, and acceptable, and perfect, will of God.

Romans 12:2 KJV

YOU TOO CAN BE A MEMBER OF THE VETERANS FOR CHRIST, INC.

Sign up online to become an associate member. The annual associate membership of \$120.00 which can be used as a tax deduction for supporters. Registration fees can be paid online through our PayPal account. You will get a free VFC T-shirt with your associate membership. Your tax deductible membership fee will support the VFC mission.

All Honorably Discharged Veterans are welcome to come and observe the VFC; feel free to ask questions and learn more. If we don't know the answer we know someone who does. Please browse our web site www.veteransforchristinc.org. There you'll find information on many subjects of interest to veterans. You'll also find a Newsletter for your branch of service and links to Social Security and many other links with an abundance of information.

Our monthly meetings are on hold until the pandemic is cleared and a vaccine is developed. No meetings are being held at the Wesley Chapel Library at 2861 Wesley Chapel Rd., Decatur, Ga. Our meetings are the fourth Thursday of every month and start at 6:30 (PM) for approximately one hour and a half, unless otherwise advertised. We will be respectful of your time.

Thank you for your interest in the VFC. We look forward to communicating and fellowshiping with you soon. We are looking for a corporate sponsor for our VFC Gerald Prince College Scholarship which is donated each September at our Anniversary Luncheon

"Be on your guard, stand firm in the faith, being men of courage, be strong." 1Cor 16:13

Sincerely,

William A. Harris, Jr.

William A. Harris, Jr., USAF Retired

President, Veterans for Christ, Inc.

www.veteransforchristinc.org

Need to contact VA?

[Veterans Crisis Line: 1-800-273-8255](tel:1-800-273-8255) and press 1, [Chat](#), or Text 838255

[Homeless Veteran Resources: 1-877-424-3838](#) or [Chat](#)

[White House VA Hotline: 1-855-948-2311](#)

Don't know what number to call?

[1-800-MyVA411](tel:1-800-MyVA411) ([800-698-2411](tel:800-698-2411)) is never the wrong number