

# Radio host broadcasts hope

City native promotes breast cancer awareness

By Chanda Temple  
ctemple@bhamnews.com



**Ebony Steele**

job was a way to make people aware of the disease. "What it (breast cancer) has done for me is it's helped me to open my eyes to help other

people not just with cancer, but with

other health issues in the black community," said Steele. "It's not the diseases themselves that kill people; it's undetected, untreated forms of these diseases."

This fall, Steele and several African-American female radio hosts are featured in breast cancer awareness ads that identify them as "The Queens of Keeping it Real." The campaign is connected to the Susan G. Komen Foundation and its "Circle of Promise" pledge, which wants people to do whatever they can to help end breast cancer forever.

"It's not just an old woman's disease," said Steele, 39. "I'm young. I'm hip. I'm fly. I'm a dancer. It can happen to anybody. I don't have a family history."

### A ride and a blessing

When Steele was on 95.7 JAMZ in Birmingham, she went by her then-married name, Ebony Arrington. Once she moved to the Rickey Smiley Morning Show, which can be heard on Birmingham's POWER 102.1 FM, she wanted a "new me" and wondered what to call herself.

First, she went by just Ebony. Then, the cancer diagnosis showed her something else — she had strength. She went with her mother's maiden name, Steele.

"It's been a ride, but it's been a blessing," she said.

On Sunday, she will host "Bare Chest for Breast Cancer," a men's runway show and fundraiser at Martinis, 2132 Lorna Road in Hoover. The African Pride VIP pampering session will open at 5 p.m. The runway show starts at 7 p.m. It's \$20 for VIP and the show, and \$10 for general admission.

Proceeds will benefit the Susan G. Komen Foundation and Sisters Inspiring Sisters Through the Arts, a nonprofit group she and her sister, Bronze Lougheed, started to help send students to dance camp and fund college scholarships.

Steele, who now does the Rickey Smiley Morning Show from Atlanta, owns two Ebony Arrington Dance and Performance Studios in the Birmingham area. Lougheed operates the studios in Steele's absence.

Steele, who said she is 100 percent cancer free, said her future remains bright. Radio Facts named her one of its top 30 African-American women in media for 2011. And her show with Smiley is on dishnation.com, a TMZ-like show.

"You are a survivor from Day 1," Steele said. "Even before your surgery, you are a survivor. You have to plant that in your mind."

For more info on the runway show, call 821-4823.

# Prostate cancer key: Catch early

By Kent Faulk  
kfaulk@bhamnews.com

Mark Pevey says he didn't let fears get in his way when he found out he had prostate cancer in July 2010.

Before his doctor sat down with him to talk about treatment options, Pevey had researched the disease and had decided on surgery to remove the gland. He also immediately took action to improve his chances of long-term survival and a faster recovery from the typical post-surgery problems of incontinence and erectile dysfunction — two of the most common fears men have.

He and his wife launched into a diet and exercise program. He dropped his weight from 225 to 192 and was jogging a few miles a day by the time of his robotic surgery two months later by Dr. Scott Tully at the Urology Centers of Alabama.

"I sort of have a mantra that I'm not going to be frozen by fear," said Pevey, 48, who is director of the state's DUI testing lab with the Alabama Department of Forensic Sciences.

Prostate cancer is the most commonly diagnosed cancer among men. It's one of three types of cancers that affect only men, the others being the much-less-common penile and testicular cancers.

This year, the American Cancer Society estimates 240,890 men nationwide will be diagnosed with prostate cancer. That's more than twice the forecast number of men who will get lung cancer, the second most commonly diagnosed cancer in men.

Prostate cancer, however, ranks a distant second to lung cancer in deaths. This year an estimated 33,700 men nationwide will die from prostate cancer, while an estimated 85,600 men will die from lung cancer.

That's because prostate cancer is one of the most curable cancers if caught and treated early, doctors say. Treatment options include radiation, hormone injections, surgery to remove the prostate, and a wait-and-see approach in older men if the cancer is not spreading aggressively.

"Once it spreads, you don't have a lot of good options," said Dr. Charles Edward Bugg, a urologist with the Urology Centers of Alabama. "The time to cure it is when it is localized in the gland."

Prostate cancer is more prevalent in men 50 and older. But several factors increase the likelihood of getting it at a younger age, including family history and being African-American.

One in six men will get prostate cancer sometime in life, while that number is one in four for African-

American men, according to figures provided by the Urology Centers. That risk is 83 percent if you have two close relatives who have had the disease.

The American Cancer Society recommends men should consider getting tested annually beginning at age 50, but as early as age 40 if they are in the most at-risk groups. Some doctors, including Bugg, recommend all men start getting PSA tests and exams annually at 40.

Testing is quick and simple, and usually the only clue there may be a problem, because often there are no symptoms, doctors say. Two basic tests are usually used in combination to determine whether someone might have prostate cancer. One is a digital rectal exam by a doctor and the other is a blood test called the Prostate-Specific Antigen, or PSA, test.

The prostate is a reproductive gland that aids sperm in fertilizing the egg during intercourse. It does so by producing a substance that causes the semen to become more fluid as it passes from the testicles to the penis. Men can experience the sensation of climax after the prostate is removed, but can father children only by artificial insemination.

### Surgery

Surgery offers the most chance for long-term success in halting prostate cancer, doctors say. And the surgery has become less invasive and easier to recover from in the past decade because of robotic laparoscopic surgery. About 95 percent of prostate surgeries are done robotically.

Doctors at the Urology Centers of Alabama have performed about 5,000 robotic surgeries since 2002.

Bugg said treatment methods are much better than they used to be. "You can't take one treatment and fit every patient into

that one treatment," he said. "You really have to have all your options on the table — the radiation, the surgery, the hormones, the watchful waiting for some guys, even cryotherapy are all options."

Sometimes doctors will discuss with a patient the possibility of waiting to see how aggressive the cancer is and whether there is a need for aggressive treatment. But waiting carries risk, Bugg said.

If surgery is performed, the patient will likely experience problems with sexual function and incontinence afterward. Recovery times vary, and the problems could be permanent.

Pevey said having his family supporting him helped him keep a positive attitude. "Mine wasn't without a wrinkle. ... The incontinence took a little longer than hoped," he said, though sexual function returned almost immediately.

"Those conditions are not life-ending conditions," he said. "They are scary things. They are things that want to eat at our ego, but they are not life-ending things. The cancer will kill you."

A study published last month in the Journal of the American Medical Association found that with more men surviving prostate cancer after early detection, quality-of-life issues are becoming more important in whether men are satisfied with the type of treatment used.

The study found that 40 percent of men who had their prostate removed reported they had recovered sexual function within two years after surgery, although local urologists report faster rates.

One of the big controversies with the screening of prostate cancers is that doctors often find diseases that are not going to hurt patients, said Dr. Erik Busby, associate professor in UAB's department of surgery in the Division of Urology.

When cancers are treated

that didn't need to be, patients are getting significant side effects — such as impotence and incontinence — unnecessarily, he said.

"It may be a very small low-grade tumor localized that is not going to spread during a patient's life," Busby said. "So trying to figure out which cancers are going to hurt a man or cause an impact on their life is a challenge for the urologist and for the patient." Research is being conducted by scientists to find the genetic markers that would identify the cancers that do need to be aggressively treated, he said.

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