

Annual review 2017/18



**PROSTATE
CANCER UK**



Thank you

What a whirlwind 12 months it's been. You could not have failed to notice that prostate cancer has been big news. Our story, that prostate cancer has overtaken breast cancer as the third most common cancer killer, hit the headlines in February and generated huge interest. Prostate cancer has rarely been out of the news since.

The past year has seen us push further than ever before – we had our largest ever research project, which will help to give men the right treatment for their cancer; the largest ever number of contacts with our Specialist Nurse service; and the most funds ever donated to Prostate Cancer UK to allow us to continue our vital work.

To all of our fantastic supporters, thank you for everything you've done over the last 12 months. We've made some huge strides towards taming prostate cancer and we couldn't have achieved any of this without you.

Together we will stop prostate cancer being a killer.

A handwritten signature in black ink that reads "Angela Culhane".

Angela Culhane

Chief Executive, Prostate Cancer UK

Looking back on a year of moving forward

Everything we do is working towards our goals of Better Diagnosis, Better Treatment, Better Prevention and Better Support. Here are the key issues we're tackling and how we've made progress over the past year:

Better Diagnosis (pg 4-5)

[Some men die early because they are diagnosed too late](#)

Given that many men don't develop symptoms until the cancer has already spread, our research is working towards accurate enough tests for men to have a screening programme for prostate cancer. In the meantime our Men at Risk programme is raising awareness of the higher risk faced by black men and men with a family history of prostate cancer.

[Some men die early because of poor diagnostic procedure](#)

Building on our early research, mpMRI scans have been shown to better detect aggressive cancers, guide biopsies and reduce over-diagnosis of harmless cancers. We're now working to get these scans rolled out nationwide. We're also funding research to help develop better tests to supplement, and potentially replace, the unreliable PSA test as a first-line check for prostate cancer.

Better Treatment (pg 6-7)

[Some men die because treatments are not accessible or are not sufficiently effective](#)

Through our new precision medicine programme, we're finding ways to identify the right treatment for the right man at the right time. We've already developed a new blood test to check for resistance to the drug abiraterone and we're running a trial to see how effective it is in giving men more time.

[Some men are living with life-changing side effects of treatment](#)

Active surveillance offers the possibility for men to delay or avoid the serious side effects from surgery or radiotherapy. We have been working to ensure that men everywhere get the same standard and quality of monitoring so that they can have confidence in their treatment decision.

Better Prevention (pg 10-11)

[We do not know enough about how to prevent prostate cancer](#)

Four of our latest research grants have the potential to either prevent cancer developing or prevent it from returning or spreading after treatment. These projects hold enormous promise and are described on pages 10–11 in more detail.

Better Support (pg 12-13)

[Some men are not getting the support they need with side effects](#)

Our Specialist Nurse service has supported more people than ever before, helping to provide information on everything from treatment options to coping day-to-day. We know that erectile dysfunction is a particularly common concern for men treated for prostate cancer and we are working to ensure that all areas of the UK are offering services to support men.

HOW WE SPENT OUR MONEY

Our total income in 2017/18 was £24.9 million, with over 73 pence in every pound spent going towards charitable activities. This includes £6.1 million spent on research, £5.1 million on support and influencing and £7.0 million on raising awareness. We know we need to raise significantly more income in order to meet our ambitious goal of taming prostate cancer within ten years so we are carefully investing more into our fundraising efforts, such as growth of our March for Men events, Gifts in Wills programme and golf partnerships.

Our overall strategy is agreed by a Board of Trustees, who bring their expertise as leaders in their fields to ensure that we can meet our long-term goal of stopping prostate cancer being a killer. Committees of researchers provide recommendations on the research grants that we should support.

Better diagnosis

Improving diagnosis has been the one of the biggest topics in prostate cancer research over the past year. After decades of inadequate tests, we are now seeing the roll-out of mpMRI scans across the country. Since our early research showed the potential for this sophisticated scan, it is now being used to reduce the number of unnecessary biopsies and help to guide biopsy needles to areas of suspicion.



We secured a commitment from NHS England that all men in England will have access to mpMRI scans before biopsy by 2020.

Our latest Freedom of Information requests revealed that 57 per cent of areas in the UK are offering high-quality scans to men before biopsy. While this still has a long way to go, it is a great improvement on the 33 per cent figure we found two years ago. Since that time, we've worked with a range of stakeholders to identify the problems preventing roll-out in certain areas, such as North Wales, and started to address them.

The use of mpMRI scans has been the first major advance in prostate cancer diagnosis since the PSA test was introduced a generation ago. We don't want to wait for another generation to see the next improvement.

Our research has already given men a more accurate diagnosis for prostate cancer and we know that we can do it again.

The next big aim is to get the accuracy of tests to the level that they could be used in a national screening programme, in the way that we currently have for breast and bowel cancers. In fact, we think the right test might already exist, it just needs the right clinical trial to prove it. We have been working for a couple of years to design a major clinical trial to study potential tests as part of a screening programme within the NHS. The trial will be the largest project that we have ever funded, by a long way, and we hope to announce the details next year.

Three other ways we're improving diagnosis:

Hitting the sweet spot

We've awarded funding to Dr Jennifer Munkley and Professor David Elliott at Newcastle University to study small sugar tags that are added to proteins in prostate cancer cells. These sugar tags seem to be linked to more aggressive cancers and could help us to tell which cancers need urgent treatment.

Raising awareness in men at increased risk

Our Stronger Knowing More campaign to raise awareness among black men of their increased risk has continued into its second year, building on celebrity support to reach a wide audience. We're also building our efforts to raise awareness of the increased risk from a family history of prostate cancer. In our awareness survey we found that a third of people aren't aware of this connection.

Developing tomorrow's technology

Although mpMRI has been a great advance for diagnosis, it still cannot give a clear answer for 40 per cent of cases and is expensive to run. Our new research has shown that a special type of ultrasound could be more accurate and more affordable. The ultrasound is able to detect hard bumps in the prostate – a bit like a virtual doctor's finger!



Raymond's story

After Raymond Starr went for a medical at his GP in 2014, his PSA level was found to be slightly elevated. So over the next year, he was monitored closely with regular tests.

Raymond's levels continued to rise and he was referred to have a TRUS biopsy, which took 12 random samples from his prostate. The results came back as negative, which at the time came as a huge relief.



I'm lucky that I have a good doctor and I was able to pay for an mpMRI – thousands more in North Wales aren't so fortunate. This has to change.

Raymond's doctor continued to monitor his PSA levels and over the months that followed, his levels continued to rise. So he was referred back to the urology department once again. This time, it was recommended that he should have an mpMRI scan, which provides a much more detailed picture of the prostate. But Raymond was told that he would have to pay for the scan because it is not available on the NHS in North Wales.

"I didn't feel as though I had much option," he says. "My life was in the balance and so obviously I decided to pay."

Raymond paid £890 for the scan, which confirmed that he did have prostate cancer. The tumour had been missed by the previous TRUS biopsy.

"Thankfully, my cancer was caught before it had a chance to spread to other parts of my body," he says. "But if it wasn't for the mpMRI, I could have been walking around totally blind to the danger that I was in because my previous biopsy had indicated that there wasn't a problem."

"I'm lucky that I have a good doctor and I was able to pay for an mpMRI – thousands more in North Wales aren't so fortunate. This has to change."



Raymond Starr

Following his diagnosis, Raymond opted to have a radical prostatectomy. Apart from some incontinence problems, he is doing well and is working alongside Prostate Cancer UK to make sure mpMRI is available to all men in Wales who need it.

Getting outdoors

Our supporters have been getting outdoors in their masses this year, with a huge number taking part in March for Men, London Marathon, Football to Amsterdam, golf days around the UK, RideLondon and many more.



March for Men Nottingham

Better treatment

We've spoken in the past about the importance of precision medicine – getting the right treatment for the right man at the right time. It's made an enormous difference to the way we treat other cancers and the current one-size-fits-all approach in prostate cancer isn't good enough.

So we decided to do something about it and offered up to £1.4 million for an ambitious project to categorise types of prostate cancer, identify the best treatments and test them in clinical trials. However, this created an unexpected problem – we had two incredible, ground-breaking applications that neither us nor our expert review committee could decide between.

It looked like we'd have to pick which one would be left to flounder as we couldn't afford to support them both. However, thanks to the incredible generosity of our supporters, including our biggest ever legacy donation, and the Movember Foundation, we found ourselves in the fantastic position to fund both projects.

The two studies complement one another perfectly, with one focusing on men who are resistant to hormone therapy, have few treatment options and short life expectancies, while the other focuses on finding new combinations of drugs with hormone therapy to keep them working for much longer.

Together, these projects represent a **£2.7 million** investment in our pioneering precision medicine programme. Between them they will be testing at least a dozen different treatments and combinations as well as using the latest technology to categorise

different types of cancer that need to be treated differently. The results could extend the lives of more than 9,000 men with advanced disease every year in the UK.

This work builds on our previous research in this area. This year, our researchers announced they had developed a £50 test that could predict if a man was resistant to the drug abiraterone. This could help to give men better treatment and reduce unnecessary spending on an expensive drug for the NHS.

Stopping resistance

Once prostate cancer has spread to other parts of the body, it is incurable and the aim of treatment is to keep it under control. However, over time the cancer develops resistance to treatments until there are no options available.

Our research, funded with support from the Barry Family Foundation, has helped to overturn the way we understand how resistance to hormone therapy develops. Much of the focus has been on genetic mutations that change the cancer, but our new study has shown that certain immune cells could actually trigger the process. The researchers are now looking into using an existing drug to target these immune cells.

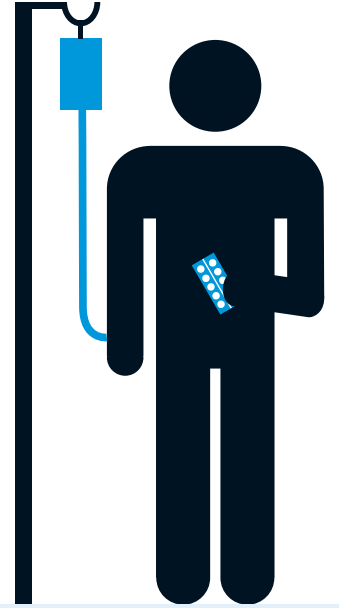
We have also funded a new research project run by Dr Alison Tree at the Royal Marsden Hospital to use high-intensity, targeted radiotherapy to blast individual tumour sites that have restarted growing. This will hopefully stop these resistant tumours from spreading rapidly and keep the treatments working longer for men.



Speeding up new treatments

It can take a long time for new treatments to be ready to give to men. This is often for good reason – it's important to make sure that treatments are effective and safe before they start being used widely – but that's not to say we can't help to speed things along.

- A new Research Innovation Award for Dr Jayne Tierney at University College London will focus on developing statistical tools to quickly and reliably review results from clinical trials. She will also be able to better judge which treatment combinations could be better for men and which measurements are important to look for in trials.
- We've been working to speed up development of the next generation of treatments – ones that use the body's immune system to treat the cancer. These immunotherapies have had great success in other cancers but have only worked for a tiny minority of men with prostate cancer. We recently gathered together over 40 world experts to discuss the key issues that are holding back these treatments and identify the crucial bits of research needed to make progress in this exciting area.



We were stunned to learn that the late John Paynter, a supporter for over seven years, left us our largest ever single donation in his Will.

Gifts in Wills have become an increasingly vital source of income for us, yet many of our supporters are unaware of this type of giving. Now, £1 out every £5 donated to us comes from gifts in Wills. We were truly humbled when we heard that John had decided to leave us this incredible gift and are immensely grateful that he chose to support our work in such a special way.

His legacy will certainly live on in all the work that we do and in our commitment to tame prostate cancer.

Thanks to John's kindness, there is now even greater hope that we can achieve our goals of improving diagnosis, and finding better ways to treat and prevent prostate cancer sooner, all to save more men.



John Paynter

£1

out of every £5 donated comes to us from gifts in Wills.

£5.2 million

from Wills in 2017



“Working for Prostate Cancer UK means everything to me”

Specialist Nurse Sophie Smith speaks about her experience of her dad being diagnosed with prostate cancer and how the lack of reliable diagnosis means that a man’s fate is left to luck.

In 2014 my dad, aka Bampa, aka Dick, aka Richard Bennett came home and told me his PSA was 26. He didn’t realise the significance of this result, but as a prostate cancer specialist nurse I knew exactly what this meant – my dad probably had prostate cancer.



My dad is the lynchpin of our family – he’s our rock and seeing him so vulnerable was heart-breaking.

The next few weeks were the most agonising. I’d always told my patients that the wait and the unknown is the hardest part of a diagnosis and I was not wrong. I now know first-hand how difficult it is waiting for tests like an MRI scan, bone scan and biopsy results. Was my dad’s prostate cancer curable or had it spread to other areas of his body and eventually take his life?

This whole time was very surreal, like I was in a nightmare about to wake up any moment. My dad, the kiddies’ Bampa, a 53-year-old, loving, caring, hardworking man could not have prostate cancer. It only happened to older men, my patients, not my dad!

My dad is the lynchpin of our family – he’s our rock and seeing him so vulnerable was heart-breaking.

Luckily my dad’s cancer was caught just in time, it hadn’t spread but it was just outside the prostate. He had his prostate removed and his PSA still remains undetectable – no sign of cancer!

But not all men are so fortunate. Three years later, Dad’s best friend, John, went to the GP. After going to the toilet more frequently, John thought he’d better get it checked after seeing my dad’s close call. We had a phone call to say his PSA was even higher than my dad’s.

We went through the whole situation again, waiting for results but this time our news wasn’t as good. John, my dad’s best friend, was diagnosed with advanced prostate cancer. It had spread to his bones and his treatment path wasn’t the same

as my dad’s. His cancer can be treated but not cured. Diagnosed too late. And why? Because we do not have good enough tests to have a screening programme for men. Therefore often when symptoms present they are then too late – the cancer has spread.

A year on, and Dad was best man at John’s wedding. John had undergone some treatment which had been difficult at times, but his PSA remains at low levels. Thankfully due to research there are more and better options for John meaning that his cancer can be controlled for much longer than it would have been even a few years ago. But it is still not good enough.



Sophie with her father

I have a brother and three sons and so I’m acutely aware now the risk that they could face because of having a father and grandfather with the disease. The whole family came together to join the March for Men on Father’s Day this year to help raise funds for better tests and new treatments to protect my boys and others like them who will face an increased risk in the future.

Working for Prostate Cancer UK now means everything to me. My role as a specialist nurse means I can help to support the 400,000 men that are living with and beyond prostate cancer. Every day I speak to men and their families about almost everything to do with the disease from the PSA test to travel insurance. I’ve seen first-hand how it can affect a family and I’m grateful for the opportunity to help ease some of that burden for so many others.



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Better prevention

We all know that prevention is better than a cure, but that's a tall order when it comes to prostate cancer. Prostate cancer is strongly affected by your genetics, in fact it's one of the most heritable common cancers, and there's not much we can do about that.

However, prevention isn't just about stopping the cancer in the first place – it's also important to prevent the cancer from coming back after treatment.

In the past year, we've funded four outstanding projects focusing on better prevention:

Building a prostate cancer vaccine

Our previous grant to Professor McCarthy led to the development of a microneedle patch that can be used to administer a prostate cancer vaccine. In this new research her team will combine this patch with patented nanoparticles to trigger the immune system to detect and destroy any prostate cancer.

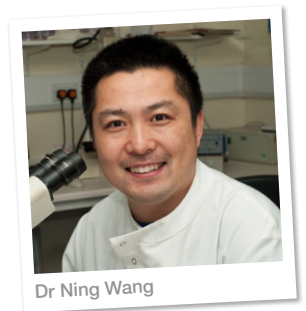
Professor Helen McCarthy
Queen's University Belfast
£275,992



Can exercise prevent cancer spread?

Dr Wang will be testing the idea that strengthening bone growth can prevent prostate cancer cells from spreading into and growing inside bones. He will be studying the effects of load-bearing exercise in mice with aim of identifying the types and frequency of exercise needed for it to work in men.

Dr Ning Wang
University of Sheffield
£199,994



Reprogramming immune cells to fight back against cancer regrowth

Professor Lewis' previous research has found that certain immune cells help to heal the cancer following radiotherapy treatment and encourage it to spread to the rest of the body. In this research project, the team aim to reprogramme these immune cells in the prostate to prevent cancers coming back.

Professor Claire Lewis and Professor Janet Brown
University of Sheffield
£397,398



£1,000,000

The Pioneers, our high-level giving club, are a group of exceptional individuals who invest £5,000 or more a year into cutting-edge research to save men's lives.

Since 2012 they have now raised an astonishing £1 million for prostate cancer research. In that time, the Pioneers have grown to over 45 members.



Blocking cancer aggression

Prostate cancer is better when caught early. But even at this stage it's difficult to know if the cancer will become aggressive or if it can be monitored without the need for treatment.

This inability to tell the difference between 'tigers' and 'pussycats' means that many men go through surgery or radiotherapy when their cancer might not have harmed them.

We have supported Dr Macaulay's research since 2004 after she had made the discovery that a specific protein appeared to make the cancer more aggressive.

In that time, she found that this protein appears in many prostate cancers and uncovered how it works.

"This series of grants from the charity helped to keep a researcher in my lab working on the project and kept it going. She did a very complex experiment that showed how the cancer cells are pushed to grow and spread, which we couldn't have done without that support," says Dr Valentine Macaulay from the University of Oxford.

Now we are funding Dr Macaulay to test a new drug to target this protein in men who are about to have their prostate removed, so we can see how it affects the cancer in real life. The evidence from this could lead to a full clinical trial and a potential new type of treatment for prostate cancer within five to ten years.

The hope is that this could be used to help prevent prostate cancers from becoming aggressive, allowing more men to avoid the need for surgery or radiotherapy.

Further into the future, this type of treatment could potentially even stop the cancer at the very earliest stages. Men who are at a particularly high risk could be given the drug preventatively, much like we use statins today for heart disease. Although there is still a long way to go to show that any such treatment would be safe and effective, the potential impact could be enormous.

Dr Valentine Macaulay
University of Oxford
£468,673



My main ambition is for my research to make some difference to men with prostate cancer.

To find out more about Dr Macaulay's research and the recipients of our other Research Innovation Awards, go to prostatecanceruk.org/research

Better support

Our commitment to supporting men remains as strong as ever, and our award-winning clinical and information services continue to empower men and demystify prostate cancer for those who have questions that need to be answered.

As well as the record number of men using our existing services, here are five new ways from the past year that we're giving men better support following their diagnosis:

1. Information on managing side effects

We are always looking for new ways to convey our health information to help men and their families access and understand the complex area of prostate cancer. Our online self-management guides have been viewed over 100,000 times in their first year. These give men and their families a new and interactive way to access and understand information about managing side effects of treatment.

2. Support groups for everyone

Support groups are an important resource for men diagnosed with prostate cancer. We support independent groups with advice, resources, training and small grants. We're always looking for ways to ensure that everyone can benefit from the support of others with shared experiences and this year we set up an online support group for gay and bisexual men with prostate cancer.

3. Confidence in monitoring

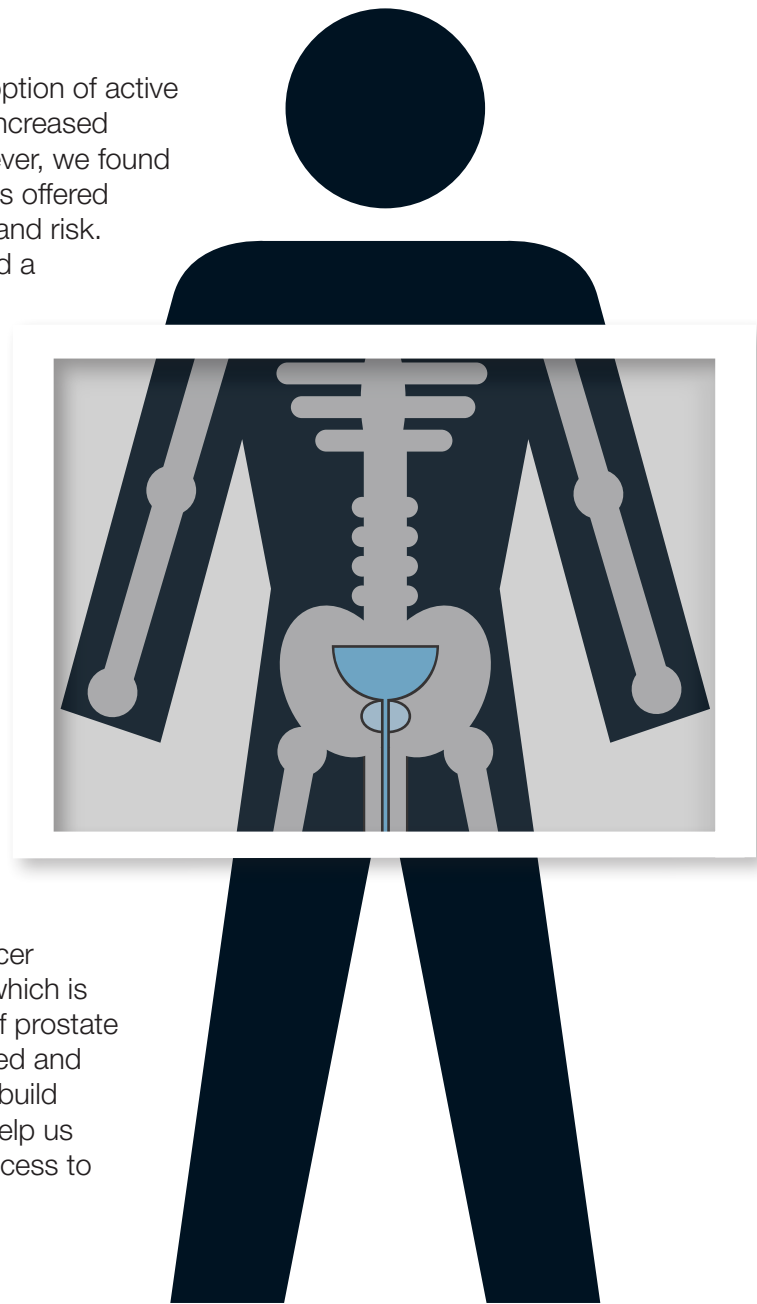
Men with low-risk prostate cancer are often offered the option of active surveillance, where they are regularly monitored for any increased growth and may be able safely to avoid treatment. However, we found that there is no consistency across the UK about how it is offered and managed, putting men through unnecessary stress and risk. Working with clinicians, researchers and men, we created a consensus on exactly how active surveillance should be offered and carried out.

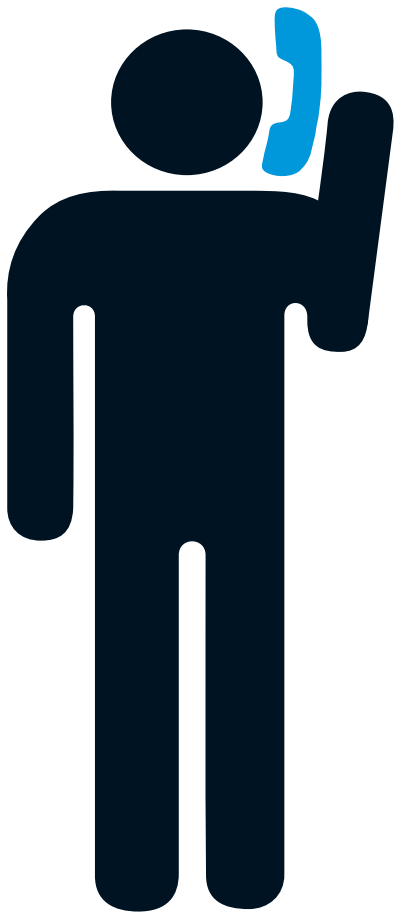
4. Access to services

We've campaigned for improved support for men experiencing erectile dysfunction following prostate cancer treatment, focusing on the four areas in England with the lowest service provision. We've worked to improve their support pathways for men, increase access to erectile dysfunction services, improve the skills and knowledge of primary care staff and set up groups for clinicians to share best practice.

5. Understanding the impact of a diagnosis

We're now in the final year of our Life After Prostate Cancer Diagnosis study, funded by the Movember Foundation, which is the biggest survey of its kind to understand the impact of prostate cancer on everyday life. The surveys have been completed and a series of analyses are now due for publication. We will build the insight gained into our existing knowledge base, to help us develop solutions to ensure that all men get the same access to care and treatment.





13,776



contacts to our Specialist Nurses over the year

We're here to support everyone affected by prostate cancer. Nearly 3,000 of these contacts were from partners, daughters, sons and friends.

Speak to our Specialist Nurses for free on 0800 074 8383*

* Calls are recorded for training and monitoring purposes. Confidentiality is maintained between callers and Prostate Cancer UK.

1.5 million

people visited our health information on our website



400,000

men living with and after prostate cancer in the UK



We are incredibly fortunate to have a number of companies supporting our work. These mutually beneficial partnerships are invaluable in supporting the delivery of our strategy. Partners like:

Burton Menswear London

This past year we've teamed up with Burton Menswear as a sponsor of our March for Men events and they've continued to sell our pin badges in their 400 stores across the UK. Their Prostate Cancer UK collection of products raises funds with every purchase. Keep an eye out for our snazzy branded Christmas jumper!



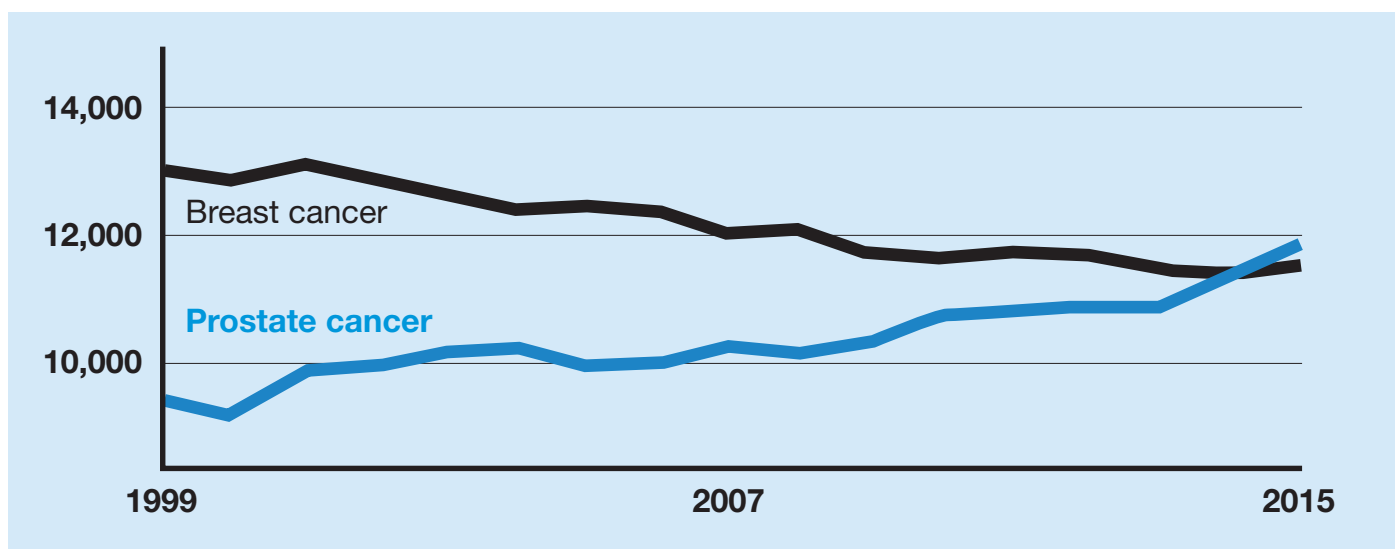
Keyline Civils and Drainage

We've celebrated another milestone with our long-term partners, Keyline. Their spectacular annual Keyline Rally has now raised over £1 million and they continue to raise awareness among thousands of customers and suppliers. They have recently committed to support to Prostate Cancer UK for a further five years, having launched the partnership back in 2009.

Raising profile

The profile of prostate cancer has never been higher than it is right now. After decades of being ignored and side-lined, the media spotlight is firmly on prostate cancer.

In February, we announced new statistics showing that, for the first time ever, deaths from prostate cancer outnumbered those from breast cancer. This explosive news story was covered in practically every news outlet and current affairs show (even ITV's Loose Women!), leading to an unprecedented response from the public in visiting our website for more information, donating to support further research and contacting our Specialist Nurses for support.



But this wasn't just a flash in the pan. It led to three consecutive front pages of the Daily Mail devoted to prostate cancer and our ambitions for a screening programme. Within the next month, broadcasters Stephen Fry and Bill Turnbull revealed their diagnoses of prostate cancer. Amidst this public attention on the disease, Prime Minister Theresa May committed £75 million towards prostate cancer research and we are now working with the National Institute of Health Research to help ensure that this is used to best effect.

FirstGroup partnership

2018 also saw the end of our three-year partnership with transport company FirstGroup. In that time FirstGroup has donated significant, high profile media space which helped us to reach the public across the UK. From a punk band cover of 'The Wheels on the Bus' to a book authored by a cat, the company also raised over £350,000 to fund the production of one million 'Know Your Prostate' pocket guides.



2017 saw our first ever March for Men events – fun family-friendly walks held in London, Glasgow and Leeds. We had an incredible response from supporters and so we set out to expand the marches to Manchester, Liverpool, Nottingham and Bristol for 2018. We had over 6,000 people taking part who had the opportunity to share their stories, remember loved ones and raise over **£1 million**.

Thank you

Alastair Gibbons
Althorp House
Andor Charitable Trust
Angela Milne
Anonymous Pioneers
Barry Family Foundation
Below the Belt Grooming
Bill Elliott
Bill Smail
Brian and Jill Moss Charitable Trust
Brian William Hammerton
British Institute of Facilities Management
Bruno Deschamps
Burton Menswear
Caroline Jowett-Ive
Charles Wells Brewery
Childwick Trust
Chris Field
David A Pretty, CBE
David Sullivan
David William Hubert
Denis Arthur Miller
Derina Toller and Sam Mackaness
Duncan Heath
Fieldrose Charitable Trust
Ford Sinclair
Fred William Hale
Fujifilm and News Awards
Fuller's Brewery
Garfield Weston Foundation
Geoffrey Selby
Gerry Pack
Gordon Gilby
Hadyn Cunningham
Homebase
Hugh Orange
Hugh Paynter
Ibstock Brick
Ivor Spiro
J P Moulton Charitable Foundation
Jacamo
Jacqueline Dickson
Janssen
Jemima Jowett-Ive
Jim and Caroline O'Neill
John Bloor, OBE
John David Addy
John Emberson
John Gregor
John Llewellyn Mostyn Hughes
Jonathan Abrahams
Joseph Burns
Julian Howard
Kevin Webber
Keyline Civils and Drainage
Lady Joy Bourne
Laurance Racke
Lazard Asset Management
Leslie Thomas Powell
LGC Ltd
Lloyd and Tina Pinder
Lord Evans of Watford
Macfarlanes
Malcolm Strong
Margaret Sheila Gosden
Marston's Brewery
Michael Tabor
Mike and Joy Wilgoss

Moondance Foundation
Moss Bros plc
Nathan Kirsh
National League
Nigel Gee
Non-League Day
P F Charitable Trust
Pam Chaplin
Paul Thompson
Peacock Charitable Trust
Pentel Stationary
Peter and Karin Swann
Philip and Julie Porter and all the E-Type Team
PPG Industrial Coatings
Professor Mark Emberton
PubAid
Ray Clemence
Romero Insurance
Ron Wahid
Royal Bank of Scotland
Royston John Cole
Selfish Mother
Severfield
ShareGift, The Orr Mackintosh Foundation
Simon, Nadine Potter and Andy Kingman
Sir Douglas Flint, CBE
Sir Martin and Lady Jocelyn Broughton
Sir Maurice and Lady Hatter
Sir Peter Thompson
Sir Samuel Scott of Yews Trust
Sir Stuart Lipton
Srixon
Stewart Matthewson
The 3Ts Charitable Trust
The Access Group
The Anthony and Pat Charitable Foundation
The Borrowes Charitable Trust
The Cecil Rosen Foundation
The February Foundation
The G D Herbert Charitable Trust
The Gillmore Trust
The Henry Lumley Charitable Trust
The Holbeck Charitable Trust
The Kidani Memorial Trust
The Movember Foundation
The Patrick & Helena Frost Foundation
The PGA
The Philip King Charitable Trust
The Sandhu Charitable Foundation
The Schroder Foundation
The Simon Gibson Charitable Trust
The Stanley and Zea Lewis Foundation
The Steel Charitable Trust
Thomas Allen
Thomas Duggan
Timothy Hailstone
TM Lewin
Tom and Sheila Springer Charity
Tom Curtin
Tony Bramall Charitable Trust
Tony McGovern
Tracy Fletcher and Team Darts
Trailfinders Ltd
Vanarama
WA Young Charitable Trust
Wilfred Burns
Zodiac Seats UK

Thank you
for helping
stop prostate
cancer being
a killer.



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CANCER UK