## ISMH World Congress 2010 Abstract 027

### PROSTATE CANCER SCREENING DECISION-MAKING AMONG RURAL AFRICAN AMERICANS

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*Background:* African American men in the United States have the highest incidence of prostate cancer compared to Caucasian and Hispanic men. The decision-making process in men has a significant role in seeking timely healthcare, particularly among African Americans. This study's aims are: (1) to understand how African Americans make the decision to have or not to have a prostate cancer screening; and (2) to identify facilitators and barriers in the prostate cancer screening decision-making process.
*Methods:* A phenomenological qualitative approach was used to describe the experiences of African Americans in the prostate cancer screening decision-making process. Seventeen African American men in rural Virginia of the United States were individually interviewed. A semi-structured interview guide was used to obtain rich and informative data. An iterative approach was used to enhance the analysis of the participant narratives; thus, identifying recurring themes.
Results: Three main themes emerged from the collected data. Participants reported that (1) family involvement played an important part in their decision making process. The majority said they had (2) limited information about prostate cancer. Many reported they were not well informed by their healthcare providers. Finally, participants' decision to have prostate cancer screening was based in part on their (3) trust in healthcare providers.
*Conclusion:* Healthcare providers need to be aware of patients' desires to include family/friends in the decision-making process, and provide adequate education/resources. Healthcare providers should implement a welcoming clinical environment to build a trusting relationship between the patient and the healthcare provider. The results may lead to interventions that better inform African Americans and potentially decrease mortality within this group.

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## ISMH World Congress 2010 Abstract 028

### THE SEX HORMONES AMONG OLDER MEN AND THE DEVELOPMENT OF INSULIN RESISTANCE

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*Introduction:* Among people with an age-related decrease in testosterone production, insulin resistance, formed in the process of phylogenesis (Florant G. L. et al., 2004), is used for a compensatory increase in the levels of predecessors of testosterone, cholesterol and glucose (Pechersky A.V. et al., 2006). "Activation by predecessors" is characteristic of many-stage enzymatic processes: an increase in the levels of the preceding substrates stimulates formation of the product of the last stage (Berezov T.T., Korovkin B.F., 2004).
*Materials and Methods:* Ten males with partial age-related androgen deficiency and chronic diseases of the tissues of the parodentium were held under study. The patients were prescribed a testosterone preparation in the form of a dermal gel once per day in the morning.
*Results:* Expressions of insulin receptors of the mucous membrane of the mouth, as did the data of laser doppler flowmeasuring (under study of microcirculation) increased regularly among the patients studied one month after the beginning of androgen-replacement therapy. The expressions of Ki67 and bcl-2, on the contrary, decreased. Atrophy of the epithelium became less pronounced 1 month after the beginning androgen-replacement therapy in a morphological study of the mucous membrane of the mouth.
*Conclusions:* The data received in the study confirm that a reduction in testosterone production in men of older age groups leads to the onset of insulin resistance, increased mitotic activity and a breakdown of microcirculation. The reverse development of the given pathological states takes place under proper androgen-replacement therapy.

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## ISMH World Congress 2010 Abstract 029

### ENDOTHELIUM-DEPENDENT HEMOSTASIS IN MEN WITH CHRONIC HEART FAILURE

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*Background:* Along with disturbance of blood flow, a hypercoagulable state, endothelial dysfunction is of importance in the chronic heart failure (CHF) thromboembolic pathophysiology. Endothelium plays an important regulatory role in hemostasis and produces prothrombotic and antithrombotic factors.
*Methods:* In study we have investigated endothelial-dependent hemostasis [von Willebrand factor (vWf), tissue plasminogen activator (tPA)], endothelial damage [circulating endothelial cells (CECs), an index of endothelial damage] and other hemostatic parameters [fibrinogen, euglobulin clot lysis time, prothrombin index, platelet counts] in 108 men with ischemic heart disease and CHF I-IV class (NYHA), who were compared with 30 age-matched men with ischemic heart disease without CHF and 27 age-matched healthy control subjects.
*Results:* There was an increase plasma levels CECs in men with CHF compared without CHF (P=0.002) and healthy controls (P = 0.001). Men with more severe symptoms CHF (class III—IV) had higher CECs (P = 0.01), vWf (P = 0.02), lower tPA-antigen (P = 0.1), than class I-II. A significant increase levels of CECs ($P < 0.05$), vWf ($P < 0.05$), a decrease of tPA-antigen ($P < 0.05$) were detected in men CHF with left ventricular aneurism.
*Conclusion:* Abnormalities of endothelial thrombogenicity (increase of vWf and CECs) and thromboresistance (reduction of tPA) contribute to a prothrombotic state in men with CHF, especially with more severe NYHA class. There were activation of hemostatic potential (elevation of vWf, CECs) and fibrinolisis reduction (decrease of tPA-antigen) in men with CHF and left ventricular aneurism.

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## ISMH World Congress 2010 Abstract 030

### CONNECTING MASCULINITIES AND PHYSICAL ACTIVITY AMONG SENIOR SOUTH ASIAN CANADIAN IMMIGRANT MEN

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*Background:* Senior South Asian (SA) men experience many health challenges, which may be exacerbated by immigration, yet little is known about how this subgroup of men conceptualize connections between exercise, health and illness. We studied SA men to better understand how masculinity informs and influences their physical activity.
*Methods:* An ethnographic qualitative study including fieldwork and participant observations were conducted at South Asian men's groups based in British Columbia, Canada. Individual interviews with were conducted with 36 attendees (group leaders and non-leader group members).
*Results:* The findings indicated that few men linked exercise with specific illnesses, and most limited their activities to walking because it was