Alternative Cancer Treatments: The facts and myths of commonly used supportive cancer treatments

Dr Carl Albrecht
Head
Research
Cancer Association of South Africa
Why this talk?

- Cancer remains a serious illness with only about 40% survival in South Africa.
- Therapy is often limited by cost
- Therapy has serious side-effects
- Patients seek greater assurance of therapeutic success and consequently turn to alternative medicines with or without conventional treatment.
- Evidence that up to 30% of patients use it
- It is relevant to know the details of this.
What are the hallmarks of alternative treatment?

• Lack of peer-reviewed articles on laboratory and clinical aspects published in reputable journals
• Not science-based
• Mode of action not proven
• Lack of clinical trials
• Dosage often arbitrary
• No toxicity data from humans
• Often expensive
Why is alternative not OK?

• Extra expense
• Possible toxicity
• Possible interference with conventional therapy
• Possible exchange of therapies
Seven examples

- I.V. Vitamin C
- Insulin Potentiation therapy (I.P.T.)
- Mannatech, MPS GOLD
- Sutherlandia
- Klamath’s Blue Green Algae
- Ozone Therapy
Test for clinical verification

<table>
<thead>
<tr>
<th>Alternative Therapy</th>
<th>Clinical Trial</th>
</tr>
</thead>
<tbody>
<tr>
<td>• I.V. Vitamin C</td>
<td>• No</td>
</tr>
<tr>
<td>• Insulin Potentiation therapy (I.P.T.)</td>
<td>• Yes –Fail</td>
</tr>
<tr>
<td>• Mannatech, MPS GOLD</td>
<td>• No</td>
</tr>
<tr>
<td>• Sutherlandia</td>
<td>• Yes- Safety only</td>
</tr>
<tr>
<td>• Klamath’s Blue Green Algae</td>
<td>• No</td>
</tr>
<tr>
<td>• Ozone Therapy</td>
<td>• No</td>
</tr>
</tbody>
</table>

Cancer affects us all...
Intravenous vitamin C

- RDA = 45 mg/day
- Megadose = >20 grams/day
- 2010 Meta-analysis after 33 years and 1609 patients.
- Cancer therapeutic efficacy not proven
Vitamin C and cancer: what can we conclude--1,609 patients and 33 years later?

Cabanillas F.

Source
University of Puerto Rico School of Medicine, San Juan, Puerto Rico. fcabanil@mdanderson.org

Abstract
In 1976 an article co-authored by Linus Pauling described that 100 terminal cancer patients treated with intravenous vitamin C, followed by oral maintenance, lived four times longer than a control group of 1,000 patients who did not receive vitamin C. The study was strongly criticized because the control group was very different from the group treated with vitamin C. The latter were declared terminally ill much sooner than the control group thus resulting in an artificially longer survival for the vitamin C group. Three double blind placebo controlled randomized trials performed at Mayo Clinic using oral vitamin C for cancer patients were negative. In a phase I-II trial performed by Riordan et al, none of 24 cancer patients treated with i.v. vitamin C responded. At this point we don't have information as to which is the actual plasma level of vitamin C that can produce tumor shrinkage. We don't have consistent information either regarding what is the clinical dose necessary to yield therapeutic plasma levels. In view of this lack of data after trials which have included at least 1,591 patients over 33 years, we have to conclude that we still do not know whether Vitamin C has any clinically significant antitumor activity. Nor do we know which histological types of cancers, if any, are susceptible to this agent. Finally, we don't know what the recommended dose of Vitamin C is, if there is indeed such a dose, that can produce an anti-tumor response.
Absorption of glucose by cancer cells is the basis of PET scans. This confirms that there is an important difference in glucose metabolism between cancer and normal cells.

These scans were taken in April 2007, before the patient underwent chemotherapy.

These scans were taken in July 2007, after chemotherapy.
Insulin Potentiation Therapy

- IV Insulin into patient
- Blood glucose drops
- Cancer cells starved
- IV Anti-cancer drugs into patient
- Starved cancer cells become better targets
- Potentiated result
- Much greater uptake of anti-cancer drugs (=>1000-fold)
CANSA reacts
MEDIA RELEASE FROM THE CANCER ASSOCIATION OF SOUTH AFRICA

Tuesday 14 February 2006

Att: News Editors

For immediate release
CANSA warns against Insulin Potentiation Therapy (IPT) for cancer patients
The Cancer Association of South Africa (CANSA) is warning cancer patients about false promises that have been made about so-called Insulin Potentiation Therapy (IPT). During the past few weeks there has been a campaign, especially using the radio, to present IPT as a breakthrough in cancer therapy. Some desperate cancer patients have grasped at this treatment, especially when conventional treatment has failed to arrest the growth of their cancers.
“CANSA researchers have looked into IPT and discovered that it is not a new breakthrough but was developed in Mexico in the 1930s,” said Dr Carl Albrecht, CANSA Research Advocate. “Since then there has not been a single published report in a peer-reviewed journal of a clinical trial showing any tumour regression or complete response (disappearance). The best that was found was a reported 7 percent decrease in tumour growth or 4 millimeters less growth over 49 days relative to a tumour of 61 millimeters in diameter compared to controls. The bottom-line is that the tumours continued to grow in this study and no cures, or even partial responses (50 percent decrease) have ever been published in reputable journals. These results are of no clinical significance and IPT has not been proven as a treatment for cancer”, Dr Albrecht said.
“The treatment is based on the theory that cancer cells need and absorb glucose more than normal cells and that by injecting a cancer patient with sufficient insulin, cancer cells could be made far more sensitive to chemotherapy. Consequently far less chemotherapy would be required and cancers could be eradicated more effectively. If this were true, there would be world-wide excitement around this approach, however, it is reported in only one publication in 1981 and the idea has not progressed since. It is certainly no breakthrough”, Dr Albrecht said.
The Mayo Clinic in the United States has referred to IPT as being a dangerous alternative cancer treatment and has stressed that there is absolutely no scientific evidence that it works or is safe. The world famous Memorial Sloan-Kettering Cancer Center has referred to IPT as being unproven and questionable with potentially lethal side-effects. A South African cancer patient enquired about the IPT treatment and was told that he would need to go to Mexico for treatment which would cost R36 000 a month and in his case could last up to three years. The patient remarked that he would “have to sell a farm to cover these costs”. After being shown the facts concerning IPT he opted for conventional therapy in South Africa.
Aloe vera gel - the scheming of an alternative drug
Glyconutrients-Mannatech

- Using multi-level sales, clever advertising, pseudo-science, create the illusion that the freeze-dried Aloe vera gel powder is a miraculous drug that can cure any disease including cancer.
Birth of glyconutrients

• Key idea:

• There are 8 essential sugars the body cannot make. You must take these as a supplement to maintain health.

• This is a blatant lie. The body can make all these sugars. There are no essential sugars.
Why Supplement
To date eight bio-active essential sugars have been found that are required for proper inter-cellular communication. Do not think that these are in any way comparable to table sugar or any of the commercial or artificial sugars used to sweeten food or drink. They do not cause an insulin spike and are safe for diabetics. The eight sugars for anyone that wants to delve into it a little deeper are:
- mannose
- fucose
- xylose
- glucose
- galactose
- N-acetyl-glucosamine
- N-acetyl-galactosamine
- N-acetyl-neurominic acid (sialic acid)
The human body can make its own glucose. The pathway is called gluconeogenesis.

Glucose is not essential like omega-fatty acids or vitamin C.

Calling it essential is pseudoscience, sales talk and patent nonsense.
GlycoHealthService


Home | Articles | Latest News | Resources | Join Us | Contact Us
— Updates & News by Email —

There's more to good health than the lack of disease symptoms. Learn what's impacting your health today.

Back from the Brink

"Story of a Caring and Compassionate Doctor"
(Transcription of Taped Audio Program)

ANNOUNCER

IMAGINE YOU ARE forty-three years old, in the prime of your life, suddenly, hanging on to the very edge of life with only one finger, and losing your grip -- so close to death's door! Then imagine something is pulling you back from the brink.

You are about to hear the story of a man who became so very ill he went to the point of no return, but then returned! Nine doctors gave up on him. Nine doctors were sure he was going to die. They were all wrong!
Klamath’s Blue Green Algae

"Chlorophyll: This is the substance that makes green plants green. Chlorophyll-rich foods like what grass, algae, seaweeds and green vegetables help to 'build' the blood."

Patrick Holford
The Optimum Nutrition Bible
Patrick Holford

- **Patrick Holford** is a British nutritionist/nutritional therapist and author. He appears regularly on television and radio in the UK and abroad. He has 34 books in print in 24 languages. His work promotes a wide variety of alternative medical approaches such as orthomolecular medicine and homeopathy, many of which are considered pseudoscientific by mainstream science and medicine.
Oxygen Therapy

O_2O_3

Cancer affects us all...
OZONE THERAPY

• Medical Ozone and Cancer
• Medical ozone saves lives in Europe, but the FDA continues to prevent formal testing in the United States
• By Ed McCabe
• (This is a great synopsis, but you should get and study his book, "Flood Your Body With Oxygen". We highly recommend it. It is a treasure trove of information on ozone and oxygen therapies!)

• THERE ARE OVER 3,000 medical references in the German literature showing the effectiveness and safety of ozone in over 50 years of application to humans by way of millions of dosages. The International Ozone Association and the ozone machine manufacturers report over 7,000 M.D.'s in Europe using medical ozone safely and effectively, some for more than 40 years, yet for the past 20 years the FDA has prevented human testing and issues any ozone-generating device approvals
Oxygen therapies are unproven alternatives promoted as a cure for cancer, acquired immune deficiency syndrome (AIDS), and other degenerative diseases. These "therapies" are offered at clinics in Mexico, the United States, and Europe. Proponents claim that many diseases, including cancer, are caused by oxygen deficiency and that oxygenation can restore health by destroying cancer cells, eliminating pathogens, stimulating metabolism, and by producing "oxidative detoxification." There is no scientific evidence to support any of these claims. Oxygen therapies include: (1) hydrogen peroxide therapy involving intravenous infusion, ingestion, colonic administration, or soaking in hydrogen peroxide solution; (2) ozone colonies and ozone autohemotherapy, in which blood is withdrawn and treated with ozone before reinfusion, and (3) "oxygenated" water, pills, and solutions. The use of oxygen therapies has resulted in serious adverse events and several deaths. Oxygen therapies should not be confused with those commonly used in respiratory care.
Sutherlandia

*Sutherlandia* is the only indigenous, South African plant that has been called the “Cancerbush”
Papery pods are formed in December and blow away in January
First written account that *Sutherlandia* cured cancers.

“.curing of malignant tumours, cancerous in appearance; also used as blood purifier and tonic…to delay the progress of true cancer and much prolonged life.”

Pancreas cancer survivor
Mr Mike de Kock 1994
CT - SCANS

• BEFORE (1992)
  • Arrows point to distended gallbladder (above) and pancreatic tumour (below).

• AFTER (1994)
  • Arrow points to healthy pancreas. Tumour has disappeared! Gallbladder and liver normal.
A randomized, double-blind, placebo-controlled trial of Lessertia frutescens in healthy adults.

Johnson Q, Syce J, Nell H, Rudeen K, Folk WR.

Source
South African Herbal Science and Medicine Institute, University of the Western Cape, Bellville, South Africa. qjohnson@uwc.ac.za

Abstract
OBJECTIVES:
Indigenous medicines are widely used throughout Africa, despite a lack of scientific evidence for their safety or efficacy. The aims of this study were: (a) to conduct a pilot study of the safety of a common indigenous South African phytotherapy, Lessertia frutescens (Sutherlandia), in healthy adults; and (b) to contribute to establishing procedures for ethical and scientifically rigorous clinical trials of African indigenous medicines.

DESIGN:
A randomized, double-blind, placebo-controlled trial of Sutherlandia leaf powder in healthy adults.

SETTING:
Tiervlei Trial Centre, Karl Bremer Hospital, Bellville, South Africa.

PARTICIPANTS:
25 adults who provided informed consent and had no known significant diseases or allergic conditions nor clinically abnormal laboratory blood profiles during screening.

INTERVENTION:
12 participants randomized to a treatment arm consumed 400 mg capsules of Sutherlandia leaf powder twice daily (800 mg/d). 13 individuals randomized to the control arm consumed a placebo capsule. Each participant received 180 capsules for the trial duration of 3 mo.

OUTCOME MEASURES:
The primary endpoint was frequency of adverse events; secondary endpoints were changes in physical, vital, blood, and biomarker indices.

RESULTS:
There were no significant differences in general adverse events or physical, vital, blood, and biomarker indices between the treatment and placebo groups (p > 0.05). However, participants consuming Sutherlandia reported improved appetite compared to those in the placebo group (p = 0.01). Although the treatment group exhibited a lower respiration rate (p < 0.04) and higher platelet count (p = 0.03), MCH (p = 0.01), MCHC (p = 0.02), total protein (p = 0.03), and albumin (p = 0.03), than the placebo group, these differences remained within the normal physiological range, and were not clinically relevant. The Sutherlandia biomarker canavanine was undetectable in participant plasma.

CONCLUSION:
Consumption of 800 mg/d Sutherlandia leaf powder capsules for 3 mo was tolerated by healthy adults.
Integrative Medicine

- Medicine
  - Complementary
  - Alternative
Integrative Medicine

Medicine

Complementary

Alternative

Cancer affects us all...
Integrative Medicine

Medicine

- Complementary
- Alternative

Cancer affects us all...
Quotes re alternative medicine

• Richard Dawkins has stated that "there is no alternative medicine. There is only medicine that works and medicine that doesn't work”.

• If scientific investigation establishes the safety and effectiveness of an alternative medical practice, it then becomes mainstream medicine and is no longer "alternative", and may therefore become widely adopted by conventional practitioners.

• Edzard Ernst, professor of complementary medicine, characterizes the evidence for many alternative techniques as weak, nonexistent, or negative, but states that evidence exists for others, in particular certain herbs and acupuncture. Ernst has concluded that 95% of the alternative treatments he and his team have studied, including acupuncture, herbal medicine, homeopathy, and reflexology, are, according to The Economist, "statistically indistinguishable from placebo treatments."
"Next time warn me when you're going to sneeze."
Thank You