



Looking at Cancer From Three Angles

Chapter 1



MALKA | TO FIGHT AND TO WIN

I chose to open the book with a description of Malka's disease unfolding. It supplies us with many lessons about complementary and alternative medicine and its place in treating cancer patients.

Malka is an attractive and very impressive woman in her 50s living in Jerusalem. She asked for my help in 1997 after being diagnosed with primary liver cancer; the doctors at the Hadassah Medical Center found that "her disease was too advanced and they cannot offer any additional treatment."

When Malka turned to me, her CT scan showed the presence of a large tumor in her liver, about 7cm in diameter. The tumor marker of this type is called *Alpha Fetoprotein* (AFP). The marker amount in Malka's blood was about 5000 ng/ml (about 20 times above the norm of up to 30 ng/ml). Malka was accepted into the New Hope Medical Center and immediately started hyperthermia treatments with no other treatment. She refused to receive any of the other treatments we offered her, including intravenous vitamin C, food supplements and the use of special remedies. After two months, there was a drop of 75 percent in marker levels in her blood to about 870 ng/ml. A CT scan showed that the liver disease had disappeared almost entirely. At this stage, it was Malka's decision to stop treatment at the New Hope clinic. After about a year, following a rise in the levels of the protein marker and a relapse of the liver disease, she returned. She again refused to accept any treatment other than hyperthermia. Following the hyperthermia treatment, her protein marker levels in the blood dropped down this time as well, and the CT scan showed a regression of the liver mass. And again, Malka decided to stop the treatment. Six months later, Malka returned to the New Hope clinic for the third

time. Now she was diagnosed with a tumor also outside the liver in the pancreatic region. A biopsy proved it to be a metastasis of the hepatic tumor, along with the relapse of her liver disease and high protein marker levels. At this stage, Malka decided to accept all the treatments we offered her and pursue them over time according to all my instructions and recommendations. She was treated with hyperthermia again, but she also received intravenous vitamins and minerals, started a diet which included food supplements and underwent detoxification (cleansing the body from toxins) procedures. After a few months, her AFP level dropped below normal values and was stabilized at only 27 ng/ml. A CT scan showed a remission, and finally, the entire disappearance of the liver and pancreatic tumors. After a few months, Malka finished the treatment in the New Hope clinic and continued with her diet and food supplements at home, according to our indications. Today, seven years after Malka came to us for the first time, and five years after she had finished the entire session of treatments, there is no evidence of an active disease in any of the tests.

Malka's story teaches us:

Sometimes cancer can be stopped and even cured by hyperthermia and CAM treatments alone. Cancer is a chronic disease that requires prolonged treatment with a lot of patience and endurance. Cancer treatment should incorporate a number of methods and not make do with just one kind of treatment.

MY PERSONAL STORY

LOOKING AT CANCER FROM THREE ANGLES

I have been treating cancer patients for over 30 years. One could say that I share the unusual distinction of being one of the few doctors in the world today that examines the disease from three different angles.

ANGLE 1: A SPECIALIST IN ONCOLOGY

1. Beginnings: Doctor of Internal Medicine

I finished my medical studies at Tel Aviv University in 1971. After a year of working as an intern at Ichilov Hospital (a small and intimate institute in those days), I moved to Sheba Medical Center at Tel-Hashomer to specialize in internal medicine. During my training, I came across many cancer patients who were hospitalized in my department, and in the neighboring institution for oncology, under the management of Professor Harry Brenner (not a relative of mine).

2. The Transfer to Oncology

After about three years of training in the department of internal medicine, I decided that I preferred to take care of cancer patients and turned to a fellowship in oncology. After I started that in Tel-Hashomer, the head of the institute for oncology offered me to do part of my training in the United States with Professor Irwin Gliksmann, a renowned radiotherapist

and a very kind Jew, who ran the radiation institute at the Rhode Island Hospital in Providence, Rhode Island. He invited trainees from Israel to come to work at his institute. I went for an interview and stopped in New York on the way to visit Memorial Sloan-Kettering, a renowned international center for cancer treatment. After an interview with Dr. Bayard Clarkson, who was then the head of the oncology department, I was reviewed and accepted for training in chemotherapy there, after completing a year of radiation therapy training in Rhode Island.

3. The American Chapter

During the next four years, I worked in two wonderful medical centers in the United States and received training in radiotherapy (radiation treatment) and medical oncology (chemotherapy). It should be noted that the U.S. differs from Israel in that these are two separate and distinct specializations.

My training at Memorial Sloan-Kettering medical center in New York was especially fascinating. This medical center has the largest concentration of oncological surgeons from all the medical disciplines as well as the best oncologists and radiation therapists. This center also contains a massive medical support for complications for all the treatments. The surgical keywords there are *innovation* and *aggressiveness*. The surgeons are able to perform the most complicated surgeries with remarkable precision, including those which last many hours. In fact, every patient there is a sort of prototype for new, innovative treatments.

During my long stay at that medical center, I learned very well the advantages and disadvantages of conventional cancer treatments.

4. Head of the Oncological Institute at the Wolfson Medical Center

On my return to Israel, I worked for a few years at the oncology institute in the Tel-Hashomer Medical Center, and was later invited to move to the Wolfson Hospital in Holon where I established the oncology institute which I run to this day.

ANGLE 2: AN ONCOLOGY SPECIALIST IN COMPLEMENTARY AND ALTERNATIVE MEDICINE (CAM) FOR CANCER

1. Crossing the Lines

For many years, I was interested in unconventional treatment methods. When Bar-Ilan University opened a course in Traditional Chinese Medicine for doctors only, I decided to join. Two years later as I finished the course, I started treating general medical problems such as asthma, skin rashes, back aches etc., but after a while I found that I was more and more interested in the possibility of treating cancer patients with these unconventional methods.

2. Turning to Complementary and Alternative Medicine in Cancer

As an oncologist who observed the top of oncological endeavor, I was well acquainted with the capabilities, as well as the limitations, of conventional medicine. That is why I gradually started to be interested in, to study and to become familiar with the different methods of CAM for cancer. The lack of organized programs in this field had me traveling abroad many times for seminars, course conventions and visits to cancer clinics to learn the wide variety of treatment methods for cancer according to complementary and alternative medicine.

Among other areas, I had training in acupuncture, homeopathy, electro-acupuncture, nutrition, reiki, kinesiology, darkfield microscopic blood analysis, *Insulin Potentiation Therapy* (IPT) treatment, hyperthermia, and galvanotherapy.

Over the years, I had the opportunity to develop relationships with the big CAM institutes for cancer treatments in the world, and I am invited to speak at many conferences and seminars around the world.

3. Connection to Cancer Treatments in Germany

Germany is a CAM paradise. This is the land of origin for homeopathy (Hahnemann), electro-acupuncture (Voll) and other methods. There is

a large annual conference and exhibition in Baden-Baden for CAM methods encouraging some of the biggest manufacturers of homeopathic remedies such as Heel, Boiron and DHU.

Cancer treatments with CAM methods are very developed in this country. Although treatments with *Viscum album* (European Mistletoe) injections started in Switzerland, they gained a particular popularity in Germany. This is also the country of origin for treatments with thymus extract injections and other enzymes, special injections for boosting the immune system and more.

In the last 15 years, I have visited Germany several times a year, where I encountered the state-of-the-art technological developments of the hyperthermia technique. It has been known for many years that cancer cells can be destroyed using elevated temperatures, but past attempts to implement this treatment with a suitable device have all failed.

I have met with renowned doctors in Germany using hyperthermia among whom were Dr. Hager, chairperson of the German Society for Hyperthermia, Dr. Von Ardenne from Dresden and Prof. Douwes from Bad-Aibling. After a thorough examination of their results, I had no doubt that hyperthermia is a lifesaving method for many cancer patients in Israel.

4. The Establishment of the New Hope Center

On my return to Israel, I decided to establish a center for alternative medicine to enable Israeli cancer patients to receive these aforementioned treatments without needing to travel abroad. I have developed a plan for this center based on what I had seen in similar centers in Germany, the United States and Mexico. I went to different hospitals – public and private – and to the different health insurance groups in Israel with proposals for a collaboration. Unfortunately, I did not receive any supportive responses, so I was compelled to build it on my own with a very substantial financial investment.

5. New Hope Medical Center

The center I established contains devices for all types of hyperthermia: whole-body hyperthermia, deep localized hyperthermia and superficial hyperthermia. It also has devices for treatments with hydrocolonics, galvanotherapy, ultraviolet blood irradiation, lymphatic massage, Energy and Rife treatments, ionized oxygen, pain treatments with a biofeedback device, IPT treatments, intravenous vitamins and minerals, etc. In addition, I also use alternative medical diagnostic techniques such as Vega testing and darkfield microscopy.

6. Hope 2000 Convention: CAM in Cancer

A short while after the New Hope center opened, I held an intensive three-day convention at the Tel Aviv Museum Hall with the participation of about 500 cancer patients, their families, doctors and cancer therapists. The convention included extended information that was shared during lectures given by world-class physicians about CAM methods and about the vast experience that has been gathered in this field. I provided a portion of the lectures at the convention and other speakers included Prof. Dowes from the St. George Center in Germany, who spoke about hyperthermia and galvanotherapy; Dr. Michael Schachter, one leader of the CAM Union in the United States and the manager of a large medical center for cancer treatment in the state of New York, who reviewed, among other things, prostate cancer; Dr. Swelling, the director of a medical center in Tijuana, Mexico, who spoke about different issues in CAM. Zohar Eliav and Omri Citron from Israel gave a talk about mind-body approaches to cancer.

7. A Third of the Patients who Arrived at New Hope Hopeless, Responded to the Treatments

About two years after the establishment of the New Hope Center, I reviewed treatment results for 70 patients and presented the review in several international conventions for CAM cancer treatments or conferences dedicated to hyperthermia. The said patients came to us

without any hope after their doctors had told them that they had nothing more to offer. The review shows that a third of the patients we treated responded to the treatments. Some had full or partial remission of the tumor and others saw a stabilization of the disease for prolonged periods of time.

THE THIRD ANGLE: I AM A CANCER PATIENT

1. A Surprise Over the Phone

One evening, a few years ago, the phone in my house rang. On the line was Dr. C., a urologist in whose clinic I underwent a biopsy of the prostate a few days before. I was expecting this call, of course, but not what was said.

“The biopsy is positive,” said Dr. C., “but what surprises me is the high degree of malignancy. It is a Gleason 8 malignancy.”

Two weeks earlier, I accompanied my son to a blood test at the clinic and at the same time I figured I should do one myself. I asked, among other things, to perform a *Prostate-Specific Antigen* (PSA) test, which is intended to determine the level of the tumor marker that is typical for prostate cancer. The result of that test was 20 mg/ml, five times the norm. So I went for an urgent ultrasound examination and a biopsy of the prostate.

Dr. C. did not have to say much. As an oncologist, I knew very well that a biopsy with a Gleason 8 malignancy, and with the high levels of the PSA tumor marker in my blood, the prognosis was quite poor. My chances of survival were 20 to 30 percent in five years.

2. What To Do When you are Informed you Have Cancer?

The following day, I consulted two senior physicians who are friends of mine about the preferred conventional treatment options: a urologist, regarding surgery options, and an oncologist, about the possible radiation treatments. I also started taking a few dietary supplements

with anticarcinogenic and antioxidant properties that can strengthen the immune system. On top of that, I immediately received deep localized hyperthermia treatments for the prostate. In addition, I changed my eating habits, lost weight and made sure to exercise and change my lifestyle in several other ways.

After several consultations and a thorough review of the medical literature, I decided to choose radiation treatments in the form of high-dose rate brachytherapy combined with the other treatments.

Since the high-dose rate brachytherapy treatment for the prostate is done in just a few places in the world, I went to several centers in the United States and chose the one located in Oakland, California. While I was there, I went through an ultrasound of the prostate gland during my first consultation to figure out whether I was suitable for the treatment and how far the disease had spread. The treatment itself was scheduled for four months later.

During the next four months, I continued with the conventional treatments of pills and shots, and at the same time consumed a large number of medications and supplements from the world of alternative medicine: pills, powders, injections and transfusions. Additionally, I continued with the hyperthermia treatment for the prostate gland three times a week, undergoing over 50 such treatments. As a result, the PSA have dropped to 0.2.

3. Doctors Were Amazed!

After four months I came back to the hospital in Oakland to receive my brachytherapy treatment. Prior to the treatment, doctors repeated the ultrasound examination of the prostate gland and were amazed at the results. The tumor was almost entirely gone. It had nothing left but a small and vague shadow.

After the brachytherapy treatment I had received in the United States, I was subjected to external radiation in a hospital in Israel. At the same time, I continued to receive deep localized hyperthermia treatments for the prostate gland, my decision to do so was based on recent statistics

proving that hyperthermia treatment doubles the radiation efficiency.

4. Fighting For Life

Just like any other cancer patient, I had, and still have, ups and downs. Besides the cancer, I also suffered from a severe kidney stone attack in the left kidney that needed two treatments of nephrolithotomy. The combination of the radiation and the nephrolithotomy in the same area was extremely difficult. Despite all that, I continued to work relentlessly and do daily physical activities. Since I was a child, I have been swimming each morning, an activity I continued even during the hardest of days. Today, I maintain the right eating habits, continue to practice sports and meditate, try to keep a healthy body weight, consume natural medicines in large quantities on a daily basis and try to look at life in a more peaceful and relaxed manner, separating the meaningful things from the trivialities.

As a cancer patient, I identify with patients who are willing to fight for their lives. However, I wonder about patients who are in my situation yet are not willing to invest the necessary efforts to try to overcome the disease.

COMBINING THE THREE ANGLES

1. Combine All the Methods

The combination of being an oncologist and a general physician with knowledge and experience in CAM methods has allowed me to better fit the treatments to the patients and precisely evaluate the efficiency of the CAM treatments. When I thought it was appropriate, I persuaded patients who had consulted me for CAM treatments only, to go to the hospital as well and receive chemotherapy or radiation treatments. However, even today there are patients who insist on treating themselves with alternative methods only and decline any type of conventional treatment.

2. Understanding the Chances and Looking for Solutions

For many years I observed patients who did not attempt to understand the real meaning of their disease, their chances for recovery, how long they had left to live, and what can be done to prolong their lives. When I became ill, I acted like I would expect any patient to act. I evaluated the ability of conventional medicine to cure me, understood its limitations, and started to use all the methods that complementary medicine offers. I continue with this treatment to this very day.

What Can Be Learned from this Chapter ?

Immediately after being diagnosed with the disease, one needs to consult an oncologist and establish the chances of being completely cured, which treatments exist for this disease, what is their efficiency and how long they last.

Don't rely only on hospital treatments. Immediately look for other treatment methods.

It is recommended to begin with CAM treatments immediately after being diagnosed, preferably when the general situation is still relatively good.

It is advisable to use CAM treatments with chemotherapy, radiations, hormone injections, etc. When all conventional treatments have failed, one can result to CAM as the only treatment.

It is important to persist with CAM treatments for as long as needed and not suffice with a treatment of two to three months.

CAM and Conventional Medicine for Cancer Treatment

Chapter 2