

Complementary oncology –  
what is that?  
Experience of twenty years

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Spectabilis,  
Ladies and Gentlemen !

In normal cancer therapy surgeries, radiation and chemotherapy are given.

But what can we do, when operation, radiation and chemotherapy had been done and cancer goes on, or operation, radiation and chemotherapy cannot be done?

In those cases we have serious options in complementary cancer therapy.

Sometimes this therapy is called "biological".

The main principle is nihil-nocere and salus aegroti-lex suprema.

The word "biological" cannot really describe the certain procedures. Our approach is multimodal and partially characterized by physical principles.

New radiological aspects, as the MRT and the PET-Cholin-CT, give us especially preoperative important signs in planning a really good cancer therapy.

Therefore, sometimes indication of operations must be over thought.

In general, in Germany and elsewhere, too many surgeries are performed.

First of all – Complementary therapy

We want – others and me – to support "normal oncology" in a field with not so great success.(look at the average results of cancer-medicine, published yearly from the WHO)

Newest development try to inhibit growth factors (vascular endothelial growth factor and monoclonal anti bodies)

Today it is scientifically proven that there is a direct relationship between cancer growth and a bad immune system.

To strengthen the immune system is one of the first targets of my special intensive therapy after MAAR (patent!)

Secondly, I try to destabilize or destroy tumor cells, metastases and micro metastases.

In former times I analyzed in many patients immune system before and after therapy. In every case we saw a fulminate rising of immune active cells after my therapy.

Today, beside other problems, the phenomenon "micro metastases" is the main cancer challenge.

Hereby, the diagnostic problem is that even modern diagnostic procedures cannot detect micrometastases. So we have to wait with our therapies until the disease become apparent.

All over the world complementary therapy forms are practiced.

Complementary oncology can be based on three options:

1. the oral
2. the intravenous
3. the apparative way

Two aims are pursued:

Powerful strategic strengthen of the immune system and  
to destabilize or to destroy tumor cells.

The unique and specific point of my "Intensivtherapie nach MAAR" (PATENT, Nr. 305 70 934) is to combine the oral, intravenous and apparative approach in order to give the patients all complementary possibilities which are exist today and which seem to be plausible.

The daily treatment takes about five hours.

The whole duration of the therapy is about 4-5 weeks.

The procedures are as followed:

Shortly after whole body hyperthermia the local short wave oncothermia follows, located on those regions of body where metastases are known.

After whole body hyperthermia, while I give infusions, the venous blood is not dark but very light-red; this must be caused by oxygenation during heating. This phenomenon was not yet observed and not yet interpreted. After WARBURG's thesis of an anaerobes tumor metabolism this could maybe mean a negative effect on tumor cells.

During application of local oncothermia infusions with mistletoe, selenium, other day Vitamin C high dosed, and pentaglobin are given.

Additionally patients are taking a special daily oral therapy, for example high dose enzymes.

A possible success of therapy is proven by MRT or PET-Cholin-CT before and some weeks after therapy.

Over many years, with this procedure, we see a lot of tumor-remissions, partial remissions and still standing tumors. Sometimes we have even have success in the beginning of a therapy while metastases exist.

All kind of tumors are treated, beside leukemia.

The last ten years more and more patients with prostatic cancer have come to me. In these cases I developed an even similar treatment as in other tumors.

So I see patients from all over the world.

The oral way consists in giving enzymes, antioxidants, thymus-activation and others.

Enzymes. How do they work?

Enzymes are able to unmask tumor-antigens on the surface of tumor-cells. Normally they are hidden by a fibrin-mask to escape damage by the immune-system.

After they are now to be seen a prior strengthened immune-system (by e.g. the shown methods) could now destroy them. Also enzymes could block adhesion-molecule so that a binding on other organs (metastases) could be inhibited.

Thirdly enzymes could diminish side effects of chemo- and radiotherapy by limiting inflammation.

Antioxidants:

Those substances can bind free electrons which are a characteristic sign of free radicals (nicotine, tar, pesticides, cytostatica)

After being blocked, radicals are unable to destroy cell-membranes, mitochondrion and DNA-function.

Important members of antioxidants are the enzyme-like glutathione peroxidase in selenium, zinc, copper. Not like enzymes are VitC, VitE, glutathion, melatonin.

Thymuspreparates

They are activating T-lymphocytes.

When there is a lack of Thymus-activity, natural-killer-cells, macrophages and granulocytes could be diminished. Tumor growth could be bigger. A lack of Thymus peptides could be caused by e.g. chemo therapy and/or radiation.

Now some words to intravenous therapy.

The intravenous way is e.g. to give mistletoe, Vit C, Selenium, plasma proteins and human globulin.

(IgM, IgG) intravenous.

This procedure makes substances more effective in tumor-fighting than an oral or subcutaneous way.

Mistletoe

Intravenous application leads to

1. Cytotoxic reaction (apoptosis)
2. immune modulation procedures
3. improvement of general status of tumor patients

The cytotoxic reaction is based on the induction of apoptosis by destroying protein biosynthesis in the nucleus of tumor-cells.

The immunomodulating effect by activating leucocytes and natural killer cells.

The improvement of general status by activating endorphins.

In the field of mistletoe function-modus about 1.500 studies and publications are existing.

Apparative Therapies:

1. Whole body hyperthermia (Infrared)
2. Short wave (radio frequencies) oncothermia
3. Prostate short wave local oncothermia
4. Colon cleaning

General remarks on hyper<sup>er</sup>thermia.

A lot of different forms of hyperthermia exist.  
It is the oldest and newest cancer-fighting method in medical history.

In our days hyperthermia has a renaissance.

About hyperthermia over 9.000 publications are existing, 8% are describing clinical studies.

A German, European and world society of hyperthermia exist.

Many congresses are held every year all over the world.

Users are spread all over the world.

In China, Japan, Germany or elsewhere.

Hyperthermia has become an international face.

Eg. The most radical form and method is called "ablative". A heat electrode is brought in the tumor or in his neighborhood, e.g. laser-ablation.

Temperatures reached between 60-250°C.

Systemic heat between 38-42°C.

Local tissue heating 40-45°C.

The main effects of hyperthermia (A. Sassz, Oncothermia: principles and Practice) are:

1. An increase of temperature could cause a vasoconstriction and therefore a decreased blood perfusion in tumor cells.
2. Cellular membrane change, e.g. by denaturing membrane proteins; so a minor capacity of cell-dividing follows.
3. ATP depletion in tumor cells.

Increased metabolism decreases  
ATP stores leading to increased cell destruction up to  
necrosis

DNA-replication

DNA replication is blocked, even in the S-phase of mitosis

Immune Reaction:

Eg. Activating natural killer cells.

I cite Prof. Szasz: "Moreover the elevated temperature distributes tumor specific antigens on the surface of various tumor cells and assists in their secretion into extra-cellular fluid, triggering immune reactions against malignant cell."

Pain reduction:

Especially electric-field-induced hyperthermia can reduce pain. Various authors have seen a drastic pain relief from hyperthermia.

The role of so called heat-shock proteins or chaperones (HSP)

They are present in all cancerous cells. They can help tumor cells to survive. Hypothermia shows an intensive synthesis of HSP. HSP may be lead to thermo-tolerance.

May-be however HSP could increase apoptosis.

The role of these proteins are not yet completely clear.

## Whole body hyperthermia

That means a homogenous heating all over the body by infrared light. Blood becomes hot. We are doing a so called "moderate form" where temperatures are between 38-40,5°C. In some cases patients reached even more than 40,5°C in my treatment.

The main effect of whole body effects are seen by experts (Heckel) in immune-modulating effects which can destroy tumor-cells.

## Shortwave hyperthermia

Between 8-27 megahertz, the wave could penetrate deep in tissues. Blood remains cool. An electric field is produced in or around tumor formation.

HAGER: "The different degree of water content especially in tumor membranes could cause selective resonance phenomena producing destruction of tumor cells."

Various kinds of tumors are and had been treated.

I saw cases of prostate big lymph-nodes masses retroperitoneal where we controlled pre- and post therapeutic by F-PET-Cholin CT and where we could see astonishing remissions.

Today the quite "open field" of hyperthermia begins to be closed. At least this therapy opens a big window in the fight against cancer.

Thank you.

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