

# Cancer should be treated utilizing tumor marker combination assay according to biological development of cancer by mathematical evaluation

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## ABSTRACT

**Background:** We have developed tumor marker combination assay (TMCA) which is 100 times more sensitive than image diagnosis in 1994.<sup>[1,2]</sup> This method can get both of high sensitivity and specificity over 85% for early cancer. Hence, we can biologically diagnose the development of cancer tissue by TMCA. Hence, we have tried to carry out primary cancer prevention and recurrence prevention utilizing TMCA by mathematical evaluation.<sup>[2]</sup> As the first item, we have tried to carry out primary cancer prevention program among high-risk tumor stage groups. As the second item, we have tried to carry out cancer recurrence prevention program among post-operative high tumor stage groups. Shelton reported that cancer cell is grown up in the presence of both glucose and glutamine. Hence, dietary energy restriction is useful tool of cancer prevention. As the second item, I have exploited herbal medicine (sun advance) which inhibits the hallmarks of carcinogenesis.<sup>[3]</sup> As the third method, I have employed detoxifying therapy.<sup>[4]</sup> As the 4<sup>th</sup> method, high-dose Vitamin C therapy which promotes the increasing of hydroperoxide in cancer cell. I applied these four combinations as intervention treatment method on candidates with the high risk of tumor stage. **Materials and Methods:** The study sample consisted of 158 candidates of high-risk tumor stage group 158 candidates, among them, 94 candidates were carried out primary cancer prevention utilizing four combinations of intervention treatment methods. The other 64 candidates are served as the control. As the second item, we have selected 131 post-operative cancer patients with high-risk tumor Stage IV and tumor Stage V among 500 post-operative patients. Among them, 104 candidates are used as intervened group and the other 27 patients are used as control group. **Results:** In the primary cancer prevention program, control group showed that 46.7% has tendency to aggravating change. Intervened group showed only 1.1% of aggravating tendency. In the control of recurrence prevention group, 55.5% have showed tendency to aggravating change. Among intervened 104 candidates, 7.7% are not prevented. These data were gotten in 3-year survey. **Conclusion:** Cancer prevention might be possible by mathematical quantitative comparing evaluation.

**Key words:** Detoxifying therapy, dietary energy restriction, herbal medicine (sun advance), high-dose Vitamin C, recurrence prevention program, TMCA examination with mathematical evaluation

## INTRODUCTION

It was well known that does not exist reliable methods and there is no correct barometer for cancer prevention and recurrence prevention. Hence, as to solve this problem, we have reported tumor marker combination assay (TMCA) in cancer (1994)<sup>[1]</sup> and cancer medicine<sup>[2]</sup> with mathematical evaluation. By utilizing TMCA, I have classified cancer risk

assessment into five tumor stages and I have selected 158 and 131 high-risk group, respectively, who are classified into TSIV and TSV among 700 primary cancer prevention candidates and 500 post-operative cancer patients.

I have intervened by applying four treatment methods for high-risk groups. Shelton<sup>[5]</sup> and Seyfried<sup>[6-8]</sup> reported that VM-M3 cancer cell is grown up in the presence of both

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glucose and glutamine. Hence, wise dietary energy restriction (DER) has induced from this knowledge as the nutritional countermeasure for cancer prevention.<sup>[9-12]</sup> Youngman reported that the combination of carcinogen and high-protein diet highly promotes the tumor nest production. Hence, DER has necessity of both combination of low glucose and glutamine and full coconut oil so as to produce ketone diet. As the second item, I have exploited herbal medicine (sun advance)<sup>[13,14]</sup> which inhibits selectively mitochondrial oxygen respiration on cancer cell and which inhibits its hallmarks of carcinogenesis of cancer cell. Now, I have employed detoxifying therapy which is utilized in old type of Japanese therapy as complementary and alternative medicine (CAM), which is mainly composed of Nishi type (orthopedic traction apparatus: WA: 57B [686] Yamato [KK, Ehime Prefecture, Japan]) of exercise and sweeping of intestinal canal which eliminates immunosuppressive substances from bloods and elevates immune activity utilizing detoxifying medicine. As the fourth method, high-dose Vitamin C therapy will inhibit angiogenesis of cancer tissue and promote increasing of hydroperoxide in cancer cell.<sup>[15,16]</sup>

## MATERIALS AND METHODS

We have selected 158 candidates who are classified into high-risk group TSIV and TSV as primary cancer prevention program among 700 TMCA examinees. These 158 candidates are applied as primary cancer prevention program [Figure 1].

As the second item, we have selected 131 candidates' post-operative cancer patients among 500 post-operative cancer patients, those are as follows: Gastric cancer: 20, colon cancer: 28, liver cancer: 3, breast cancer: 27, lung cancer: 17, prostate: 11, sarcoma: 2, kidney cancer: 2, ovarian cancer: 3, esophageal cancer: 3, uterine cancer: 14, and skin cancer: 1 [Figure 2].

Among them, 104 candidates were contributed to as an intervened group. Control groups: 27 patients are served to be as a control group. Detoxifying and immune therapy is composed of intestinal sweeping by detoxifying medicine and Nishi type exercise utilizing Nishi type apparatus (orthopedic traction apparatus: WA: 57B [686] Yamato [KK, Ehime Prefecture, Japan]).

Detoxifying therapy is composed of Nishi type (orthopedic traction apparatus: WA: 57B [686] Yamato [KK, Ehime Prefecture, Japan]) of exercise for 20 min and detoxifying therapy medicine for 6 h which is sweeping of intestinal canal which eliminates with detoxifying medicine (intake of the mixture of citric acid [12 g], lactulose [Kowa, Tokyo] [24 g], magnesium hydroxide [30 g] and 50 ml of water, total body massage, and hot and cold water dipping each time for 1 min alternatively, 7 time repeating) stimulation for autonomic nervous system and sauna bathing at 39°C for 20 min.<sup>[2]</sup>

As for cancer recurrence prevention, four types of intervened treatment method are prepared and applied to 104 candidates: DER, high-dose Vitamin C (20 g), herbal medicine (sun advance, Chiba city, Japan),<sup>[13,14]</sup> and detoxification therapy are applied step by step. As to herbal medicine, SA 1.6 g was prescribed daily. As for control group (herbal medicine 5 g as Kudzu Decoction), prescription was applied as placebo. TMCA examination was carried out in every 1 month and checked their risk assessment.

## RESULTS

At first, intervened treatment group in primary cancer prevention program was examined by TMCA and quantitatively compared in every 1 month. When effectiveness is weak, other intervened methods are added step by step [Figure 1].

Primary cancer prevention program showed the following data after 3-year survey. The primary prevention program showed the following data. As to control group, aggravation 46.9%, no change: 35.9%. Against these data, intervened group showed aggravation group: 1.1%, no change: 7.4%.

The recurrence prevention program showed the following data.

As to control group, aggravation: 55.5%, no change: 33.3% against these data, the intervened group showed aggravation group: 7.7%, no change: 13.5%.

## DISCUSSION

As cancer tissue will develop just look like fetus development, we should carry out suitable cancer recurrence prevention program by means to solve cancer nutritional control, to solve lowering immune activity, to inhibit cancer angiogenesis, and to solve mitochondria respiratory dysfunction because neoplasm is appeared by immunological decreasing disease. Before clinical neoplasm will be appeared, CAM or holistic medicine would be effective for primary cancer prevention and cancer recurrence prevention by mathematically and quantitatively compared evaluation in TMCA examination.

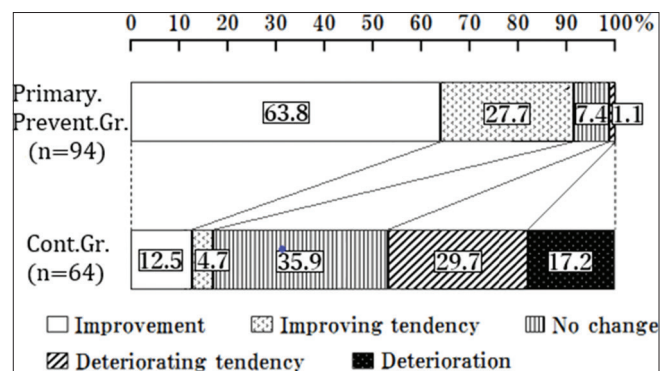
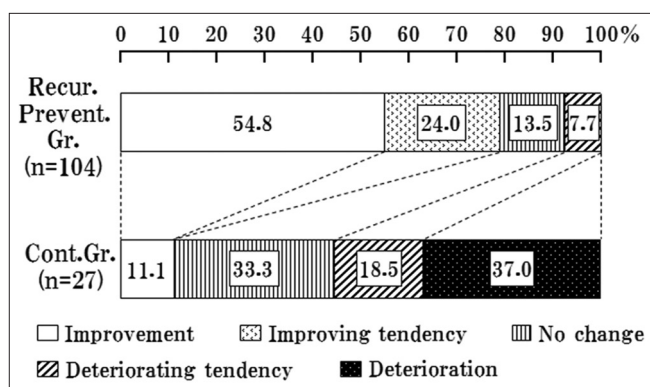


Figure 1: Primary cancer prevention program



**Figure 2:** Recurrence prevention program

In this paper, I have failed cancer recurrence prevention in 7.7%. However, as to this 7.7%, I have applied immuno-thermo-chemotherapy (ITC)<sup>[17]</sup> on those who have not succeeded in cancer recurrence prevention program after consent, utilizing ITC, I have succeeded in cancer recurrence prevention in 99% (not published).

In ordinal standard western medicine, about 50% of cancer patients will be recurred up to now. Hence, my reported recurrence prevention treatments are good intervention method which is depended on the activation of natural healing power different from chemotherapy and radiotherapy. We should change the treatment from cancer attacking by invasive treatment, to contributing to promote natural healing power. If our cancer recurrence prevention program is applied to the post-operative patients with high risk, most of the cancer patients will be secured. Utilization of TMCA by mathematical evaluation, we can be possible to make cancer-free society.

## CONCLUSION

Cancer prevention can be possible by mathematical evaluation, not by image diagnosis utilizing treatment promoting natural healing power.

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