

## Cancer and Chemotherapy

### DELORES' STORY

"Hello, is this Doctor Scala?" After acknowledging the question, I detected an accent in the voice that was definitely of Spanish origin. "Doctor Scala, I have cancer." There was dead silence, so I quickly asked, "How can I help?" There was a slight pause and then the caller said, "A friend told me that you could tell me what supplements to use. I saw you on the "700 Club" and my friend got your address for me. I'm going for surgery on Monday (it was Friday) and the doctor says I'm going to need chemotherapy after the surgery. I'm scared."

When the caller said she was scared, it was an understatement. I could hear the fear in her voice. She only spoke after a long pause; then her voice had a tremble that signified stress. I tried to ease the situation by talking about her family and background.

Delores was 34 years old at the time. She and her husband Antonio, Tony for short, had two girls aged four and six. They had emigrated from Mexico, became citizens, and worked hard. They managed to buy a small house which was the result of a long struggle. Tony was a skilled woodworker and made custom cabinets. Delores worked as a secretary for a company that did business in Mexico. I realized that this family describes the dream that brings people to America: We came for a better life; we worked as laborers to educate our children; our children will become doctors and professionals; our grandchildren can become people of great letters.

Philosophy aside, I realized that Delores needed guidance in the form of nutrition advice and some optimistic support. I recommended some nutritional products that I thought would help her and suggested she find a local Shaklee distributor in the yellow pages. She said she would and also promised to purchase the group of products which included Instant Protein, Vita-Lea, betacarotene, B-Complex, Daily Fiber Blend, and calcium magnesium.

Delores started with Instant Protein, Vita-Lea, and calcium-magnesium that Friday evening, and continued taking them until Monday morning when she was admitted to the hospital for a mastectomy. While she was in the hospital, her husband Tony called me. I told him that I wasn't as concerned about the surgery as I was about the chemotherapy. My strategy was for Delores to get in the habit of taking Instant Protein and Vita-Lea each day. I explained to Tony that during chemotherapy Delores would probably lose her sense of taste, so everything she ate would taste chalky and she would also become nauseous. Under those conditions, people tend to avoid food, so it's easier to stick with a simple habit like the one I recommended.

### BREAST CANCER:

### CHEMOTHERAPY

Breast cancer strikes 16 women every hour in the United States, and five women die from it every hour, 24 hours daily, seven days a week. On average, women are 35 when their breast cancer is diagnosed. The cancer probably starts at least five and possibly 20 years before it's big enough to be diagnosed. If detected early enough, no one would die from breast cancer. The reason people die (men also get it) is because the cancer has spread, usually via the lymphatic system, to other organs and tissues in the body by the time it's diagnosed. It usually spreads via the lymphatic system to other organs and tissues.

A surgeon has two options: a mastectomy, total breast removal, if the cancer is not localized; or a lumpectomy if the cancer is small and definitely localized. During surgery, the surgeon usually removes some lymph nodes from under the arm for a pathologist to analyze. If any lymph nodes have cancer, the usual course is chemotherapy.

Chemotherapy employs highly toxic chemicals that kill rapidly reproducing cells. The principal involved is simple. Cancer cells are the most rapid growing cells in the body. Therefore, if you give the body a poison that kills dividing cells, statistics dictate that it has a better than average chance of killing a cancer cell. Experts admit that there ought to be a better way, but there isn't at this time.

However, for chemotherapy to succeed, it requires from eight to twelve weeks of treatment. Chemotherapy varies according to the cancer, but is usually done twice a week. In this way, the laws of probability give a high chance of killing any residual cancer cells. Since cells enter the period of division at different times, the idea is to keep the chemotherapy up long enough to get them all until the body cannot tolerate the process any longer.

If you get the idea that chemotherapy is not an exact science, you're correct. The more rapid the cancer is growing, the lower the chances of success. To make matters worse, some cancers are more resistant to chemotherapy than others.

Chemotherapy also hurts the body's cells. In short, it gets some of the good guys along with bad guys. People lose their taste because taste bud cells don't reproduce under chemotherapy. The same with hair follicles, so your hair falls out. Side effects from chemotherapy include severe nausea, liver damage, and other problems. Chemotherapy is a very grim process to go through, but it's all we have at this time. Experts all agree that many other better techniques are on the way. Someday we will probably see chemotherapy as a barbaric treatment.

About 69 percent of women who had breast cancer, and either go for chemotherapy or radiation, survive. That's a good success rate compared to lung cancer, for example, where about 11 percent survive; or liver cancer, where only about 5 percent survive. Cancer is considered cured if the victim survives five years.

### DELORES CONTINUES

"Surgery was the easy part," Delores said, over the phone. She went on, "Three out of ten lymph nodes were positive. My doctor wanted me to start chemotherapy as soon as I'm well enough. Do you think I should?"

Delores' question hit me like a knife. Somehow, Delores had to make that decision with Tony and her doctor. I simply told her to ask her doctor what he felt her chances for success would

be. She screwed up all her courage, took Tony with her, and asked her doctor. He told her that about 85 percent of women with her type of cancer and lymph involvement make it through the five-year period after chemotherapy.

When Delores told me what her doctor had said, I then asked her how many things she starts have an 85-percent success rate. She decided to go the chemotherapy route.

Delores lost her hair and her taste went out the window. She never got nauseated and, in spite of her hair loss, she felt good through most of the chemotherapy. She returned to work and her co-workers couldn't believe her optimism. She never wavered from taking Instant Protein, Vita-Lea, and calcium, but she did put the other supplements on the shelf from time to time until she was through with the chemotherapy.

I would talk with either Tony or Delores every few days. The family was doing quite well under the circumstances; in fact, the children were being real troopers. Both Delores and Tony became depressed occasionally, but Delores had her moments of real despondency.

How did Delores do? Let me tell you in her words. "I told my doctor I was going to stay with the supplements. He said it was okay with him. About half way through the chemotherapy he asked me if I would mind talking with other women who didn't want to take chemotherapy. I asked him what I could say to them? After all, I didn't speak good English. Well, the doctor said he was so impressed by the way I came through the chemotherapy, that he wanted me to share it with others and reassure them that it's worth while."

From that point, the story gets better. Delores slowly increased her supplement program; in fact, the entire family did. She completed the chemotherapy course. The doctor plans chemotherapy again in six to twelve months. His strategy is to stop any other cancer that may have survived, before it gets started again.

#### HARRIET'S STORY

Harriet found a lump on her breast one morning while showering. "I checked it about six times that day because I couldn't believe it. If wishful thinking or checking it every few hours could get rid of a lump, mine would have gone." Harriet went to the doctor; he called for a biopsy which turned out to be positive.

"I decided on a lumpectomy and the surgeon agreed. The tumor looked localized and he said that if my lymph nodes were negative, he would stay with that strategy. He said that after surgery I would have radiation therapy."

Harriet was a Shaklee user and asked me if there were any special supplements she should use. I told her that what she was doing was fine, but to add more beta-carotene, about five a day, all the way through the radiation. I also urged her to continue taking her 400 or more International Units of vitamin E.

#### RADIATION

Radiation therapy has a similar approach to cancer as chemotherapy does. High energy X-rays are targeted at the tissue surrounding the area where the tumor was removed. The object is to kill cells that are rapidly dividing (i.e., cancer cells).

Beta carotene is a natural chemical that nature uses to protect important tissues and cell components from radiation. It won't stop the X-rays from hitting the cancer cells, but it modulates them enough that there's minimal tissue damage

around the target. For example, in the skin cells where beta carotene goes, it will help prevent radiation burns. But if an X-ray hits a cancer cell, the cancer cell dies.

#### BACK TO HARRIET

"I'm turning into a little orange," she said jokingly. I told her not to worry; it just meant she was getting enough beta-carotene. She had already discussed this observation with the radiologist and she, too, said it was all right.

Depression and irritability are normal by-products of radiation therapy. Harriet had both. However, at her examination when she was well into the radiation, the radiologist commented that she didn't show any significant signs of radiation burns. She came through the radiation with flying colors. Now Harriet has a mammogram every six months and an annual examination by her doctor. She is considered cured.

A recent analysis of breast cancer survivors brings many factors to the fore. Unfortunately, being financially poor reduces your chances of survival. It's probably because going through the welfare system means a longer time is required for diagnosis and treatment. But nutrition is also an important factor. Better nutrition favors survival. So, not only does good nutrition help these women through chemotherapy, but an independent study says it helps their bodies deal better with the cancer itself

#### COLON CANCER

##### Phil's Story

"I couldn't believe the doctor when he said he saw something with the sigmoidoscope and occult blood test that he didn't like during my annual physical," Phil said, and went on to describe his ordeal. "Within two days I was in the hospital for a colonoscopy, biopsy, and, if appropriate, surgery. My wife Jane is a nurse and wouldn't let me put it off another minute. I could barely tell the people at work. I'll never forget how scared I was. It was like drowning. My whole life kept passing in front of me."

##### Colon Cancer

Actually Phil had colorectal cancer, because it was in both his colon and rectum. At age 42, he was young for this type of cancer, because the average age of diagnosis is 52. He was one of the 17 people every hour in the United States who are diagnosed with colorectal cancer. Fortunately, he was not one of the seven who die from it every hour in the United States. By the way, that's every hour, 24 hours a day, seven days a week. Cancer doesn't take time off.

Cancer in the large intestine usually begins as a polyp which looks like a small wart. Polyps turn cancerous at a rate of about 2 percent in the first five years, and then double every few years after. Consequently, about 24 percent are cancerous after 20 years.

Look at the statistics like this: If a hundred people aged 35 lined up, and each one of them had at least one polyp, two of them would have cancer in five years, eight in 10 years, and twenty-four in 20 years. What's bad about intestinal polyps is that you don't feel them. Therefore, the objective of an annual physical is to spot a polyp before it becomes cancerous. The occult blood test is given to detect any polyp that is advanced. By the age of 50, most of us will have at least one polyp.

"I woke up with my wife at my side. She didn't mince words when she told me I would always have a colostomy. At first I wanted to cry, but then I realized that I was alive and that was the first step."

Phil went home and, with his wife's help, learned how to clean his colostomy. He had to irrigate it daily for about an hour to an hour and a half. He used this time to read and has become one of the most widely read people I know. He stuck with his Shaklee program while he was in the hospital and at home preparing for chemotherapy.

"I thought the chemotherapy would be hell. In fact, I was almost going to say 'no' to it, but after reading up on the procedure, I decided the odds were in my favor. I set up a supplement program that made sense to my wife and me, and my doctor didn't object. I used Instant Protein, Vita-Lea, B-Complex, vitamins E and C, and zinc. My doctor told me not to use B-Complex or Vita-Lea when I got chemotherapy. He said one would interfere with the other."

Phil took the doctors advice. He came through the chemotherapy with flying colors. In fact, his doctor personally called me and said he took chemotherapy without any of the major side effects. Indeed, Phil didn't lose his sense of taste, didn't become nauseated, and kept working throughout the chemotherapy.

Since he was just about bald before the chemotherapy, he's not sure if he lost any hair or not. Phil's nutrition program carried him through the entire ordeal. He healed quickly from the surgery and came through chemotherapy with optimism. He regulates the flow through his colostomy by using Daily Fiber Blend and is in excellent health.

#### WHAT'S IN THEIR HEADS

None of these people, and the many others I could have chosen from, came through their ordeals by either wishful thinking or some placebo effect. Each person went through surgery well, recovered quickly, and had an equally healthy experience in either chemotherapy or radiation.

It's hard for me to think of a more difficult experience than to face cancer head on and win. Worse yet is to survive the surgery, face chemotherapy, and then go through it knowing that it's a systematic process to poison your cells with some of the most toxic substances known.

I can't think of a time in life when super nutrition is more necessary. Your body is hurting; you can't absorb nutrients as well as you did; you lose your appetite; toxins are flowing through your veins; and you're scared to death. Words like stress don't come close to describing what's going on.

There's no hope of eating a balanced diet during surgery and chemotherapy. Besides, who can tell you what a balanced diet is for someone under those conditions? How do you get enough of the healing nutrients? I believe there's really one answer: super supplementation!

#### PREVENTION

Cancer can be prevented. Prevention calls for lots of cereal, fruits, vegetables, and moderate exercise. Specific preventive nutrients are vitamins C, E, folic acid, and niacin. The minerals selenium and calcium are also essential. Probably the most widely known preventer is beta carotene, but factors in the cruciferous vegetables rank a close second.

Regularity from fiber is essential to prevention. We need 30 grams of fiber daily and only get about 12 grams. The lack of regularity shows up in many forms of cancer, although it's especially germane to polyp formation.

I urge everyone to purchase a copy of Prescription For Longevity (Pub. E. P. Dutton), which will be released in March 1992. This book discusses prevention in detail.

#### ABOUT THE AUTHOR

James Scala was educated at Columbia (B.A.), Cornell (Ph.D.), and Harvard (Post-doctoral studies) Universities.

He has spent his career in research, research management, and teaching. His accomplishments include over fifty published papers on research in nutrition, biochemistry, and biology. His teaching includes courses for undergraduate, graduate, medical, and dental school students.

As a research manager, Dr. Scala held positions at Procter and Gamble, Owens-Illinois, Unilever, General Foods, and was the Senior Vice-President of Scientific Affairs for the Shaklee Corporation. He now devotes his energies to writing and speaking for the general public.

Dr. Scala lives with his wife Nancy in Lafayette, California. For recreation, they sail the ketch La Scala from its home port on San Francisco Bay.