

**CANCER SCREENING & TREATMENT CENTER
OF NEVADA
CENTURY WELLNESS CLINIC**

JAMES WM. FORSYTHE, MD, HMD
Board Certified Internal Medicine, Medical Oncology and Homeopathy
Compassionate Oncology

**POLY-MVA OUT-COME BASED
INVESTIGATION**

INVESTIGATION TUMOR PARAMETERS

1. Physical Exam – tumors in skin, liver, spleen lymph nodes, etc...
2. X-Rays: tumors detectable in CXR, bone X-Rays, mammograms, etc...
3. CT Scanning: tumors detectable in brain, chest, abdomen, pelvis or bones
4. Ultrasounds: breasts, GB, liver, ovaries, spleen, etc...
5. MRI's: brain, neck, sinuses, joints, breasts, muscles, soft tissues, etc...
6. Pet Scans: total body scanning

INVESTIGATION TUMOR MARKERS

- Bladder - NMP-22, BTA
- Breast - CEA, CA 27-29, CA-15-3
- Colorectal – CEA, CA 19-9, 5HIAA (Carcinoids)
- Esophagus – CEA, CA 19-9
- Gastric – CEA, CA 19-9
- Liver – AFP, CEA, & CA19-9
- Lung – CEA, CA 19-9
- Lymphomas - ESR, LDH, Beta – 2 Microglobulin
- Pancreas – CEA, CA 19-9
- Ovary – CA-125
- Testes – AFP, HCG
- Prostate –PSA, Free PSA

POLY-MVA PROTOCOL BY TUMOR TYPE TOTAL NUMBER OF CASES 500

CANCER ORIGIN	CASES	% SURVIVORS
ALL	2	0
AML	7	14
APPY	3	67
BLADDER	4	75
BRAIN	9	33
BREAST	110	61
CLL	2	100
CRC	62	41
ESOPH	8	25
GASTRIC	6	17
H/N	20	35
HEP/GB	8	12
HOD DIS	5	60
LUNG	65	29
MEL	15	40
MESO	2	50
MYEL	4	75
NE PAN	2	50
NHL	15	80
OVARY	22	31
PANCREAS	20	30
PROSTATE	55	63
RENAL	11	18

SARC	14	42
TESTES	3	67
THYROID	6	100
UTER	19	36
WALD	1	100
TOTAL CASES	500	

5 Year – 500 Patient Study Survival Statistics 223/500

Remission Parameters	CR	PR	SD
TOTAL	38	65	120
FRACTION	38/500	65/500	120/500
%	8	13	24

DOES IV LOADING DOSE OF POLY-MVA MAKE A DIFFERENCE?

- Overall Response Rate in patients on oral Poly-MVA at 30 month mark = 30/75 or 40%
- Overall Response Rate in patients on IV + oral Poly-MVA at 30 month mark = 45/75 or 60%
- Loading dose difference = 20%
- Current 6 year Overall Survival (OS) rate of 32%?

BEST CASES OVER 60 MONTHS

TUMOR TYPE	CASES	HISTORICAL CONTROLS *
BREAST	19	6-12 MONTHS
CRC	4	3-6 MONTHS
HEAD/NECK	6	4-8 MONTHS
HEMATOLOGICAL	7	6-8 MONTHS
LUNG (NSC)	8	3-6 MONTHS
PROSTATE	11	6-9 MONTHS

SAFETY PROFILE FOR ORAL POLY-MVA

NAUSEA / VOMITING	0%
DIARRHEA	< 5%
SHORT OF BREATH	< 5% (40 ml only)
SKIN RASH	0%
ABN LIVER TESTS	0%
ABN RENAL TESTS	0%
TRANSFUSION REACTIONS	< 5%

TOTAL SURVIVORS with Integrative Therapy 5 YEAR - 500 PATIENT FIT STUDY

87/223 = 39%

SUMMARY: POLY-MVA OUTCOME BASED INVESTIGATION

1. This Clinical Oncology “Outcome Based” investigation over a 60 month period was conducted on metastatic cancers of multiple origins.
2. The investigation was voluntary and not double-blinded or placebo controlled.
3. The major parameters included:
 - CR – All Clinical disease in Remission
 - PR – Greater than 50% reduction in tumor mass / markers
 - SD – Less than 50% reduction in tumor mass / markers
4. A 56% at 30 Month and 38% at 60 Month overall response rate (ORR) combining CR +PR +SD.
5. The ORR in patients on Poly-MVA *only* was 40%.
6. The ORR in patients on chemotherapy + Poly-MVA was 60%.
7. These results showed improvement over historical controls.

CONCLUSIONS OF POLY-MVA INVESTIGATION

Poly-MVA is a safe and effective supplement for palliative assistance in stage IV cancer patients either with or without concomitant chemotherapy.

The safety profile is excellent and there were no treatment related deaths or any significant adverse reactions or negative interactions with chemotherapy or hormonal treatments.

An IV loading dose of Poly-MVA confers a 20% improved ORR in this investigation.

The best responding tumors were: 1) Prostate, 2) Breast, 3) Lung,
4) Head/Neck, 5) CRC, and 6) Hematological

Results show an improved Overall Response Rate over historical controls.

Homeopathic Oncology Philosophy

In Stage IV cancers of any origin improvement in *Quality of Life* issues is directly proportional to improvement to overall response rate. Even stable disease can be tolerated and metamorphosed into a chronic livable condition.

This is true provided that this improvement is not gained at the expense of toxic chemotherapy or radiation therapy leaving the patient with many of the following adverse side effects:

- Chemo Brain Syndrome
- Painful Neuropathies
- Cardiomyopathies
- Renal Failure
- Hepatic Failure
- Severe Pancytopenias
- Pulmonary Fibrosis
- Devastating Fatigue, Anorexia and Wasting Syndromes
- Death

This case study report confirms that the “*cure or kill*” approach to cancer treatment is not the only solution.