



**CON IL MALATO,
CONTRO
IL TUMORE.**

www.controiltumore.it
Numero verde 800 903789



Ministero della Salute

Together with:

F.A.V.O., AILAR, AIMaC, A.I.STOM, ANDOS, ANVOLT, ASSOCIAZIONE ANTEA,
FIAGOP, FONDAZIONE GIGI GHIROTTI

This event was organized by:

**Associazione Italiana Malati di Cancro, parenti e amici
Istituto Superiore di Sanità
National Cancer Institute**

National Center for Complementary and Alternative Medicine

Organizing Secretariat:

AIMaC | Via Barberini, 11 | 00187 Roma
Tel. +39 064825107 | Fax +39 0642011216 | info@aimac.it | www.aimac.it



Non-conventional cancer treatments

QUESTIONS AND ANSWERS

Editorial Board members

Francesco De Lorenzo, Claudia Di Loreto, Germana Pitrola (AIMaC)

Andrea Geraci, Stefano Vella (Istituto Superiore di Sanità)

Salvatore M. Aloj (Università di Napoli)

Eloisa Consales, Michelangelo Tagliaferri (Accademia di Comunicazione)

Graphic design

Accademia di Comunicazione Srl

Contributors

Mary Anne Bright

(Cancer Information Service, National Cancer Institute, USA)

Emilio Minelli

(WHO Collaborating Centre for Traditional Medicine, Milano)

Alex Molassiotis

(University of Manchester, UK)

Chris Thomsen

(National Center for Complementary and Alternative Medicine, USA)

Marion Morra

(American Cancer Society)

Alex Molassiotis

(University of Manchester, UK)

Chris Thomsen

(National Center for Complementary And Alternative Medicine, USA)

English version adapted from “Tumori. I trattamenti non convenzionali, dubbi e risposte possibili”.

Contents

PREFACE	2
INTRODUCTION Complementary and alternative medicine: an informative guide. When patients turn to non-conventional remedies	5
CHAPTER 1 When we talk about CAM: let's be clear. Patients and caretakers must know and understand complementary and alternative medicine (CAM)	8
CHAPTER 2 Patients don't talk to their doctors about non-conventional treatments. The use of non-conventional treatments is of kept from doctors under this refraining attitude the are various factors	10
CHAPTER 3 Major complementary and alternative treatments. Non- conventional treatments: There are a vast number of interventions, with new ones being introduced all the time	12
CHAPTER 4 You must talk with your doctor. But you must know what to ask. Useful questions for you to ask about complementary and alternative medicine	28
CHAPTER 5 Information is valuable if the source is reliable. Where and how to get accurate, reliable information	30
GLOSSARY	32
USEFUL ADDRESSES	36
USEFUL LINKS	40
PUBLICATIONS	41
REFERENCES	42

Preface

Cancer patients are living longer and enjoying a better life, due to new, better cancer treatments. However, over 50% of patients turn to 'non-conventional' therapies (also called complementary and alternative medicine). They are looking for relief from the side effects of their treatments or for finding a treatment that will cure them with no risks or pain.

Non-conventional therapies come mostly from traditional medicine that is practiced in countries like India, China, and Japan or from homeopathic treatments that also take into account a patient's emotional state.

Non-conventional therapies, however, are not always harmless. Some times they may interact poorly with conventional therapies or may even be harmful. Patients must be given accurate information about non-conventional therapies, just as they are given with conventional treatments to make informed treatment choices.*

Because of the high use of non-conventional treatment by cancer patients and the lack of information on them, the *Associazione Italiana Malati di Cancro, parenti e amici* (the Italian Association for cancer patients, their families and friends, AIMaC) is providing patients and their families with scientific information about these therapies. It is working with the most authoritative public research institutes - the *Istituto Superiore di Sanità* (Italian Institute of Health, ISS), along with the *U.S. National Cancer Institute* (NCI) and the *U.S. National Center for Complementary and Alternative Medicine* (NCCAM) that are a part of the *U.S. National Institutes of Health* (NIH, USA). The NIH is an important body of the Government of the United States that has been carrying out rigorous research on non-conventional therapies for cancer patients. In 2004, the NIH invested \$140 million in this research area.

AIMaC and the ISS organized a meeting 'Non-conventional treatments for cancer patients - How to provide reliable information'**, held in Rome in December 2005, at which this booklet and its contents were discussed. The Conference convened the foremost experts on this topic

from Europe and the United States. It was organized within the framework of the communication campaign on cancer prevention 'With patients against cancer' (www.controiltumore.it), promoted by the Italian Ministry of Health in cooperation with volunteer-based cancer associations.

This booklet is part of a joint project between the ISS and AIMaC to give cancer patients information about clinical testing and non-conventional medicine. The project is part of the collaboration between the NIH and the ISS, envisaged by the Memorandum of Understanding between the U.S. Department of Health and Human Services and the Italian Ministry of Health.

Francesco De Lorenzo
President
AIMaC

Stefano Vella
Director, Department of Medicinal Products
Istituto Superiore di Sanità

* The importance of non-conventional therapies is the basis of Resolution no. 75 of 29 May 1997 of the European Parliament and Resolution no. 1206 of 4 November 1999 of the Council of Europe.

** The Proceedings of the Conference may be obtained from the Secretariat of AIMaC (Tel. +39 06 4825107) or downloaded from www.aimac.it.



Complementary and alternative medicine: an informative guide

When patients turn to non-conventional remedies

In the last few years, the interest in health-related information has grown widely. The mass media have been paying particular attention to complementary and alternative treatments since, in Italy as in other countries, patients have been turning more and more to these therapies. The number of therapists who offer such remedies also has grown.

People's awareness and interest in a better quality of life has brought out an emphasis on regular lifestyles and healthy food, along with seeking less aggressive treatments that focus on the balance between body and mind.

In facing the various cancer treatments, patients increasingly feel the need to direct their attention not only on their physical condition, but also to body-and-mind issues. This has brought about an increasing interest in the so-called non-conventional therapies which, besides acting as support for traditional treatment, may contribute to improving their quality of life.

It has been found that these therapies are increasingly being used not only in the United States, but also in Europe. A study carried out with 956 cancer patients in 14 European countries including Italy¹ found our country topping the list in number of patients who have used non-conventional therapies. Yet, even though these non-conventional therapies are extensively used, in Italy information and funds for research

In cancer, there are many alternative proposals, many methods of intervention

The following pages provide information and descriptions of complementary and alternative treatments for cancer, along with advice on how they are used

and testing of non-conventional therapies are still in their infancy. In contrast, in countries like the United States, large investments have been made in this research area by major research bodies like the National Cancer Institute (NCI).

As a result, a growing amount of information from the results of this research is now available. This is information that patients who are trying to make a choice about complementary and alternative medicine

This publication is dedicated to

patients and to their families who seek non-conventional remedies as a means for easing their stress and suffering from cancer

(CAM) can use. However, there is a lack of discussion on this issue between doctors and patients. All too often, the caution exercised by the medical profession is interpreted by the patients as a form of

hostility towards therapies whose validity has not yet been fully confirmed by scientific trials.

It is crucial that CAM be used in full agreement with the patient's physician in order to avoid the stress on the patient who seeks to 'hide' their choice of using non-official remedies, and the potential risks that may derive from these treatments.

This booklet is aimed at helping patients and their families gain a more thorough understanding of these forms of therapy. It also will help guide them to find the information needed to help integrate, wherever possible, conventional and non-conventional treatments. Patients must be aware of the problems of drug interactions that can occur when different medicines are used, whether conventional or not. When drugs that have different compositions are taken, the activity of each product can be altered, resulting in reducing or even enhancing their effectiveness.

Some major scientific institutions have shown an interest in the use of complementary and alternative treatments, and have sought to draw up guidelines to direct patients and therapists. The National Federation of the Associations of Surgeons and Dental Surgeons (FNOM-CeO) (www.omceo.to.it/fnomceo.htm) has established nine non-conventional practices and medicines currently acknowledged as having medical validity in Italy:

1. Acupuncture
2. Phytotherapy
3. Ayurvedic Medicine
4. Anthroposophic Medicine
5. Homeopathic Medicine
6. Traditional Chinese Medicine
7. Homotoxicology
8. Osteopathy
9. Chiropractic

The World Health Organization (WHO) (www.who.int) has noted that:

- national governments need to monitor this situation
- they need to use scientific results to implement a progressive integration among the several therapies, and
- they must spread as much information as possible on the correct use of medicinal products and on their side effects.



When we talk about CAM: let's be clear

Patients and caretakers must know and understand complementary and alternative medicine (CAM)

What is meant by conventional and non-conventional treatment?

TREATMENT (OR THERAPY): covers all the practices used to improve the patient's physical condition and quality of life. Treatments can be:

- **conventional:** methods used by doctors such as surgery, radiotherapy and chemotherapy. These treatments have been confirmed by many clinical trials. Their effectiveness is widely acknowledged;

- **non-conventional:** These methods

are not included among conventional treatments. They are divided into two categories:

- a) **complementary treatments:** (also called integrative treatments), used in addition to conventional cancer treatments;
- b) **alternative treatments:** (also called unproven treatments), used instead of conventional treatments.

The distinction between complementary and alternative treatments is not strict. They are classified as one or the other depending on how they are used - whether they are a complement to or replace another treatment. For instance, approaches that involve the body, the mind and the spirit of the person (such as Chinese, ayurvedic medicine, etc.) can be classified as integrative treatments.

Some complementary treatments are available in various facilities of the Italian Health Service.

A list of these (updated in May 2005) is available on the Region of Tuscany website

Essential vocabulary

- Conventional treatment
- Non-conventional treatment
- Complementary treatment
- Alternative treatment
- Integrative treatment

(www.sanita.toscana.it). The outpatient clinics provide treatments such as acupuncture, homeopathy, phytotherapy, traditional Chinese medicine, Bach flowers, shiatsu massage, reflexology, homotoxicology, Qi Gong, Reiki and dance therapy.



Patients don't talk to their doctors about non-conventional treatments

The use of non-conventional treatments is often kept from doctors under this refraining attitude the are various factors

Why do patients use CAM? Cancer patients use CAM:

- to gain greater control over the side effects of cancer treatment, such as nausea, pain and fatigue;
- to reduce anxiety and stress;
- to take a more active role in making decisions about their in treatment;
- to try out different ways of treating their cancer;
- because they have lost confidence in conventional treatments.

Sometimes patients are not happy with the relationship they have with their doctors. Doctors do not have enough time to fulfill the patient's

needs. Patients feel they need more detailed information about the disease, its course and what the treatment will mean?

Patients often also feel that their doctors are biased against CAM. This might be because many patients who have used or are using CAM do not to talk with their doctors about it. Often patients have made the decision to use CAM on information from friends, relatives or the mass media.

This can be dangerous. It can have negative consequences, especially when the non-conventional treatment interferes with the conventional treatment or when the patient stops using conventional treatment in favor of the non-conventional one.

It is always important to talk to one's doctor before making any decision involving treatment. This is a very crucial

Doctor-patient relationship

By improving it, patients can find ways of talking about complementary and alternative treatments. Not talking about them is a mistake.

point because what may seem to be harmless - such as some supplements and drugs - may indeed interfere with the conventional cancer treatment the patient is receiving.

What patients hope for when choosing non-conventional treatments:

To gain better control over side effects

To reduce anxiety

To play a more active role in their fight against cancer

To fight against the disease

What they fear

The skepticism of doctors

The ineffective results of treatments with traditional medicine



Major complementary and alternative treatments

Non-conventional treatments: there are a vast number of interventions, with new ones being introduced all the time

The most common complementary and alternative treatments that cancer patients usually use can be divided into three groups:

- **support treatments based on a psychological approach**
- **manipulation**
- **biological methods**

It is important to remember that, while some of these treatments can help improve well-being and coping with the disease, **there is NO scientific evidence available yet to prove that these treatments can block tumor**

growth, facilitate healing or replace conventional medical therapy.

SUPPORT TREATMENTS BASED ON A PSYCHOLOGICAL APPROACH* - WHAT IS MEANT BY THE PSYCHOLOGICAL APPROACH?

The main purpose of the psychological approach is to help cancer



patients and family members have the best quality of life possible, by helping them manage the stress associated with cancer treatment. Depending on age, stage of disease, and treatment,, patients and family members face different types of psychological, social, and spiritual problems.

In particular, the psychological approach aims at:

- helping patients and family members manage the stress related to the diagnosis of cancer and its various treatments,
- relieving anxiety and depression and helping patients draw on their psychological resources necessary to face the disease,
- helping family members integrate the experience of cancer into their lives, develop positive and functional ways of going about daily life, and, when necessary, helping the family process the loss of a loved one.

Psychological support can be provided to the individual or to a group.

The term 'group' can refer to a group of patients or to the family. Since the diagnosis of cancer can upset the balance

of the entire family system, emotional support to family members can help them adjust to the new situation. There are both self-help/mutual aid initiatives and those led by psychologists and psychotherapists.

Self help/mutual aid groups

In many Italian towns, self-help/mutual aid groups are organized by charitable and patient associations. The common purpose of self-help groups is to transform those who ask for help into people who are capable of providing help to others. These groups of people (patients and family members) share the same concerns. Through an approach basi-

Bear it in mind!

It is risky to claim that CAM is capable of stopping tumor growth or of facilitating healing. But it is reasonable to maintain that some treatments do contribute to improving the patient's quality of life and ease the side effects of therapy.

* Special thanks to Dr. L. Murru and M. Tamburini (Psicology Unit National Cancer Institute Milan) and Dr. R. Tancredi (AIMaC).

cally linked to direct experience, they stimulate each other to receive and deliver care. Three factors comprise psychological assistance:

- **exchange of information**
- **emotional and instrumental support**
- **identifying with the other members.**

Many self help/ mutual aid groups are made up of women who have had breast cancer.

GROUPS LED BY PSYCHOLOGIST AND PSYCHOTHERAPISTS

The groups that provide psychological support in which the patients work with a mental health professional can be classified in three large areas:

- **health information and health education groups**
- **groups with a cognitive and skill learning focus**
- **existential support groups.**

By using psycho-learning techniques, health information and health education groups focus on the role of information to be delivered to patients and on processing of patients' emotions.

The groups with a cognitive and skill learning focus use meditation skills, such as relaxation and guided imagery or visualizations.

Relaxation is achieved through a series of methods that help the participant reach a state of relaxation, releasing muscle tension and restricting the perception of stressful stimuli both within and outside the individual.

Guided imagery or visualization, uses the imaging of positive scenes or experiences that can influence the body and physical perceptions. Images that are mainly visual and auditory and individual to each participant are used to induce a state of relaxation, to offset the side effects of treatment (e.g., nausea and vomiting), and to stimulate an immune reaction.

Support groups are not usually uniform. They are made up of people with different diseases. They focus on the experience of being affected by a disease and provide the opportunity to share the person's own experiences.

PSYCHOLOGICAL APPROACHES

The psychological approaches used in oncology, both individually and in groups, can be broken down into four types of intervention, using different techniques (see Table 1):

- **PSYCHO-LEARNING TECHNIQUES** focus on the importance of having correct information about the disease and its treatment, as well as on the expression of one's emotions. The aim of this technique is to promote a clearer understanding of the situation by working on the fear and anxiety often brought on by misleading information, and to increase the possibility of exercising control over the events experienced;
- **COGNITIVE TECHNIQUES** work on the meaning that patients attribute to the disease, on how they evaluate the experience, on patients' feelings of powerlessness and on the expression of negative emotions. The aim of cognitive techniques is to modify the wrong beliefs and to encourage patients to control the situation/cancer and adapt to it;
- **BEHAVIORAL TECHNIQUES** make use of skills that favor a greater harmony between patients and their bodies, helping them to manage symptoms;
- **PSYCHO-DYNAMIC TECHNIQUES** tend to reduce the discomfort through the patient's narration; they rely on the psychotherapist's empathy and interpretation.



There is no scientific evidence showing that one psychological approach is better than any other. All of these methods can bring real benefits to the quality of life of cancer patients and their families. Today an increasing number of hospitals provide professionals who can offer psychological support to cancer patients and to their family members who ask for assistance.

MANIPULATION. According to studies carried out by the National Center for Complementary and Alternative Medicine (NCCAM), massage, acupuncture and other manipulation techniques are often effective in relieving pain in patients with advanced cancer³. In Italy, the accredited therapists who practice these forms of treatment are registered with the professional associations (see Useful addresses).

ACUPUNCTURE. This method is an integral part of traditional Chinese medicine and consists in the insertion of thin sterile needles into specific body areas. The needles influence the flow of energy that runs along the so-called *meridians* that cross the body, improving the patient's state of health. Various studies have demonstrated that during acupuncture sessions, the body releases endorphins, natural substances that alleviate pain and foster muscle relaxation. In cancer patients, acupuncture is useful for relieving pain. It also can relieve other side effects like edema (swelling), nausea⁴⁻⁵, and dry mouth which is often present after radiotherapy⁶⁻⁷; Acupuncture, in addition, can raise the white cell count and improve some motor disorders⁸. In Italy, acupuncture is a practice that is growing. In deciding to try this type of treatment, choose only acupuncture physicians who are registered with the main professional associations.

We recommend that you check that list of the Association of Physicians of the Province in which the doctor practices to make sure that the physicians you go to are certified and registered.

Types of psychological intervention for cancer patients

TYPE OF INTERVENTION	METHOD AND STRATEGY	GOALS
Psycho-learning skills	Information on disease, treatments, clinical trials, management of side effects and emotional aspects	<ul style="list-style-type: none"> · Increase knowledge about the disease and about treatments · Enable the patient to have a sense of control on the experience of the disease · Increase compliance with therapeutic treatment · Help solve practical problems · Facilitate communication with the therapeutic team
Cognitive techniques	<ul style="list-style-type: none"> · Analysis of beliefs about the disease · Mental restructuring about the disease and treatments 	<ul style="list-style-type: none"> · Express thoughts and feelings about the disease with words · Help face the existential issues prompted by the disease · Change the mental processes and ensuing failure to adapt to the new situation
Behavioral techniques	<ul style="list-style-type: none"> · Relaxation (autogenous training, progressive muscle relaxation) · Systematic desensitization · Biofeedback · Visualization of mental images · Hypnosis · Recreation and planning activities 	<ul style="list-style-type: none"> · Reduce the psychological stress · Develop more functional and positive modalities for facing treatment and for coping with the disease · Reduce the intensity of the side effects of therapy · Facilitate the treatment process
Psychodynamic techniques	<ul style="list-style-type: none"> · Exploration of emotional conflicts existing prior to the disease · Analysis of the disease in the light of unconscious psychic dynamics 	<ul style="list-style-type: none"> · Clarify the influence of experiences dating back to before the disease · Help the patient integrate the disease into his/her life experience

MASSAGE. Massage facilitates relaxation, relieves pain and muscle tension and offers relief through physical contact. It can especially provide relief to patients who are hospitalized or spend much of their time in bed. There are a variety of massage techniques; those most widely practiced are:

- **SHIATSU:** a well-known oriental technique aimed at stimulating specific areas of the body;
- **ACUPRESSURE:** based on the involvement of the same body points used in acupuncture. According to a United Kingdom study, by applying special bracelets that compress acupoints on the arms, the nausea and vomiting from chemotherapy are reduced⁹;
- **AYURVEDIC MASSAGE:** based on a thousand year-old tradition of ayurvedic medicine. Its specific characteristic lies in the use of special oils that are typical of the Indian tradition;
- **PLANTAR REFLEXOLOGY:** a special massage that stimulates the sole of the foot. According to the oriental tradition, there is a link between the internal organs and the sole of the foot, which comprises a map of the various organs. By putting pressure on specific points, some functions of the body can be changed, such as relieving disorders like pain, constipation and nausea.

There are several types of manipulations that can help ease physical pain:

Acupuncture
Massage
Aromatherapy
Osteopathy
Chiropractic

It is important to talk with your doctor before you have a massage since some conditions, such as acute inflammation of the veins (*phlebitis*) can be made worse.

AROMATHERAPY. This method consists of applying highly concentrated oils (*essential oils*) from plants when doing a massage. Essential oils

also can be inhaled, applied in the form of compresses or used in relaxing aromatic baths. Aromatherapy has proven to be useful in the treatment of stress, depression and insomnia. Essential oils can be taken orally, but since they may cause irritation, they are to be prescribed by a doctor. In addition, if taken in excessive amounts, they may cause severe damage, such as kidney complications, hallucinations, seizures, and irritation.

OSTEOPATHY. This method originates from the studies of Andrew Taylor Still (1828-1917), a physician who believed that diseases are the expression of a muscle and skeletal dysfunction. By manipulating the skeleton, incorrect postures can be modified and the function of the damaged structures can be improved.

Cancer patients may go to osteopaths to solve motor problems that are caused by not moving for a long time. Check to make sure that the osteopathic doctor has a post-graduate European certificate or is a certified paramedic in a specialized clinic.

CHIROPRACTIC. This technique acts through spinal manipulation and is practiced by chiropractic doctors. These treatments can reduce the stress and muscle tension that is often caused by cancer.

BIOLOGICAL METHODS

There are several biological methods used by cancer patients:

- Homeopathy
- Physiotherapy
- Bach flowers
- Vitamins, megavitamin treatments, supplements
- Diets
- Others elements: shark cartilage, laetrile

If you wish to find a physician who practices homeopathy, acupuncture or phyto-medicine, contact the Association of Surgeons and Dental Surgeons of the Province of Rome. It has lists of professionals that practice in these areas.

HOMEOPATHY. This therapeutic practice was proposed by Samuel Hahnemann in 1796. He noticed that very high doses of the drug cinchona caused the symptoms of malaria. The effects were the opposite when it was given at normal dosages. Thus, he established the principle underlying homeopathic therapy that is, giving substances that are capable of producing symptoms similar to those of the disease that they are intended to treat. The preparations, called remedies, are given in minute doses. The effective dose has to be identified on a case-by-case basis, and at times it takes several attempts. (See Table 1 for a listing of remedies and their uses)

Homeopathic remedies could supplement conventional therapies, but **they must - in all cases - always be prescribed by a homeopathic doctor.** The doctor must evaluate whether there are indications for using homeopathy and, after a thorough examination, identify the substances that best suit the specific case.

A homeopathic examination includes the physical and psycho-emotional conditions of the patient. Treatment is prescribed based on this comprehensive evaluation.

Remedies used in homeopathy¹⁰

VEGETABLE ORIGIN

Ipeca	Nausea and vomiting
Nux Vomica	Drug intoxication
Arnica montana	Vascular congestion caused by the repeated IV administration of medicinal products ¹¹⁻¹²
Hypericum	Neuralgia
Ignatia	Mild panic attacks

MINERAL ORIGIN

Kalium carbonicum	States of exhaustion, asthenia and debilitation ¹³
Magnesium	Anxiety, muscle cramps, debilitation ¹³
Natrum muriaticum	Melancholy and depression, dryness of mucosae; lack of appetite ¹³

ANIMAL ORIGIN

Lachesis mutus (extract from snake poison)	Acute inflammation, reabsorption of edemas ¹³
Apis mellifica (whole bee tincture)	

PHYTOTHERAPY. Phytotherapy uses parts of the plant like the leaves, roots, flowers, buds and the bark, or the whole plant. It also may include extracts of active vegetable substances to prepare pharmaceutical products. Many conventional cancer drugs such as vincristine and vinblastine, commonly used in chemotherapy, are obtained from plants.

In recent years, there has been a considerable increase in research on substances of plant origin with the aim of demonstrating their efficacy in preventing and treating cancer. The National Cancer Institute and the National Center for Complementary and Alternative Medicine have been the most active in this field. A considerable proportion of their budgets finance complementary and alternative treatment trials of plant and herbal preparations that are carried out according to protocols like those used for conventional medicine. Table 2 lists some studies that are currently under way.

Artemisia	Obtained from Chinese woodworm and long known for its anti-malaria action. Prevention of some tumors of the uterus
Ginseng	Enhancing the response of the immune system ¹⁴⁻¹⁵
Soia	Prevention of breast cancer
Tè verde	Prevention of prostate tumors
Astragalo	Typical plant in Chinese tradition. Stopping the proliferation of tumor cells in vitro ¹⁶⁻¹⁷
Boswellia serrata	Plant widely used in China and India. Treatment of glioblastoma multiforme (brain tumor)
Ganoderma lucidum	Fungus widely used in China and Japan. Treatment of prostate and breast cancer ¹⁸⁻¹⁹
Scutellaria barbatae	Long used in China. Treatment of breast cancer
Valerian	Treatment of lymphatic leukemia and cancer of the bladder
Viscum album (vischio)	Treatment in combination with chemotherapy for some types of tumor
Trametes versicolor	A type of fungus. Action on the immune system
Zenzero (o ginger)	Anti-nausea and anti-vomiting

MISTLETOE. This plant belongs to the tradition of anthroposophic medicine. It has been observed that its extracts stimulate the response of the immune system²⁰⁻²¹. It is being widely used by cancer patients with various types of tumor: breast, lung, kidney, bladder, colon, uterus, ovary, and skin cancer, especially in Germany, Austria and Switzerland. In various clinical trials it has also been found to increase the white cell count. Cycles of treatment of mistletoe extract can be delivered orally or by IV.

However, it has been scientifically demonstrated that some phytotherapeutic agents interfere with cancer treatments because they act as cytochromes, structures that are present within liver cells, where medicinal products are normally metabolized²².

Garlic	Commonly used against high blood pressure, bacteria and parasites
Echinacea	Used for topical inflammation (e.g. tonsillitis) and for common cold
Ginseng	Used as tonic in the case of psycho-physical fatigue
Hypericum (or St. John's herb)	Used for mild depression, it reduced the metabolism of irinotecan, a drug used to treat some types of cancer ²³
Valerian	For mild anxiety
Soy	In menopause for high cholesterol levels
Ginkgo biloba	In Alzheimer's disease and in Claudicatio intermittens
Serenoa	Used for prostatic hypertrophy
Vitis vinifera (or common vine)¹²	Used as adjuvant in high blood sugar levels

Essiac is a cocktail of herbs (burdock, elm, wood sorrel and Indian rhubarb) developed by a Canadian nurse, Rene Caisse, whose surname, read back to front, gives the name to the product. The advocates of this therapy claim that it is a cure for cancer and other diseases. However,

several studies carried out by the National Cancer Institute have rejected such statements, reporting only that some components have antioxidant and immune-stimulation properties²⁴.

People use these products because they believe they will prevent cancer or will provide relief

Homeopathy
Phytotherapy
Bach flowers

BACH FLOWERS. This method is named from the English physician Edward Bach, who developed it over 60 years ago. It is believed to act on the psychology of the patient. It improves moods such as melancholia, aggressiveness, fear and sense of loneliness. Flower therapy uses 38 flowers of different plant species including elm, olive, pine, gentian, chicory and oak. This treatment includes a series of interviews with the specialist (doctor of naturopathic medicine or flower therapy doctor), who identifies the flowers that are best suited to each case.

VITAMINS, MEGAVITAMIN TREATMENTS, SUPPLEMENTS. Some vitamins are necessary for a healthy body. Since the body is not capable of producing them, the main source for daily needs is from the food we eat. Megavitamin therapy is the use of high doses of vitamins (in particular A, C and E). It is based on the theory that if a small amount of these substances is useful, a higher dosage will give even better results. However, the usefulness of large amounts of vitamins for tumor prevention and treatment has not yet been established. On the other hand, several clinical trials offer scientific evidence that large doses of some vitamins (for instance vitamin A) may cause severe diseases*. A balanced and varied diet is the rule of thumb for good health. The National Cancer Institute is currently carrying out a series of studies and clinical trials to establish whether vitamins have a preventive and/or curative action on some cancers.

* It has been shown in recent times that fenretinide, a vitamin A derivative, reduces by 50% the risk for secondary breast cancer in women under years of age.

Current Studies and Clinical Trials on Vitamins²⁸

Vitamin	Effect Being Tested
Vitamin D (synthetic analogs)	Prevention of breast cancer
Vitamin D (active form of calcitriol)	Preventive treatment of breast, ovary, prostate and colon cancer
Vitamin D with acid fats and omega 3	Prevention of breast cancer
Valerian	For mild anxiety
Diets without folic acid	Colon cancer

One study, being carried out at the Roswell Park Cancer Institute (New York)²⁶, is testing the in vivo and in vitro anti-proliferating action of vitamin D. It is assessing the efficacy and mechanisms of vitamin D in combination with chemotherapeutic agents or with other cytotoxic drugs. The results to date in vitro demonstrate that vitamin D enhances the anti-tumor effects of many cytotoxic drugs and inhibits the motility and invasiveness of tumor cells and the formation of new vessels.

Food supplements, including antioxidants (in particular vitamins C and E), must be used carefully because they may interfere with chemotherapy²⁷. Thus **they should not be administered to patients undergoing chemotherapy and/or radiotherapy**.

DIETS. The amount and kind of food people eat has a relationship to cancer. In general, research data tell us that diet accounts for about one third of all cancers.

A diet rich in fruit and vegetables and fiber-rich foods is useful for preventing cancer. Eating more fish and white meat, and less red meat, can contribute to reducing cancer risk. Studies are under way to establish whether certain foods - such as fish oil, linseed, lycopene (contained in tomatoes and other foods), the sulphur-radish contained in broccoli - may have a preventive effect⁹.



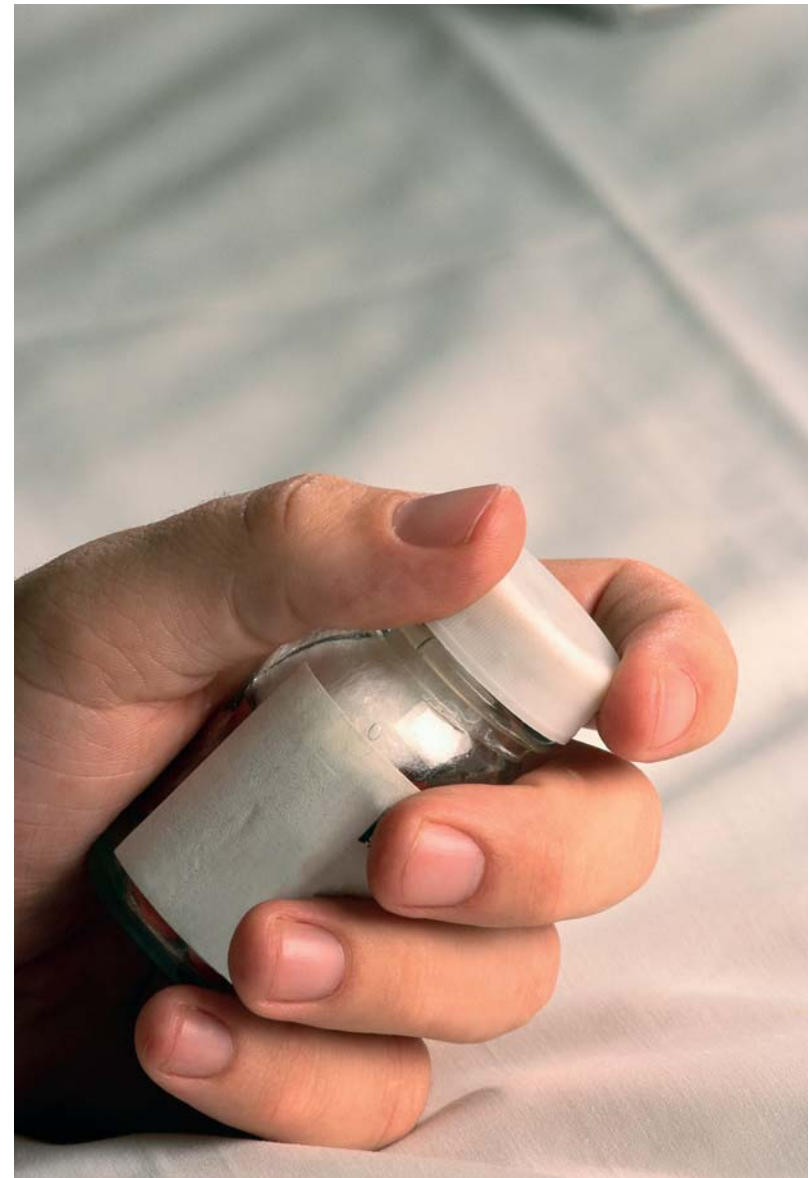
To date, there is no evidence showing that there are foods or special diets that can treat cancers. In general, it is not advisable to eat excessive amounts of any food.

OTHER PRODUCTS

SHARK CARTILAGE. Cartilage is a tissue found close to bones and joints. Shark cartilage is often considered a food supplement. It has been widely used in the United States where it was believed to contribute to curing cancer. According to some tests on laboratory animals, this substance seems to enhance the immune system and inhibit the growth of new blood vessels, thus the tumor, deprived of its blood supply, dies²⁸. However, it has been demonstrated that a form of cartilage (also called Neovastat or AE-941) can neither prevent nor cure cancer²⁹⁻³¹.

LAETRILE. Also called amygdaline, or vitamin B17, or laevomandelonitrile. Laetrile is a substance contained in the seeds of almonds, apricots and other fruit. It was believed to have anti-tumor activity because of its selective toxic action against cancer cells. These cells contain an enzyme that is capable of breaking down laetrile thus producing cyanide, a substance that is lethal for all cells. Its clinical efficacy, however, has not been demonstrated.*

* During the 1960s the California Cancer Advisory Council examined 100 cases of patients treated and concluded that laetrile has no real benefit or effect against cancer³². In 1982 clinical trials carried out by the National Cancer Institute on the long-term administration of laetrile in patients with breast, colon and lung cancer found the treatment to be ineffective, with some patients presenting symptoms of cyanide poisoning.



You must talk
with your doctor.
But you must
know what to ask

Useful questions for you to ask about complementary and alternative medicine

There are many questions to ask about these treatments. Here are some basic ones to start your conversation with your doctor. You can add others based on your present treatments.

Which complementary and alternative treatments could:

- help me control and reduce my stress levels?
- help me feel less tired?
- help me control the symptoms of my disease and treatment side effects, such as, pain and nausea or vomiting?

If I decide to try a non-conventional treatment:

- will this interfere with my present treatment or the drugs I am already taking?
- where can I get articles that can give me more information on these treatments?
- can you suggest a professional who is registered with the professional associations that I could go to?
- are you willing to cooperate with the CAM therapist?

If you decide to find a cam therapist, be cautious.

Find out whether the professionals that you choose are registered with the professional association.

- Ask your doctor or the health staff of the centre where you are receiving treatment to suggest where you should go;
- Ask the hospital where you are receiving treatment whether it has a list of organizations or names of experts;
- Whenever possible ask the scientific associations or the professional organizations (see list of useful addresses);
- Ask the Provincial Doctors' Associations for their lists of homeopath-

ic doctors, acupuncturists and phytotherapists).

Questions you can ask the CAM therapist

- What complementary and alternative treatments do you practice?
- Are you treating other patients with the same type of cancer?
- What professional organizations of non-conventional therapies are you registered with?
- Are you willing to cooperate with my doctor?

Important questions to ask the CAM therapist about the non-conventional treatment you will receive:

- Will this treatment interfere with the cancer therapy I am receiving?
- Are there any contraindications?
- What are the potential risks and side effects?
- What are the benefits of the treatment?
- Have trials been carried out to prove its efficacy?
- How long will it last?
- How much will it cost?
- Where can I get information and scientific articles about the treatment?

Natural does not mean always harmless

Supplements and natural products may be dangerous even though they are said to be harmless. It is therefore essential to ask the doctor for information.

Information is valuable if the source is reliable

Where and how to get accurate, reliable information

Information is an important part of the care provided to cancer patients. Information about non-conventional therapies must always be scientifically rigorous, up to date and document-

ed. For this reason it is absolutely necessary to make sure that the source of the information - whether you find it in newspapers, journals, or on the Internet - is credible and reliable.

Find credible sources for information

Do not trust products advertised by people or companies that:

- claim they have the **very** treatment you need;
- do not provide specific information about the effectiveness of the product;
- speak only about the positive results with few side effects;
- claim clinical trials have been carried out but do not provide evidence or articles about the trials.

INTERNET SITES

The internet has made huge amounts of information available, including hundreds of web sites about non-conventional therapies. However, much caution needs to be used. There are many web sites that are reliable, such as those sponsored by institutions. However, many others are misleading or entirely false³³.

When you visit an Internet site or doing research on non-conventional treatment ask yourself:

- Who runs and pays for the site?
- Does the web site represent a known and respected organization?
- What is the aim of the site and whom does it address?
- Where does the information come from?
- Does the website provide information or is it trying to sell a product?
- Does the website present credentials of the authors of the information??

- Is the information provided based on facts or does it reflect only someone's ideas and opinions?
- Is the information approved by a scientific committee or by experts of the subject?
- How often is the information updated?
- Is the date of the last update provided?

Lots of information.
How you can evaluate it

Whether it is from the Internet or from books and journals, there is a way to understand whether it is reliable. All you have to do is ask the right questions.

BOOKS AND JOURNALS

Material providing information about non-conventional therapies can be found in the libraries of most centers for cancer research and treatment. It also may be found in public libraries. There are also many specialized journals and publications. Many are written in technical medical language that might be difficult to understand.

The general rule to follow is that non-conventional treatment, must always be prescribed by a doctor to make sure it is compatible with conventional therapies.



Glossario

ATROPHIC: physiological or pathologic reduction of the volume of an organ or tissue.

AYURVEDIC MEDICINE: one of the most ancient medicines in the world. The term ayurvedic derives from the Sanskrit and means science, or knowledge of life (from *Ayus* = life and *Veda* = knowledge). According to the ayurveda, health is not only the absence of disease, but it is a state of physical, mental and spiritual balance and harmony with the environment. Diseases are due to a condition of imbalance and can be treated only by reinstating the system of physical-mental-spiritual equilibrium and helping the body to reawaken its self-healing potential.

BASIC RESEARCH: also called pure or fundamental research/ Its primary objective is to advance knowledge and the theoretical understanding of the relationships among variables at play in a given process. It is exploratory in nature and is often led by the curiosity, interest and insight of the investigator. Basic research is carried out without a practical aim in mind, even though its results may have unexpected applications in practice. The expression 'basic' indicates that, through the generation of new theories, basic research provides the foundations for further research, often for practical purposes. *Applied* research instead, is carried out with the goal of finding practical and specific solutions. Its main aim is not to advance knowledge but to exploit knowledge for practical purposes. *Chemotherapy:* treatment that kills tumor cells by administering medicinal products that may be taken in the form of tablets, or injected intravenously or intramuscularly. Chemotherapy is defined as a systemic treatment because the medicine spreads throughout the body, reaching and destroying cancer cells that have spread. When the chemotherapy agent is administered directly into the spinal cord, into an organic cavity such as the abdomen, or inside an organ, it acts primarily on the tumor cells in that region. This mode of administration is defined as *loco-regional chemotherapy*. The mode of delivery depends on the type and stage of the tumor.

CLINICAL TRIAL: research carried out on human beings with the aim of verifying the clinical and pharmacological effects, as well as the adverse reactions, of a medicinal product.

COMPRESSES: therapeutic practice using pads, linen, or gauzes that are soaked in cold or hot water or in a medicinal substance. The compresses are wrapped around parts of the body for therapeutic purposes.

CONSTIPATION: slowing down or absence of bowel movement.

CONTRAINDICATIONS: circumstances advising against the use of a medicinal product or a treatment.

CYANIDE: a highly toxic substance that blocks cell respiration resulting in the destruction of the organs involved.

ANTIBACTERIAL: medicinal product or substance that prevents the growth and reproduction of bacteria. Synonyms: antibiotic, antiseptic.

ANTIOXIDANT: chemical or other substance that inhibits or delays the oxidation of the substance to which it is added.

CYTOCHROME: protein produced by the liver whose function is to make medicinal products more soluble.

CHROMATOPHORE: cell containing granules of pigment (iris, skin, choroid).
Skeletal muscle dysfunction: physical and/or functional impairment of the locomotor apparatus (bones, joints, tendons and muscles).

ENDORPHINS: substances produced by the brain that naturally raise the pain threshold. The endorphin level varies from one individual to another; this means that those who produce less endorphins are more sensitive to pain. By lessening the feeling of pain, endorphins have a positive influence on mood.

IMMUNOMODULATOR: medicinal product used to regulate the immune system.

IMMUNOSTIMOLANT: medicinal product used to enhance the activity of the immune system.

IMMUNE SYSTEM: all the organs, cells and molecules that make up the defence system of the body. Antibodies, are an important element in the immune system. Antibodies are proteins produced by a specific type of cell called a lymphocyte, in reaction to the presence of an antigen, a substance that the body recognizes as being foreign. The antibodies therefore attack the antigen to neutralize it.

INSOMNIA: difficulty or inability to sleep.

HOMOTOXICOLOGY: derives from traditional homeopathy revisited by H. H. Reckeweg, (1905-1985). According to this theory, a state of disease is caused by a molecule called homotoxin, either produced by the body or coming from the outside, which is capable of causing biological changes. Homeopathic remedies in this case support the action of the organs that are supposed to purify the body.

HYPERGLYCAEMIA: increase in blood sugar levels. Often it is synonymous with diabetes.

JOINTS: structures that link two or more bones.

LYCOPENE: (isomeric compound) it is a bright red carotenoid pigment found in tomatoes, rose hip and in the chromatophores of some animals.

ANTHROPOSOPHIC MEDICINE: evolved from the theories formulated by the Austrian Philosopher Rudolf Steiner (1890-1925), who merged the Indian and Christian mystique to develop a holistic therapeutic system. Anthroposophy, or science of the spirit, is based on an occult physiology which contemplates the presence of subtle bodies. Anthroposophic medicine makes use of medicinal products that are typical of the homeopathic tradition and of plant therapy, with some variants in the preparation techniques. He introduced new concepts such as 'vegetabilized' metals, that is plants that grow in the presence of a metal. In addition, Steiner highlighted the therapeutic effects of mistletoe as an immunomodulator. His ideas have contributed to the development of art therapy (painting, modelling), of eurythmics (special dance and/or therapeutic movements) and biodynamic agriculture.

ESSENTIAL OIL: product obtained through extraction from aromatic plants, and for this reason it is rich in essences. The extraction methods are distillation in steam currents, cold pressing and dry distillation.

OXIDATION: reaction in which a substance acquires oxygen and loses hydrogen.

MANIPULATION: synonymous with manual therapy (massages, chiropratic etc.).

MEDITATION: careful and deep reflection on a thought.

MERIDIANS: invisible canals which convey vital energy (Qi) across our body. They run along the major axis of the body in the vertical direction, each along an ideal path which unites the various points that are used in acupuncture. The main meridians are 12; each is linked with the following meridian through a network of internal meridians.

NEOPLASTIC DISEASE: means tumor, cancer, neoplasia.

NEOPLASTIC DISORDER: synonymous with tumour, cancer, neoplasm, tumoural disease.

OEDEMA: excessive accumulation of fluids in tissues that results in an increase in volume of the area involved.

PROPHYLAXIS: set of health precautions to prevent the disease from spreading.

NEOPLASTIC DISEASE: means tumor, cancer, neoplasia.

OEDEMA: excessive accumulation of fluids in tissues that results in an increase in volume of the area involved.

RADIOTHERAPY: treatment that consists in delivering high-frequency radiations to destroy cancer cells and reduce the size of the tumor. There are two types of

radiotherapy: external radiotherapy in which the machine that delivers the radiation is outside the body and the radiation is targeted to the area of the tumor; internal or intracavity radiotherapy, in which the radioactive substance (called radioisotope) can be delivered directly into the lesion or close to it. The mode of delivery of the radiotherapy depends on the type and stage of the tumor.

REMEDY: term which is commonly used to indicate homeopathic medicinal products.

SCIENTIFIC COMMITTEE: body made up of experts with proven experience in a given field appointed to prepare and implement scientific initiatives (e.g. organize a conference, the publish a journal, etc.).

SELF-MEDICATION: taking medicines without consulting a physician; self-medication or over-the-counter products are the medicinal products that are sold without a doctor's prescription to treat minor occasional and short-lived disorders.

SIDE EFFECTS: any effect of a medicinal product that occurs at the doses normally used in human beings and that are related to the pharmacological properties of the medicinal product (taken from www.medicinalproductvigilanza.org/corsi/servello/corso_13.htm).

SUPPLEMENT: food product that supplements a normal diet and which is a concentrated source of nutritional substances, such as vitamins and minerals.

SYMPTOM: pathologic event which, alone or together with other pathologic events, is indicative or characteristic of a disease (taken from I Grandi Dizionari - L'Universale; Dizionario italiano di delfino. De Mauro. Ed. Paravia).

THERAPEUTIC EFFICACY: effect of a substance that is capable of treating a disease or reducing the intensity of the complications or relapses.

TRADITIONAL CHINESE MEDICINE: includes acupuncture, phytotherapy moxibustion (i.e. positioning of sources of heat and/or medicinal products on the acupuncture points) and also various types of physical exercises, relaxation techniques, meditation and massages. Chinese doctors pay attention to the individual as a whole, in his physiological and psychological state. They analyse what is called the 'disharmony status'. Traditional Chinese medicine is based on the study of the principles of Yin and Yang and of their mutual relationships that are summarized in the Tao symbol of the circle that is divided into two parts: the black and white parts. Human beings are viewed from this standpoint as a miniature universe.

WHITE CELLS: blood cells that fight against infections and diseases.: also known as leukocytes.

Useful addresses

The addresses of the main national and international organizations are provided below, which can be addressed for more information about non-conventional therapies. To make reference easier they have been grouped according to field of activity.

Acupuncture and Traditional Chinese Medicine

Associazione Italiana Agopuntura - Via Tagliamento 9 - 00198 Roma - tel. 06 853 500 36 - fax 06 858 305 53 - www.agopuntura.it

Associazione Italiana di Agopuntura-Moxibustione e Medicina tradizionale cinese AIAM - Via O. Regnoli 8 - 00152 Roma - tel. 06 589 7364

Associazione Medica Italiana di Agopuntura AMIA - P.zza Navona 49 - 00186 Roma - tel. 06 686 8556 - www.amia.byworks.com

Società italiana di agopuntura Sia - Via Solari 52 - 20144 Milano - tel. 02 487 140 47 - fax 02 487 139 99 - s.i.a.@tin.it - www.sia-mtc.it

The New Yuthok Institute for Tibetan Medicine - V.le Spagna 77 - 20099 Sesto S. Giovanni (MI) - tel. 02 257 035 - info@newyuthok.it - www.newyuthok.it

Associations of Non-Conventional Medicine

Associazione di Medicina Non Convenzionale Odontoiatrica AMNCO - Via Mar della Cina 304 - 00144 Roma - tel./fax 06 529 1244 - www.amnco.it

Coordinamento Nazionale delle Discipline Bio-Naturali CONDIB - Via Principessa Clotilde 75 - 10144 Torino - tel. 011 485 739 - www.discipline-bionaturali.it

Federazione Nazionale Naturopati Heilpraktiker Professionisti - Via Vela 49 - 10128 Torino - tel. 0121 954 452 fax 0121 902 136 - www.federnaturopati.org

Federazione Nazionale Naturopati Professionali FENNAP - Via Principessa Clotilde 94 - 10144 Torino - tel. 011 485 739 - www.federazione-naturopati.it

Osservatorio per le Medicine Complementari OMC - Ospedale Policlinico - P.zza L. A. Scuro - 37134 Verona - tel. /fax: 045 820 2978 - <http://chimclin.univr.it/omc>

Biofeedback

Biofeedback Foundation of Europe BFE - P. O. Box 75416 - 1070 AK Amsterdam (The Netherlands) - tel./fax +31 (0) 33 480 0520 - www.bfe.org

Chiropratic

Associazione Italiana Chiropratici AIC - Via Brigata Liguria 1/20 - 16121 Genova - tel. 010 553 3036 - fax 010 584 8607 - numero verde 800 017806 - www.associazionechiropratici.it

Counseling

Associazione Italiana di Counselling AICO - Segreteria: Via Burzagli 24 - 52025 Montevarchi (AR) - fax 055 981 952 - www.aicounselling.it

Bach Flowers

Associazione Europea di Medicine Tradizionali A.E.ME.TRA - Libera Università Europea - Dipartimento di A.E.ME.TRA. - Via Principessa Clotilde 77 - 10144

Torino - tel./fax 011 437 5669/011 485 739 - www.aemetra-valeriosanfo.it

Unione di Floriterapia - Via Pelizza da Volpedo 42 - 20149 Milano - www.unionedifloriterapia.com

Phytotherapy

Accademia di Fitomedicina e Scienze Naturali AFISNa - Via G. Sacconi 4/B - 00196 Roma - tel. 06 323 3563 - fax 06 323 3560 - www.afisna.it

Associazione Nazionale Medici Fitoterapeuti ANMFIT - Ospedale S. Giuseppe - Via Paladini 40 - 50053 Empoli - tel. 0571 702 451 - www.naturamedica.net

Società Italiana di Fitoterapia S.I.FIT. - c/o Università degli Studi di Siena - Via T. Pendola 62 - 53100 Siena - tel. 0577 233 525 - fax 0577 233 509 - www.sifit.org

Hypnosis

Associazione Europea di Medicine Tradizionali A.E.ME.TRA - Libera Università Europea - Dipartimento di A.E.ME.TRA. - Via Principessa Clotilde 77 - 10144

Torino - tel./fax 011 437 5669/011 485 739 - www.aemetra-valeriosanfo.it

Kinesiology

Associazione di Kinesiologia Specializzata Italiana AKSI - Via F.lli Bianchi 3 - 25080 Maderno sul Garda (BS) - www.aksi-kinesiologia.it

Anthropophysical Medicine

Associazione di Ricerche e Studi per la Medicina Antroposofica ARESMA - Via Privata Vasto 4 - 20121 Milano - tel. 02 481 956 17 - info@aresma.com - www.aresma.com

Gruppo Medico Antroposofico Italiano GMAI - Via Privata Vasto 4 - 20121 Milano - tel. 02 659 5558 - fax 02 667 115 63 - www.medicinaantroposofica.it
Società Antroposofica - Via Privata Vasto 4 - 20121 Milano - tel./fax 02 659 5558 - www.rudolfsteiner.it/associazione/index.html
Società Italiana di Medicina Antroposofica SIMA - Via Privata Vasto 4 - 20121 Milano - tel. 02 659 5558 - fax 02 667 115 63 - www.medicinaantroposofica.it

Ayurvedic Medicine

Associazione Atah Ayurveda - Via C. Boldrini 14 - 40121 Bologna - tel./fax 051 588 3294 - atah@atahayurveda.it - www.atahayurveda.it
Associazione Italo-Indiana Massaggio Ayurvedico e Discipline Olistiche Ayurveda A.I.M.A. - Via Ariberto 3 - 20123 Milano - tel. 02 894 045 24 - www.il-massaggio.com
Maharishi Vedic University - Loc. Pianatonda - 05023 Baschi (TR) - tel. 0744 956 032 - mvuinfo@tin.it - www.maharishi.it
Scuola di Ayurveda Ananda Ashram - Via Prandina 25 - 20128 Milano - tel. 02 2590972 - info@ayurvedam.it - www.ayurvedam.it
Società di Medicina Ayurvedica Ayurvedic Point - Via Meloria 3a - 20148 Milano - tel. 02 33003256 - fax 02 33006921 - info@ayurvedicpoint.it - www.ayurvedicpoint.it
Società Medica Italiana di Ayurveda Maharishi SMIAM - Loc. Pianatonda - 05023 Baschi (TR) - tel. 0744 956 032 - smiam.info@maharishi.it - www.maharishi.it

Homeopathy - Homotoxicology

Accademia di Medicina Omeosinergetica AMOS - Via F. Pepe 6 - 90139 Palermo - www.medicinaomeosinergetica.net
Associazione Internazionale di Clinica e Terapia Olistica A.I.C.T.O. - P.zza della Collegiata 5 - 00061 Anguillara Sabazia (RM) - tel. 06/9968002 - fax 06996 8251 - www.aicto.it
Associazione Italiana Omeopatia AIO - Via C. Conti Rossini 26 - 00147 Roma - tel. 06 514 352 34 - fax 06 516 049 97 - www.aionet.org
Associazione Medica Italiana Omotossicologia AIOT - Via Vanvitelli 6 - 20129 Milano - fax 02 282 2234 - www.medibio.it
Centro Italiano di Studi e di Documentazione in Omeopatia CISDO - Via Bergamo 11 - 20096 Pioltello (MI) - tel. 02 926 814 277 - www.cisdo.it

Federazione Italiana delle Associazioni e dei Medici Omeopati FIAMO - Via C. Beccarla 22 - 05100 Terni - tel. 0744 429 900 - omeopatia@fiamo.it - www.fiamo.it

Gruppo Omeopatico Dulcamara - Via Corsica 19A canc. - 16143 Genova - tel. 010 565 458 - fax 010 868 2935 - www.dulcamara.org

Istituto di Studi di Medicina Omeopatica ISMO - Via di Porta Pinciana 34 - 00187 Roma - 06 4745764 fax 4817004 - www.ismo.it

Libera Università Internazionale di Medicina Omeopatica 'S. Hahnemann' LUIMO - V.le Gramsci 18 - 80122 Napoli - tel. 081 761 4707 - fax 081 761 3665 - www.luimo.it

Liga Medicorum Homoeopathica Internationalis LMHI ITALIA - Via Caio Mario 13 - 00192 - Roma - tel. 06 321 1974 - fax 06 321 9501 - www.lmhint.net

Nobile Collegio Omeopatico - Via G. Montanelli 11/a - 00195 Roma - tel. 06 688 036 93 - www.omeopaticocollegio.it

Scuola di Medicina Omeopatica di Verona - Via Bacilieri, 1/A - 37139 Verona - tel. 045 890 5600 - fax 045 890 1817 - www.omeopatia.org

Scuola Italiana di Medicina Omeopatica Hahnemanniana S.I.M.O.H. - Via Miani 8 - 00154 Roma - tel. 06 574 7841 fax 06 572 882 03 - www.omeopatiassi-moh.net

Società Italiana Medicina Omeopatica SIMO - Via Circonvallazione 129/C - 41037 Mirandola (MO) - fax 02 700 507 471 - www.omeomed.net

Società Italiana Omeopatia e Medicina Integrata SIOMI - Via E. Cornalia 7 - 20124 Milano - tel. 02 671 008 19 - fax 02 673 869 77 - www.siomi.it

Osteopathy

Centro Studi di Osteopatia C.S.O Srl. - Via Anassimandro 26 - 00176 Roma - tel./fax 06 972 759 09 - www.centrostudiosteopatia.it

Registro degli Osteopati d'Italia ROI - Galleria Bassa dei Magnani 3 - 43100 Parma - tel. 0521 236 824 - www.roi.it

Plantar Reflexology

Federazione Italiana Reflessologia del Piede - Segreteria generale 0363 350135 - info@firp.it - www.firp.it

Shiatsu

Associazione Professionale Italiana Shiatsu A.P.I.S. - Via della Mercedes 33 - 00187 Roma - tel. 06679 1343 - fax 06 697 89445 - www.apis.it

Associazione Professionale Operatori Shiatsu APOS - Via Settembrini 54 - 20124 Milano - tel. 02 204 012 52 - fax 02 295 255 90 - shiatsuapos@tin.it - www.shiatsuapos.com
Federazione Italiana Shiatsu - P.za S. Cosimato 30 - 00153 Roma - www.fis.it

Yoga

Federazione Italiana Yoga - Via Emiliana 3 - 19038 Sarzana - tel. 0187 603 554 - fax 0187 606 398 - www.yogaitalia.com

Useful links

A selection of Internet sites is provided where further information about non-conventional therapies is available.

Assessorati Regionali alla Sanità (Italian Regional Health Authorities): search for the 'Servizio Sanitario Nazionale' section on the Italian Health Ministry website at www.ministerosalute.it
Associazione Italiana Malati di Cancro, parenti e amici AIMaC: www.aimac.it
Associazione Medici Osteopati Italiani AMOI: www.amoi.it
Centro Collaborante OMS per la Medicina Tradizionale dell'Università degli Studi di Milano: www.naturmed.unimi.it
Centro Nazionale di Epidemiologia CNESP dell'Istituto Superiore di Sanità - Fitosorveglianza: www.epicentro.iss.it/focus/erbe/fitosorveglianza.htm
European Medicines Agency EMEA: www.emea.eu.int
Federazione Italiana delle Società di Agopuntura FISA: www.agopuntura-fisa.it (publishes the Register of Acupuncturist Physicians)
Federazione Nazionale degli Ordini dei Medici Chirurghi e Odontoiatri FNOMCeO: www.fnomceo.it
Istituto Nazionale per lo Studio e la Cura dei Tumori di Milano: www.istituto-tumori.mi.it
Istituto Superiore di Sanità: www.iss.it
MedlinePlus: www.nlm.nih.gov/medlineplus
National Cancer Institute NCI: www.cancer.gov

National Center for Complementary and Alternative Medicine NCCAM: www.nccam.nih.gov
Ordine dei Medici Chirurghi e Odontoiatri della Provincia di Roma: www.ordinemedicioroma.it
Ordini Provinciali dei Medici Chirurghi e Odontoiatri: portale.fnomceo.it
Organizzazione Mondiale della Sanità: www.who.int
Regione Toscana: www.sanita.toscana.it/parliamodi/med-non-convenzionali/centri_pubblici_nazionali.pdf

Publications

Proceedings of the Conference 'Non-conventional treatments for cancer patients - How to provide reliable information' (Rome, 16 December 2005). Available on the website www.aimac.it as of April 2006; in print.
Bellani M.L., Morasso G., Amadori D., Orrù W., Grassi L., Casali P.G., Bruzzi P. (a cura di), *Psiconcologia*, Masson, 2002.
Fawzy F.I., *Psychosocial interventions for patients with cancer: what works and what doesn't*, Eur. J. Cancer, vol 35, n 11, pp. 1559-1564, 1999.
Francescato D., Tomai M., Ghirelli G., *I gruppi di self-help*. In: *Fondamenti di psicologia di comunità*, Carocci editore, pp. 185-212, 2002.
Newell S.A., Sanson-Fisher R.W., Savolainen N.J., *Systematic review of psychological therapies for cancer patients: overview and recommendations for future research*, J. Natl Cancer Inst., vol 94, n.8, 2002.
Medicine Naturali, Salute n. 12, Edizione speciale per il Corriere della Sera, 2006.
Tamburini M., Murru L., *Aspetti psicologici del paziente neoplastico*, In Bonadonna G., Robustelli della Cuna G., Valagussa P., *Medicina Oncologica*, Masson (in via di pubblicazione).

References

1. Molassiotis A. et al.: *Use of complementary and alternative medicine in cancer patients: a European survey*. Annals of Oncology 16: 655-663, 2005.
2. De Lorenzo F. et al.: *Improving information to Italian cancer patients: results of a randomized study*. Annals of Oncology; 15:721-725, 2004.
3. Ezzo J. et al.: *Acupuncture-point stimulation for chemotherapy-induced nausea and vomiting*. Journal of Clinical Oncology, Vol. 23 (28):7188-98, 2005.
4. Lu W.: *Acupuncture for side effects of chemoradiation therapy in cancer patients*. Seminars in Oncology Nursing, 21 (3):190-5, 2005.
5. Blom M., Dawidson I., Fernberg JO., Johnson G., Angmar-Mansson B.: *Acupuncture treatment of patients with radiation-induced xerostomia*. European Journal of Cancer - Part B - Oral Oncology, 32B (3):182-90, 1996.
6. Rydholm M., Strang P.: *Acupuncture for patients in hospital-based home care suffering from xerostomia*. Journal of Palliative Care, 15 (4):20-3, 1999.
7. World Health Organization: *Acupuncture: Review and analysis of reports on controlled clinical trials*. Ginevra, 2002.
8. Molassiotis A. *L'uso delle terapie complementari e alternative in Europa*. Atti del Convegno 'Trattamenti non convenzionali per i malati di cancro - Gli strumenti per un'informazione corretta / Non-conventional treatments for cancer patients - How to provide reliable information' (Roma, 16 dicembre 2005). Disponibili sul sito www.aimac.it.
9. Trimble T. *Medicine complementari e alternative e problematiche attinenti alla qualità della vita: il programma di ricerca del NCI*. Atti del Convegno 'Trattamenti non convenzionali per i malati di cancro - Gli strumenti per un'informazione corretta / Non-conventional treatments for cancer patients - How to provide reliable information' (Roma, 16 dicembre 2005). Disponibili sul sito www.aimac.it.
10. Kent James Tyler: *Materia Medica Omeopatica*. RED Edizioni, 2003.
11. Ramelet A. et al.: *Homeopathic Arnica in postoperative haematomas: a double-blind study*. Dermatology 2000;201:347-348.
12. Amodeo C. et al.: *Evaluation de l'activité d'Arnica 5CH sur le troubles veineux apres perfusion prolongée*. Cahiers de Biotherapie; 98:77-82, 1988.
13. *Medicine Naturali*, Salute n. 12, Edizione speciale per il Corriere della Sera, 2006.
14. Nakaya TA et al.: *Panax ginseng induces production of proinflammatory cytokines via toll-like receptor*. Journal of Interferon and Cytokine Research; 24 (2):93-100, 2004.
15. Jung SH et al.: *Ginseng saponin metabolite suppresses phorbol ester-induced matrix metalloproteinase-9 expression through inhibition of activator protein-1 and mitogen-activated protein kinase signaling pathways in human astrogloma cells*. International Journal of Cancer; 15; 118 (2): 490-7, 2006.
16. Lin J et al.: *Effects of astragali radix on the growth of different cancer cell lines*. World Journal of Gastroenterology; 9 (4):670-3, 2003.
17. Kurashige S. et al.: *Effects of astragali radix extract on carcinogenesis, cytokine production, and cytotoxicity in mice treated with a carcinogen, N-butyl-N'butanolnitrosoamine*. Cancer Investigation; 17 (1): 30-5, 1999.
18. Jiang J- et al.: *Ganoderma lucidum inhibits proliferation and induces apoptosis in human prostate cancer cells PC-3*. International Journal of Oncology; 24 (5): 1093-9, 2004.
19. Sliva D. et al.: *Ganoderma lucidum suppresses motility of highly invasive breast and prostate cancer cells*. Biochemical and Biophysical Research Communications; Nov 8; 298(4): 603-12, 2002.
20. Ernst E. et al.: *Mistletoe for cancer?* European Journal of Cancer; 37: 9-11, 2001.
21. Kleijnen J., Knipschild P.: *Mistletoe treatment for cancer - review of controlled trials in humans*. Phytomedicine 1: 255-60, 1994.
22. Sparreboom A. et al.: *Herbal remedies in the United States: potential adverse interactions with anticancer agents*. Journal of Clinical Oncology; Vol. 22 (12):2489-503, 2004.
23. Mathijssen RH. et al.: *Effects of St. John's wort on irinotecan metabolism*. Journal of the National Cancer Institute; 94 (16):1247-9, 2002.
24. Tamayo C. et al.: *The chemistry and biological activity of herbs used in Floressence herbal tonic and essiac*. Phytotherapy Research; 14 (1): 1-14, 2000.
25. Cedric F. ET AL.: *The Role of Vitamin D in Cancer Prevention*. American Journal of Public Health.; 96 (2): 252-61, 2006.
26. Clanton M. *La posizione del National Cancer Institute sulle medicine complementari e alternative per pazienti oncologici*. Atti del Convegno 'Trattamenti non convenzionali per i malati di cancro - Gli strumenti per un'informazione corretta/Non-conventional treatments for cancer patients - How to provide reliable information' (Roma, 16 dicembre 2005). Disponibili sul sito www.aimac.it.

27. D'Andrea G.M.: *Use of antioxidants during chemotherapy and radiotherapy should be avoided*. CA A Cancer Journal for Clinicians; Vol. 55: 319-21, 2005.
28. Loprinzi CL. et al.: *Evaluation of shark cartilage in patients with advanced cancer: a North Central Cancer Treatment Group trial*. Cancer; 104 (1): 176-82, 2005.
29. et al.: *Neovastat (AE-941), an inhibitor of angiogenesis. Randomized phase I/II clinical trial results in patients with plaque psoriasis*. Journal of the American Academy of Dermatology; 47 (4): 535-41, 2002.
30. Hassan ZM. et al.: *Low molecular weight fraction of shark cartilage can modulate immune responses and abolish angiogenesis*. International Immunopharmacology; 5 (6): 961-70, 2005.
31. Calapai G. et al.: *Reazioni avverse da erbe medicinali*. Disponibile su <http://www.farmacovigilanza.org/fitovigilanza/corsi/200511-02.asp>
32. Moertel C et al.: *A clinical trial of amygdalin (Laetrile) in the treatment of human cancer*. New England Journal of Medicine; 306: 201-6, 1982.
33. Molassiotis A. et al.: *Quality and safety issues of web-based information about herbal medicines in the treatment of cancer*. Complementary Therapies in Medicine; 12, 217-27, 2004.