Evaluation of Canova Immunomodulator´s use in patients with cancer

"To rescue therapeutic forms that can guarantee better longer life with quality."

Dr. Castanheira PT; Dr. Oliveira AP; Dr. Rajão MCS; Dr. Krieger COP; Dr. Modesto NP; Dr. Feliú DGG.

An enclosed pathology of stigma and pain requires an attendance not only humanized, but of an oncologic global universe, integrated by multiprofissionais of health, that believe that a critical form of intervention is able even avoiding that the cancer follows its normal course.

What is sought in practice is to reduce the physical, chemical and biological factors that cause stress and can, in a certain way, influence in the evolution of the disease.

The professional of health has for obligation and ethics, to minimize the possibility or the impact of the disease and of the treatment, acting from prevention, diagnosis and therapeutics, to the rehabilitation. The patient with cancer, being subject to very delicate subjects, as the therapeutic aggressiveness, the difficulty of cure and the proximity of the death, has to be assisted in a way of an integral context.

We believe in the end of exorcist medicine and in the beginning of the adorcista medicine that rescues the forces that are inside of the individual. The interaction among the multidisciplinar team with the patient and his/her relatives has to be reviewed. The effective revision of the posture of the health team that attends the oncologic patient and his/her family, should be capable to stimulate the immunologic, metabolic and emotional answers and even the therapeutic adhesion.

The chronic-degenerative diseases, especially cancer, present countless evolutionary variables, sometimes imponderable and unexpected, furthermore in this context, the cancer diagnosis cannot be announced as a death sentence.

Summary

1.112 patients were studied and appraised in standard treatment with the homeopathic medicine immunomodulator Canova® in therapeutic association – surgery and/or radiotherapy and/or chemotherapy. It was evaluated data refer to the patient's physiologic reservation, as mensuration factor of life quality. The physiologic reservation determines the reaction of the patient to the physiologic stresses imposed by the cancer and by the treatment.

We used as markers for physiologic reservation, the index of performance of Karnofski – where it is inserted potential possibility of social reinsertion and the capacity, limited or not, of return to work, the earnings of body weight and biochemical exams: Hb, Ht, leucocytes number and plaques, proteins and hepatic function.

The patients in treatment with the conventional methods and with the immunomodulator Canova® showed significant increase of quantity with life quality.

Introduction

Traditionally, the therapeutic effectiveness is evaluated in oncologic research by biomedical parameters as decrease of the tumor and free interval of the disease. But the results of the therapeutics of the cancer also need to be appraised as they bring physical and psychological limitations to the patient. Damages in the life quality can commit the adhesion and effectiveness of the treatment and must, therefore, be described carefully and appraised (Ganz, 1994; Hjremstad, Roots, Bjordal & Kaasa, 1995; Cremns, 1994; Hadorn, Sorensen & Holte, 1994; Schain, 1994; Ribeiro from Santos, 1996).

Besides the tumor load (larger tumor load = smaller cure possibility) a second determinant of the issue of the treatment is the patient's physiologic

reservation. The physiologic reservation determines the probable reaction of the patient to the physiologic stress imposed by the cancer and by the treatment. It is difficult to do a direct evaluation of this factor. Instead of this, we used substitute markers for physiologic reservation: Karnofski performance study, weight increase and biochemical exams (pseudo-colinesterase, lactic dehidrogenase, gamma GT, oxaloacetic and pyruvic transaminase, alkaline fosfatase, total and fractional proteins, hemoglobin, hematocrit, global leucocytes and plaques).

The cooperation among the several professionals involved in the treatment of cancer is of maxim importance in the therapeutic planning. The expected earnings of life have to be balanced against the time of internment, the potential complications and the collateral effects of the treatment.

Immunomodulator Canova®

Canova® is a composite homeopathic immunomodulator medicine, with absence of toxicity and/or collateral effects, that promotes the immunemodulation through the modification of the biological answer of the macrophage and of the physiologic liberation of citocinas.

It is a pharmaceutical homeopathic product developed from striped components in Brazilian Homeopathic Pharmacopoeia.

Canova® induces the organism to use its own resources, looking to mobilize natural defenses of the weak body.

The clinical-pharmacologic approach, different from the allopathic conventional medicine makes Canova® suitable, mainly, for Cancer and Aids, once the discharge dilution of the product doesn't produce any collateral effect, when administered to the patients.

The largest difficulty of the antineoblastic chemotherapy is due to the resistance to the drugs. This resistance happens, among other factors, for the discontinuity of the treatment due to intense presented collateral effects. The performance of Canova® on those patients promotes the adhesion to the treatment for the improvement of the life quality, with the attenuation of the collateral effects and absence of the myelosuppression provoked by the chemotherapy drugs,

making such important periodicity to the treatment for the continuity of antiblastic effects, be maintained.

Oncologic Treatment
Administration Ways

- Drops
- Inhalant
- Injectable

Since Medicine has recognized the need of a longer and qualitative life of the oncologic patients, this became the principal objective of the treatment of cancer.

Patient and Methods

A retrospective statistical goal-analysis was accomplished in 1.112 patients belonging to database interns, with at least 12 months of treatment, to be determined a variation of quality of significant life that had happened since the beginning to the end of the treatment, independent of the type and stadium of the tumor. The endpoint in the analysis was the evaluation after four years (independently of the total period of the treatment that the patient was submitted).

The studies excluded patients with multiple organs collapse and with imminent death – pseudo-colinesterase < than 50% of the minimum value of reference – in which the therapeutics was administered with the objective of lessening the pain, promoting the decrease of the suffering and a life end with greater dignity and lesser family suffering.

These patients were divided in subgroups, in agreement with the similarity of data (for instance: same weight, same hematocrit) so that they could be compared to each other and studied statistically. In the statistical studies techniques of lineal modeling were used, that allow to separate estimates of the standard deviation, for us to be adjusted for the combinations of the treatment groups.

Results

Table I and Picture 1 show the weight variation in the score of the Karnofsky performance index, observed during the studied period. It includes the universe of 1112 patients. Separate analyses of sex for weight earnings and Karnofsky performance index are shown in the Table II and III and in the Pictures 2 and 3. The standard deviation was calculated (DP) in all the indexes for a better vision of the homogeneity of the studied group and of the obtained results.

Table I - Evolution of the average weight (Kg) and Karnofsky performance index of all the study patients.

Estatistics Description (average + DP)	Weight	Karnofsky
Beginning of the treatment	63,8 Kg ± 10,68	61,9 ± 11,49
Endpoint	66,3 Kg ± 12,24	84,4 ± 9,19

Picture 1 - Evolution, beginning and endpoint, of all the patients' weight. Display weight gaining in the great majority of the studied groups.

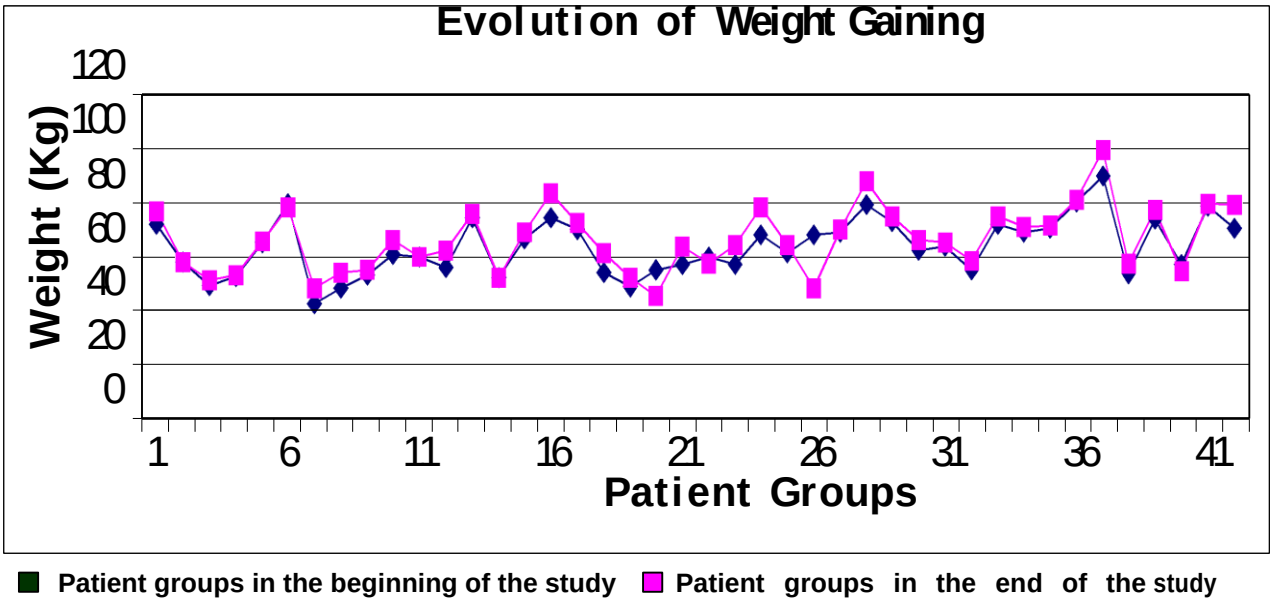


Table II - Shows the evolution of the average weight (Kg) and Karnofsky performance index of all the studied female patients.

Estatistics Description (average + DP)	Weight	Karnofsky
Beginning of the treatment	59,4 Kg ± 9,98	61,1 ± 12,13
Endpoint	61,8 Kg ± 10,69	84,8 ± 9,32

Picture 2 - Evolution, beginning and endpoint of female patient´s group weight. Display weight gaining in the great majority of the studied groups.

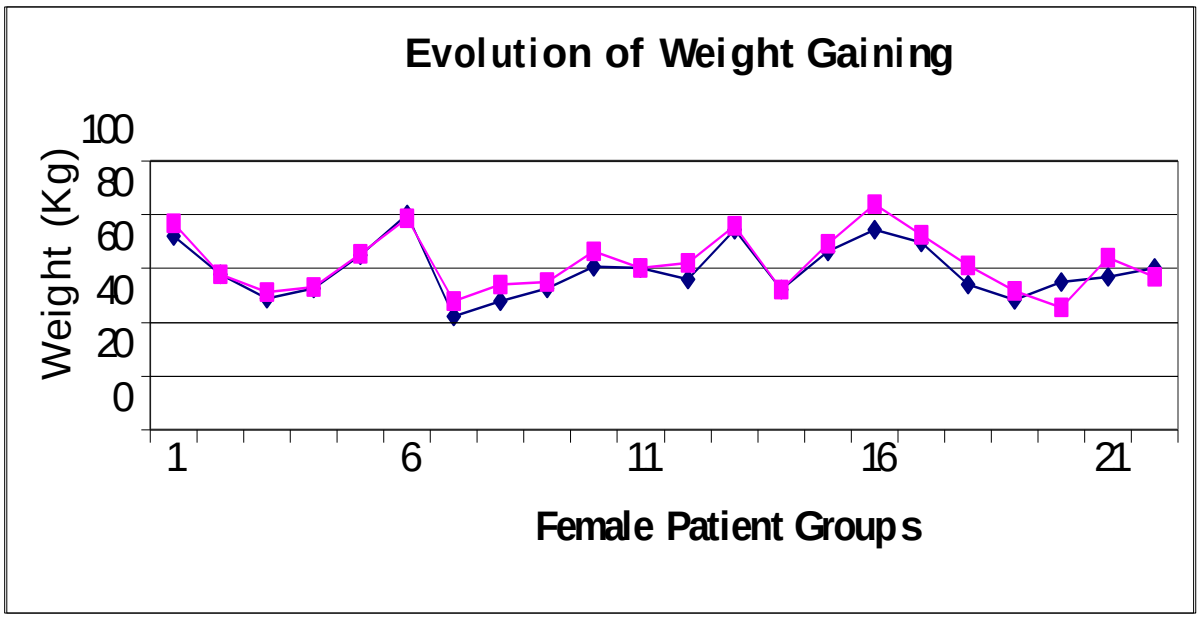
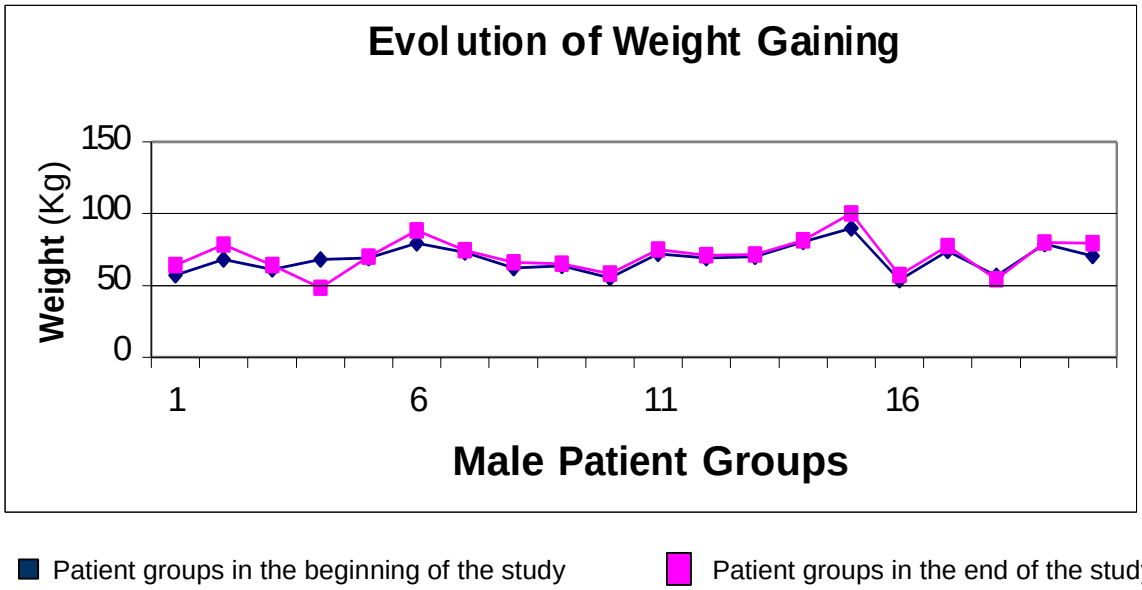


Table III - Shows the evolution of the average weight (Kg) and Karnofsky performance index of all the studied male patients.

Estatistics Description (average + DP)	Weight	Karnofsky
Beginning of the treatment	68,6 Kg ± 9,44	61,9 ± 10,51
Endpoint	71,2 Kg ± 12,17	83,8 ± 8,94

Picture 3 - Evolution, beginning and endpoint of the weight of the male patient groups. Display weight gaining in the great majority of the studied groups.

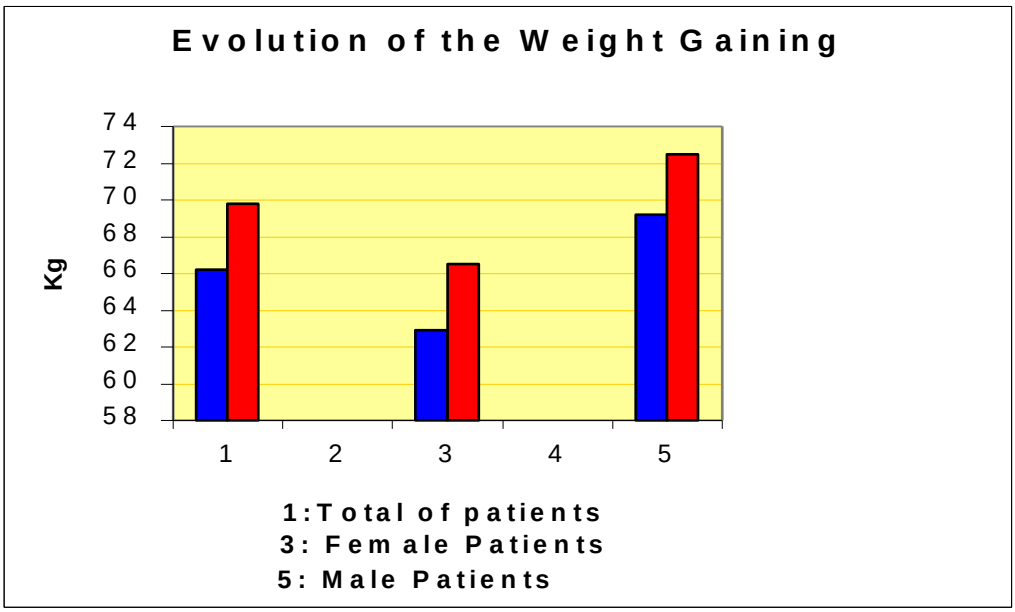


The comparison between Table II and III and Pictures 2 and 3 display uniform results among the groups of the female and male sex, demonstrating homogeneity of Canova® performance, where the weight gaining is constant, avoiding the loss of corporal mass, characteristic of the disease and of the aggressive therapy.

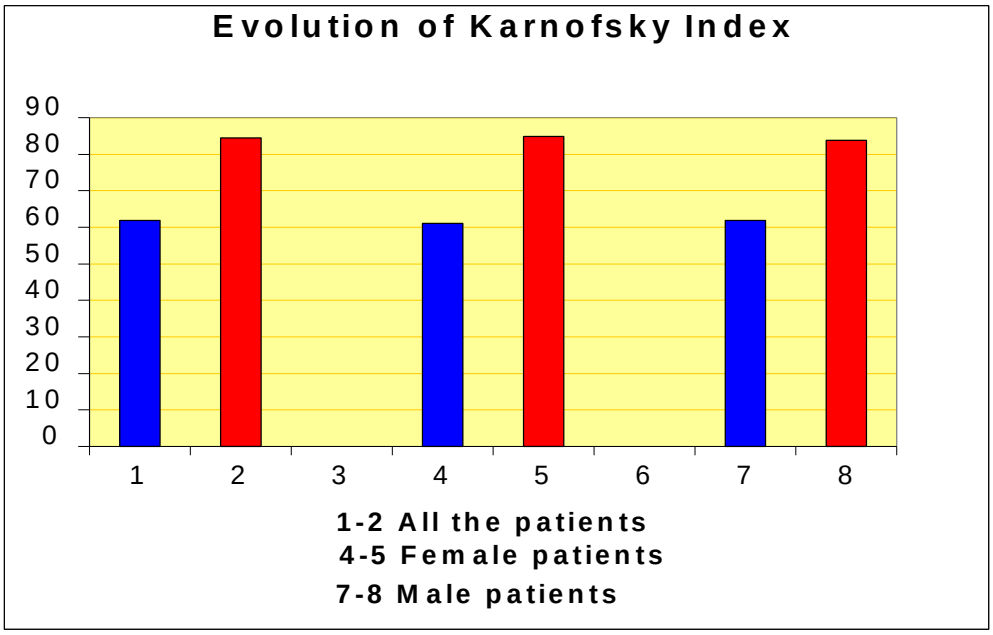
The treatment with Canova® brought improvement of life quality. The full cognitive function, the accomplishment of physical activity as walking, the leisure and even the return, even if partial, to the productive activities were made possible by the results demonstrated above, therefore the weight and muscular mass gaining propitiate the improvement of the functional capacity demonstrated by the Karnofsky Performance Index.

Picture 1 - Display that the evolution of the weight was constant in the global sum and in the differentiation for sex and the Picture 2A displays the evolution of the Karnofsky Performance Index in the global and in the differentiation.

BEGINING



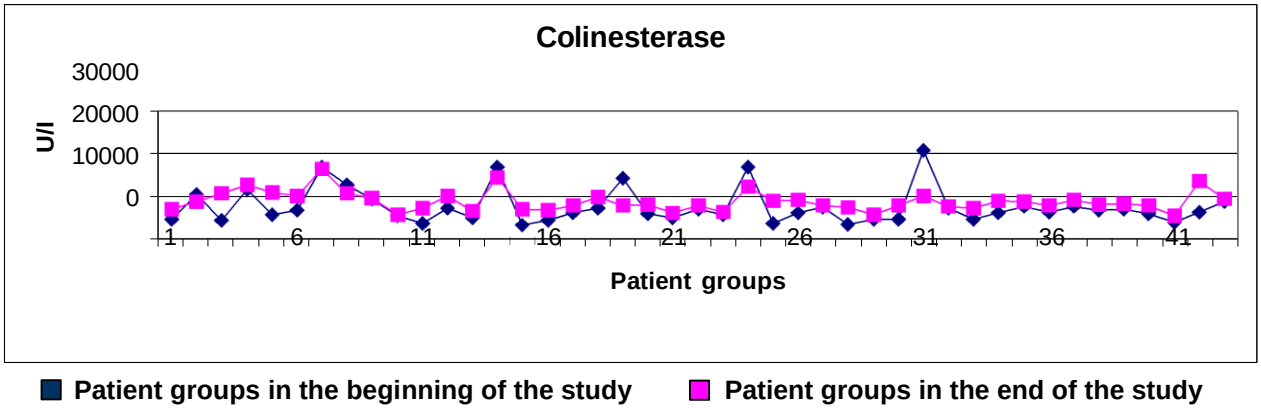
ENDPOINT

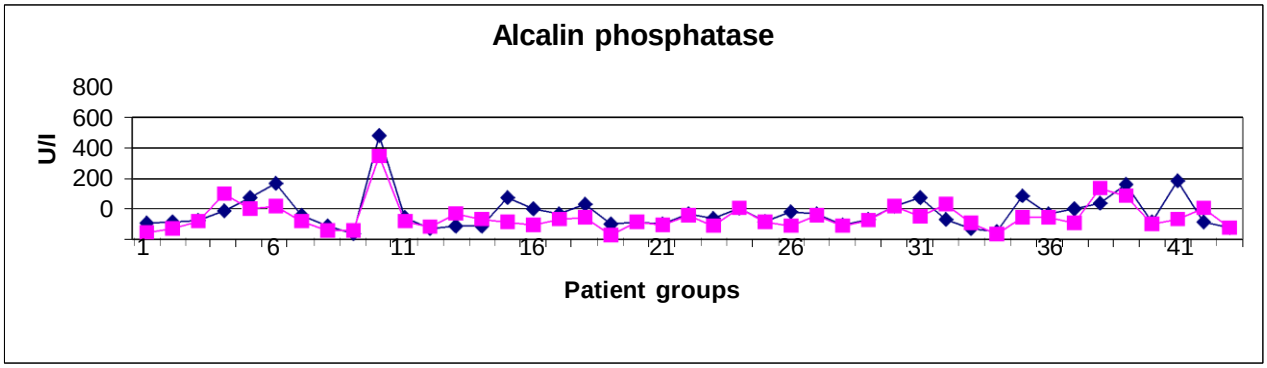


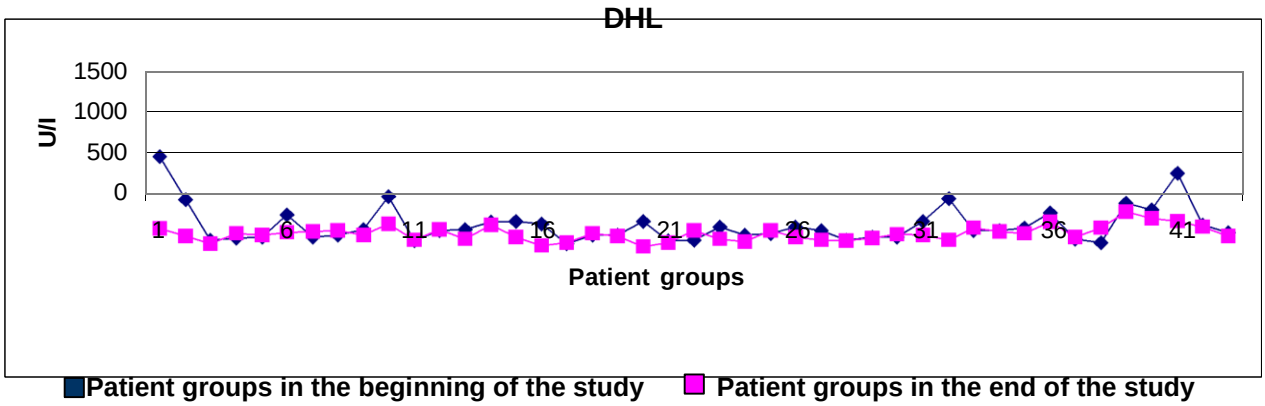
In the analysis of the measures of the physical condition general evaluation, functional capacity (for work and domestic activities), the data presented in the Pictures 1A and 2A show “quality of the health condition.”

Table IV - Shows the average and the initial and final pattern deviation of the hepatic function proof results of the treated patients in this study.

Estatistics		
Description	*Begining*	*Endpoint*
Colinesterase (VR: 4.970 a 13.977 U/l)	7.357,4 U/l ± 4.211,85	8.678,3 U/l ± 2.420,81
DHL	339,0 U/l ± 229,88	231,5 U/l ± 94,07
Gama GT	83,2 U/l ± 130,51	30,0 U/l ± 27,10
Alkaline Phosphatase	172,2 U/l ± 118,02	139,7 U/l ± 94,28
TGO	44,0 UK/ml ± 35,01	22,1 UK/ml ± 9,19
TGP	45,0 UK/ml ± 44,22	18,9 UK/ml ± 10,98




Alcalin phosphatase
800
600
400
200
0
U/l
1
6
11
16
21
26
31
36
41
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study


DHL
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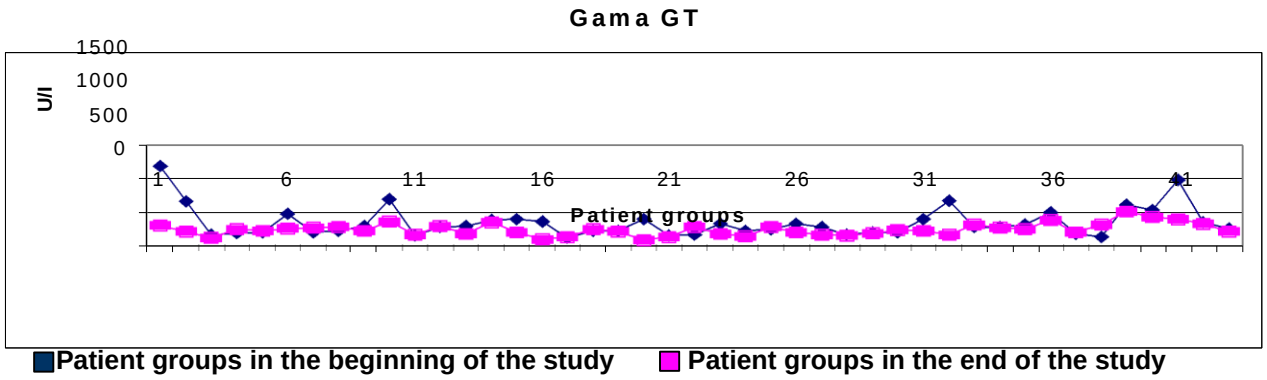
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study


Gama GT
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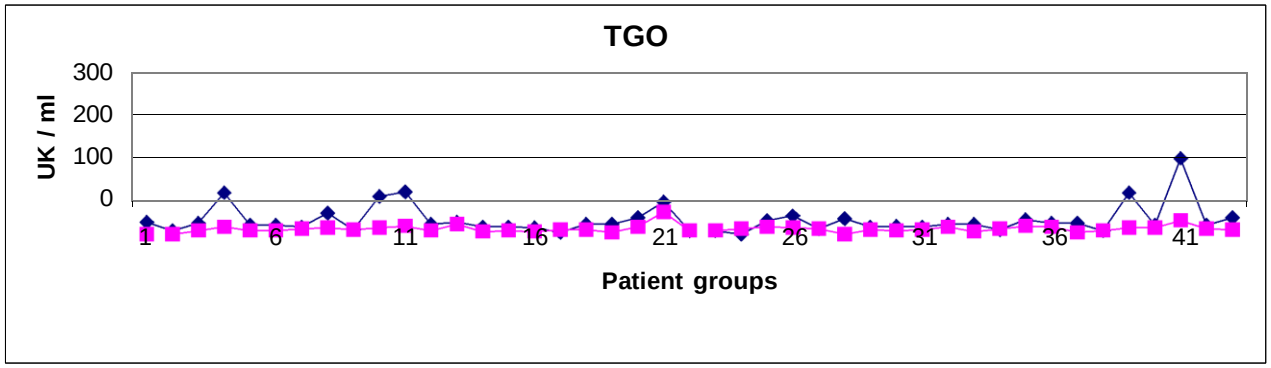
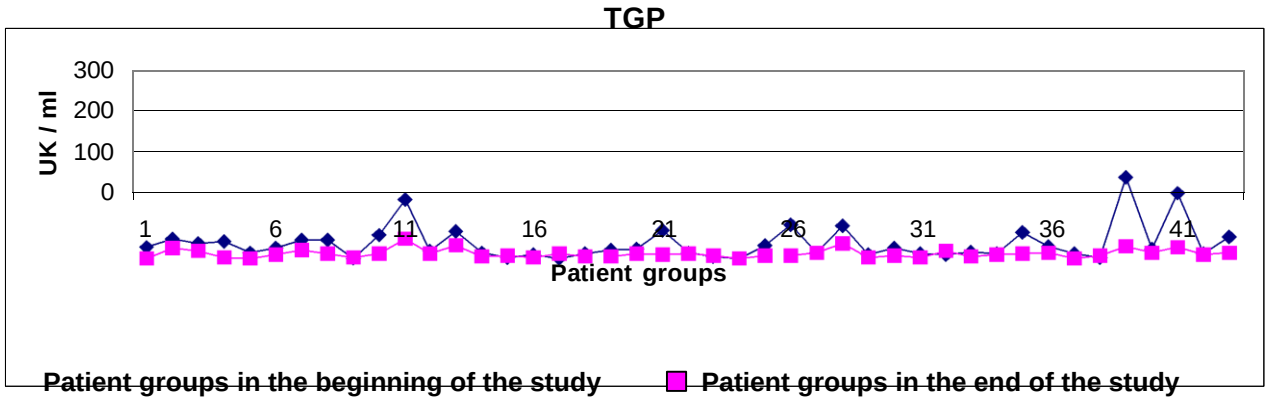
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study





The cancerous cells are seen as having lost the altruism that characterize the cellular behavior in multi-cell organisms. They operate under the natural condition imposed by a hostile atmosphere. Ironically, the more successful they get to become independent of the environmental influences, the more guaranteed is the destruction of their host and, finally, of themselves.

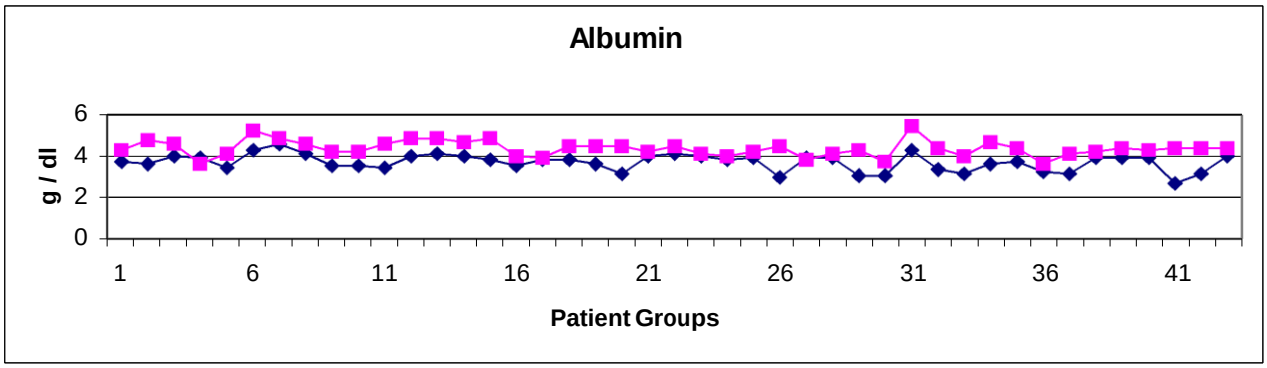
The metabolic cycle of the cancerous cells differs mainly from the normal cellular cycle for its high metabolites synthesis. Such products are thrown in the bloodstream and metabolized, mainly by the liver. The blood levels of the hepatic enzymes, mentioned in the Table IV and shown in groups in the Pictures,

evidence the higher or lower aggression the organism was submitted. Another factor of alteration of the hepatic function happens due to the toxicity presented by the chemotherapy agents.

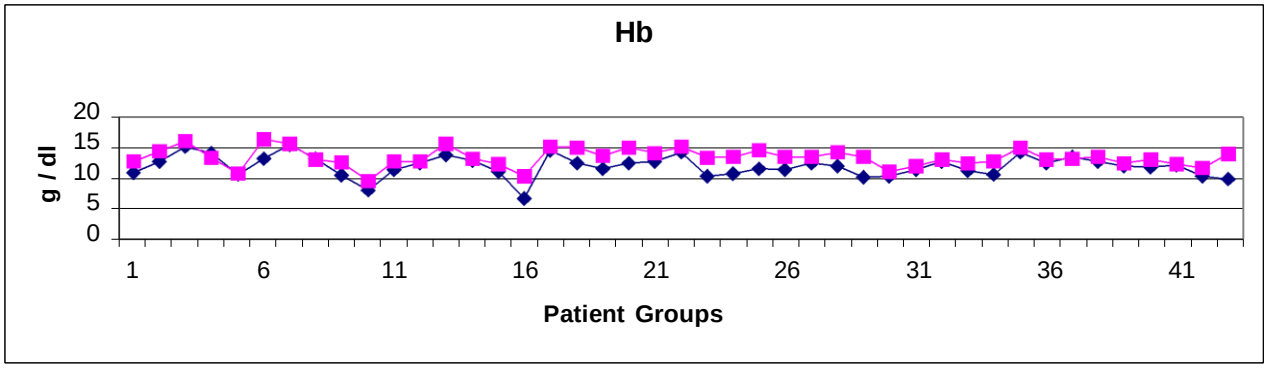
The analysis of Tabela IV and Pictures show that the treatment with Canova® tends to normalize and to homogenize the enzymatic titles. The decrease of the standard deviation means a smaller dispersion of the levels of these titles. The presented result shows decrease of the collateral effects, nauseas and vomits, propitiating regularity of the digestive habits, what maintains and/or recovers the weight, avoiding the weakness and such common dehydration in the chemotherapy after-cycle. The regularity and periodicity of the oncology treatment, propitiated by the treatment with the Immunomodulator Canova®, reduces in a dramatic way the appearance of tumor cells´ resistance to the chemotherapy agents.

Table V - Shows the average and the initial and final pattern deviation the levels of proteins and sanguine cellular count.

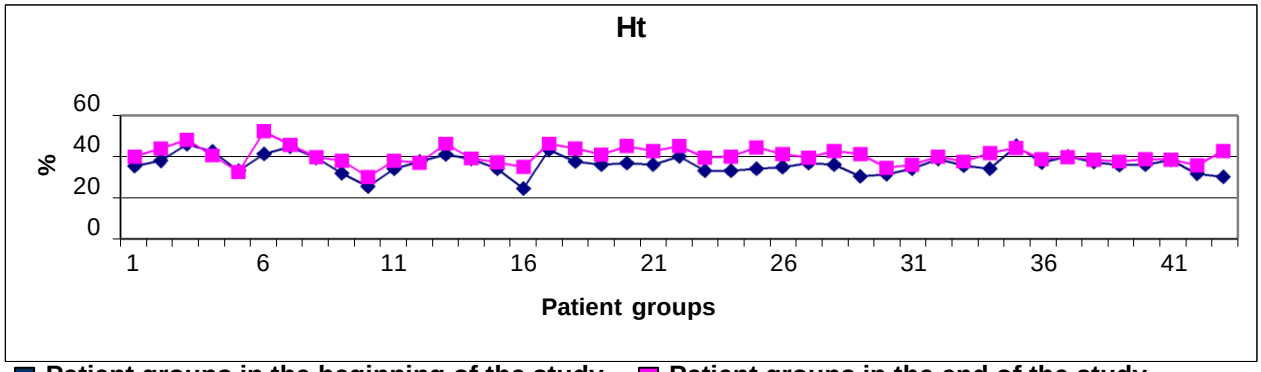
Estatistics *Descriptive*	*Beginning*	*Endpoint*
Total Proteins	**6,4 g/dl ± 0,49**	**7,3 g/dl ± 0,50**
Albumine	**3,7 g/dl ± 0,43**	**4,4 g/dl ± 0,40**
Hb	**11,9 g/dl ± 1,81**	**13,4 g/dl ± 1,53**
Ht	**36,2 % ± 4,78**	**40,6 % ± 4,40**
Leukocytes	**4,5 /mm3 ± 1,49**	**6,15 mm3 ± 1,19**
Platelets	**260,8 /mm3 ± 118,99**	**254,0 /mm3 ± 82,57**



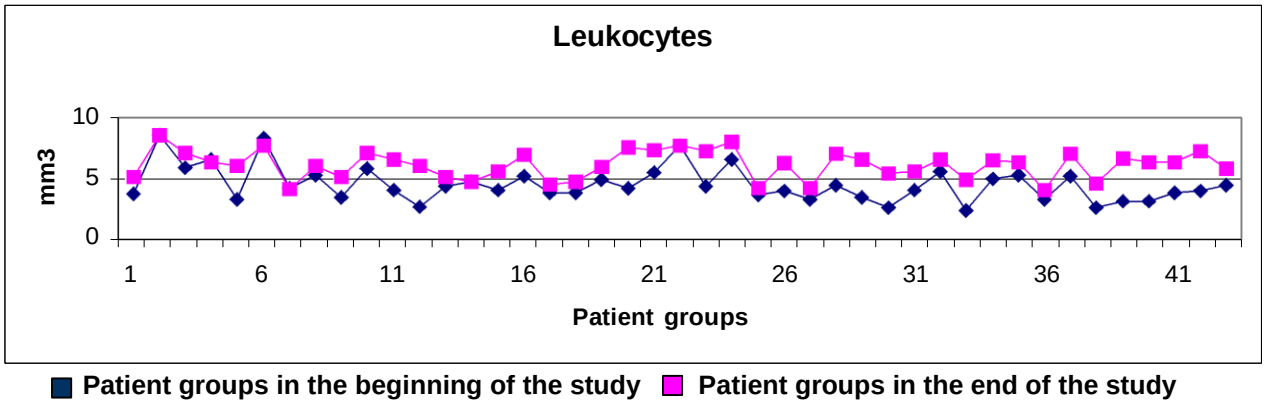
Patient groups in the beginning of the study Patient groups in the end of the study



Patient groups in the beginning of the study Patient groups in the end of the study



Patient groups in the beginning of the study Patient groups in the end of the study


Leukocytes
10
5
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mm3
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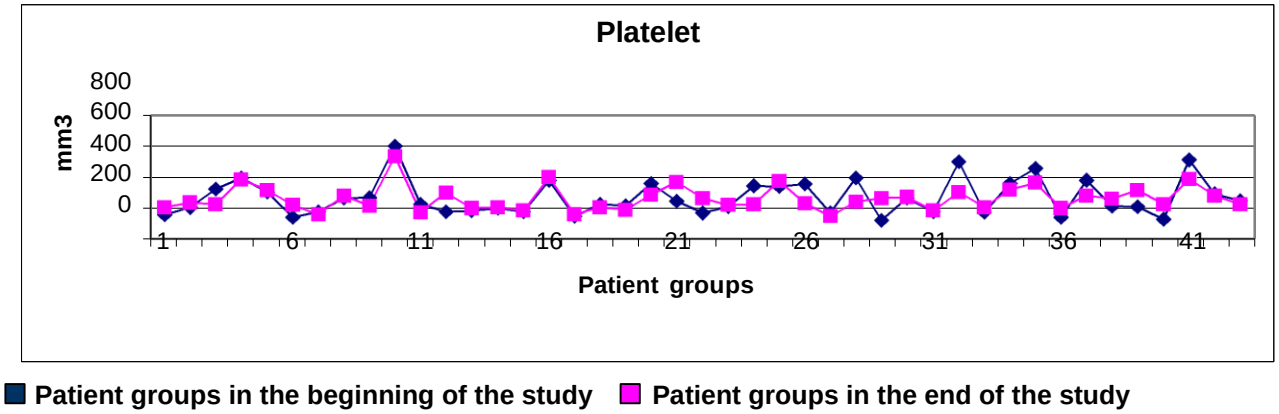
31
36
41
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study


Platelet
800
600
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mm3
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11
16
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36
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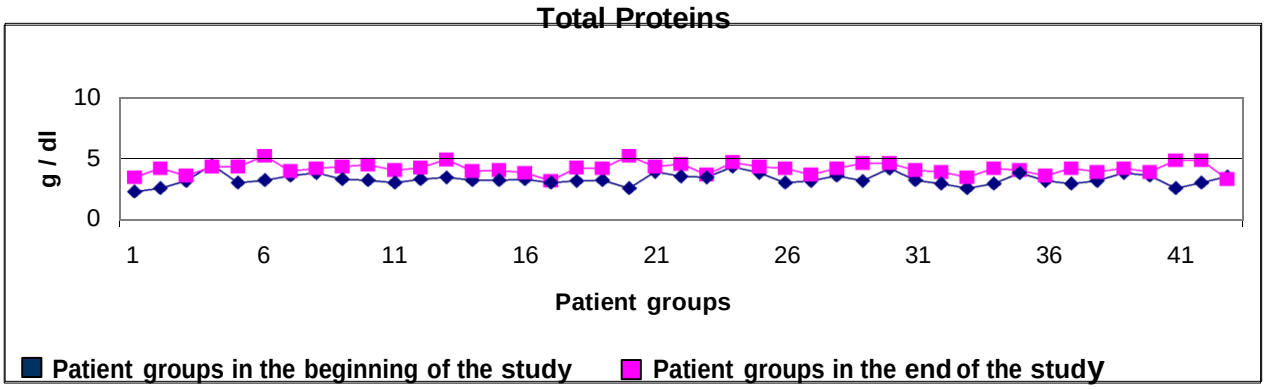
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study


Total Proteins
10
5
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g / dl
1
6
11
16
21
26
31
36
41
Patient groups
Patient groups in the beginning of the study
Patient groups in the end of the study

The administration of appropriate doses, of any effective chemotherapy outline, will have some deleterious collateral effects on the normal tissues. The suppression of the bone marrow induced by the chemotherapy, which is shown with leucopoenia, trombocitopenia and anemia, is the limiting-dose toxicity of more common occurrence.

Analysis of Tabela V and Pictures show that the treatment with Canova® promotes a regulation of the hematological values. Such a result allows liberality of the chemotherapy limiting-dose and it maintains the necessary regularity of the oncologic treatment. The treated patients with Canova® maintain the normality of the plateletmetry and of the leukometry. It is important to stress that due to the stability of the red series the needof hemotransfusion becomes occasional and accidental.

Discussion

The daily clinic plus the present study showed that the treated patients with the homeopathic medicine Imunnomodulator Canova®, concomitant with conventional therapies presented decrease of the pain complaints, improvement of appetite and of the cognitive function already in the beginning of the treatment, it improves that constant during the whole appraised period.

The possibility of physical activity was a consequence of the improvement of life quality and it provided an improvement of the observed self-esteem during the treatment. The evolution of the Karnofsky Performance Index shows with clarity that a medication without toxicity and/or collateral effects, acting on the defenses of the body becomes indispensable to the modern therapeutic arsenal. This Effectiveness was also demonstrated in the results of the accomplished biochemical exams. We noticed, yet, in most of the patients, the significant decrease of tumor volumes, after the therapy with Immunomodulator Canova®.

That fact brought to the discussion the possibility to use, again, invasive therapies, surgeries or even in the restarting the cycles of chemotherapies, which were stopped. Another verified fact was the high adhesion index to the treatment with Canova®, where the patients attended spontaneously in search of the treatment and for the continuity of the medication. Even in those where there was partial or total tumor mass resolution to the image exam, the interest of going on taking the medication was unanimous.

Conclusion

The homeopathic medicines compound Immunomodulator Canova® showed to be an effective procedure when rescuing therapeutic forms that can guarantee longer life with better life quality.

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