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THE TREATMENT OF MALIGNANT PROCESSES WITH SUBSTANCES OF POTENTIAL GENETIC REPAIR EFFECT. RECENT ADVANCES AND DEVELOPMENTS

An article in the January '94 issue of the "Scientific American' made it clear: The concept of the prevailing orthodox avenue to fight chronic cancer has failed. This to an extent that there is no hope to gain safe shores in the fight against cancerous diseases, in particular not on the basis of toxic short time chemotherapy or radiation. The statements in that article do not deviate from earlier ones in 1978 when the McGovern Committee in the U.S. Senate defined the failure of the Nixon-Lasker "War on Cancer" as caused by 'misleading priorities' in cancer research, or from the March '79 hearing in the U.S. Senate under Senator Kennedy which I had the pleasure to share. The then resulting issue was inevitably a 'Return to Nature.'

How does the organism fight cancerous disease? How does it occasionally produce spontaneous regressions? What did those people do who did not get cancer? We had found in a special case of a dramatic spontaneous cure of a bone metastases, in 1973, that this cure was certainly not produced by 'vaccinable' immune reactions but rather by effectors which produce a kind of genetic repair (or rediffentiation) in the cancer cells.

Since then we have in particular focused our interest on substances with potential genetic repair properties. Alpha-Interferon as an example has such abilities. However, endogenous lymphokines like the interferons or the interlukins are partner of the organism's own regulation system. They would backfire if given in unproportional excess. Therefore, in the Kennedy hearing I expressed my doubts on the fruitfulness of this avenue. As you know I was right.

On the other hand, repair factors, which are no partner of man's endogene regulation system, are widely found in nature. This is so in the embryonic cell, in the steroid system (DHEA, Dehydroepiandrosterone being an example), in plants, in carnivorous plants in particular, in plant seeds, and most importantly in insects. Most of the genetic repair or surveillance factors are aldehydes or bifunctional dialdehydes. We created in 1976 a series of semisynthetic mandelonitriles of which the UREYLMANDELONITRILE proved extremely valuable. It is a carrier mediated benzaldehyde donor derived from the widely disputed Laetrile (l-glucose (di?) mandelonitrile). l-glucose is only metabolized by tumor cells, not by normal cells. Laetrile produced by genetically aberrant apricot kernels is no more within reach since the late 50s. It was extremely effective in the long time management of malignant disease.

Of particular clinical value is Didrovaltrate, a dialdehyde found in the Himalayan valeriana. Didrovaltrate is difficult to ingest, however it is lipid soluble and derives certain positive properties from this. Extremely valuable are certainly the Iridodials, dialdehyde genetic surveillance factors of brutal genoprotective properties, which require frequency activation to be effective. They are found in ants. The ant is not permitted to get malignant growth or permit a virus infection to take. In return it is not permitted to exhibit individuality. We are indebted to Dr. Anton, University of Strassbourg, France, and to Dr. Thies, Solvay Kali Chemie, Hannover, Germany, to have delivered to us the fundamental research facts on these substances.

These substances unlike toxic chemotherapy permit us to initiate a protective or curative treatment in the very early phase or the disease, or immediately after surgical removal of malignancies. We hope that the specific lipid, Malignolipin (Kosaki), in the ring-shaped oncogenic extracellular particles can soon be marked by an ELISA-Test. This is based to a certain extent on the work, which I had started in 1953. The extracellular oncogenic particles are seemingly phylogenetic atavism of mitochondrial membrane structure. Such marker technique would permit us to define cancer carriers without necessarily finding the tumor. The combination of this early detection procedure and non-toxic but highly effective repair factor therapy would permit an efficient, inexpensive cancer suppression for theoretically unlimited time.

The clinical observations and data, which we are currently collecting, indicate that the aforementioned concept will potentially outclass the orthodox, expensive and sometimes inhuman concept of toxicnonbiological cancer therapy.

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Addendum: Endonuclesses (from carnivorous plants) and endopoptidases (='mistletoe toxin') may help to ben malignant
aggression as they attack cancer cells specifically due to
the magnetic cell decharge of such cells.
Vitamin M; (AEP - salts) increases the condenser function and
load of cell membranes and by this seemingly degreases the
cancer (cell) incidence. The apparent reduction of malignisation (age adjusted) is in the range of about 80 % as compared
to about 27 % for beta-carotene which was introduced by the
author as a cancer preventitive in the 60 s. These statements
are based on a 30 year observation span.

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