

Introduction to the method of Insulin- potentiated low-dose chemotherapy

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Medical Center for Integrative Medicine

Founded in 2006

Concept: practical application of
the integrative medicine principles.



Preliminary inquiries led us to
believe that Insulin Potentiation
Therapy coheres with the
principles and methods of
Cholistic Medicine.



HISTORY OF IPT

- ✓ Discovered empirically in 1930 by Donato Perez Garcia, MD
- ✓ Until today, three generations of that family are continuing to practice and popularize the method.
- ✓ Since 1975, thanks to the efforts of Steven Ayre, MD the practice of IPT became generally known and the first scientific explanations and theoretical grounds provoked clinical investigation, publications and reports
- ✓ The official site of the International Association of IPT practitioners is www.iptforcancer.com
- ✓ In Bulgaria it is practiced since 2006 in Medical Center “Integrative Medicine” by the licensed doctor Chr. Damyanov, MD
- ✓ In 2009 Chr. Damyanov, MD reported the results of his 3-year clinical experience with IPT at the 7th Annual International IPT Conference, Chicago, IL, USA
- ✓ Until 2009, IPT is practiced in more than 26 countries by more than 300 licensed doctors around the world



THEORY

Insulin has the following effects:

- ✓ Increases membrane permeability. On the other hand, the increased number of insulin receptors on the surface of the cancer cell increases the selectivity and the intracellular concentration of the antineoplastic drugs.
- ✓ Influences metabolic and endocrine processes. This allows an increase in the population of tumor cells in the S-phase of their cell cycle. In that state they are most susceptible to cytostatic drugs.

CLINICAL APPLICATION

✓Oncological diseases:

Cancer of breast, ovaria, uterus, prostate, kidney, urinary bladder, lymphoma/leucaemia, sarcoma, oesophagus, stomach, colon, liver, pancreas, lungs.

✓Chronic diseases:

Arthritis, asthma, urinary infections, chronic bronchitis, cervicitis, vaginitis, cholelythiasis, cholecystitis, colitis, diverticulitis, dysmenorrhea, eczema, epilepsy, hyper reactive children, hypertension, acute bacterial and viral infections, acute and chronic poliomyelitis, benign prostate hyperplasia, gastric and duodenal ulcer etc.

PRACTICE

- ✓ Consistent with straightforward medical principles
- ✓ Conventional chemotherapy schemes are used
- ✓ Thorough case history and physical examination precede therapy
- ✓ Patient is educated into the procedures and signs an informed consent
- ✓ No differences in diagnostic or investigative procedures
- ✓ The only difference involves the use of insulin to induce a hypoglycemic state, and the subsequent therapeutic manipulations within that state

SCHEDULE

9 a.m.

The patient arrives, fasting, after an enema
Vital signs and blood sugar level are checked
Insulin is given IV

9:05 a.m.

Oral medications - vasodilators, vitamins, minerals,
choleretics and cholagogues, hepatoprotectors

9:10 a.m.

Intramuscular injections –
Dexamethasone, Furosemide, Pentoxiphylline

9:40 a.m.

“Therapeutic moment” – cytostatics are given IV
After completion of the cytostatic infusion, 40 % hypertonic glucose is given IV
and the patient is allowed to have a sweet drink and his breakfast.
After spending another hour under observation, the patient is allowed to go
home and rest.
No other therapies are given on the day of IPT.

CONTRAINDICATIONS

- Pregnancy
- Severe conditions (cardiac, pulmonary, cachexia etc.)

ADVERSE REACTIONS

These are usually minimal and subside on the day after treatment

- Headache
- Nausea
- Fatigue
- Leg cramps
- Allergic reactions

EFFECT	STANDARD CHEMOTHERAPY	IPD
Aggressive destruction of tumor cells	Yes	Yes
Alopecia	Yes	No
Nausea, vomiting	Yes	Minimal
Loss of appetite, anorexia	Yes	No
Diarrhoea	Yes	No
Sterility	Yes	No
Immune suppression	Yes	No
Bone marrow suppression	Yes	No
Damage of normal cells	Yes	Minimal
Serious physical and psychological stress for patient and family	Yes	No

EFFECTIVENESS OF IPT

No randomized clinical trials have investigated IPT until now.

The following sources give information on the effectiveness of IPT:

- ✓ IPT results are being presented since 2000 at the Best Case Series before the members of the Cancer Advisory Panel of the Office of Complementary and Alternative Medicine at the National Institutes of Health in Bethesda, MD, USA.
- ✓ Since 1996 Drs. Ayre and Donato Perez Garcia III have been working to develop IPT through trials and research, writing five peer-reviewed scientific journal articles and making several presentations.

EFFECTIVENESS OF IPT

- ✓ Dr Garcia III demonstrates the results from his 29 years of clinical experience with IPT:
 - In cases with tumors < 4 cm without other concurrent treatment – remission in 95 %
 - In cases with tumors > 4 cm without other concurrent treatment – remission in 80 %
 - In cases of recurrent or metastasized tumors after other treatment methods have been used – remission in 25 % , quality of life improvement in 98 %
 - In cases of terminal disease – quality of life improvement in 40%
 - In cases of recurrent or metastasized brain tumors – response in 65 % if IPT is the first treatment used.

EFFECTIVENESS OF IPT

✓ The personal experience in IPT practice in Medical Center “Integrative Medicine” since 2006 was presented as:

- “Three year-experience with IPT application for the treatment of oncological diseases” by Chr. Damyanov, MD, PhD, D. Gherasimova, MD, D. Stoeva, MD, L. Avramov, PhD at the 7th Annual International IPT/IPTLD Conference "Current Trends in Integrative Cancer Care", 23 - 25 October 2009 , Chicago,IL, USA.
- “Low dose chemotherapy in combination with insulin for the treatment of advanced metastatic tumors - preliminary experience” by Damyanov C, Radoslavova M, Gavrilov V, Stoeva D. J BUON 2009;14:711-5
- “Insulin Potentiation Therapy in the treatment of malignant neoplastic diseases: a three-year study” by Ch.Damyanov, MD, PhD, D.Gerasimova, MD, L.Avramov, PhD, Ass.Prof, D.Dyukmedzhieva, MD; in press

CONCLUSIONS

- ✓ IPT is an empirically derived innovation for which good scientific evidence exists to affirm its formulation. Being consistent with the natural biology of the cancer cell, the operational mechanisms of IPT make it an ideal candidate for cancer treatment.
- ✓ The gathered results from the clinical application show that IPT seriously reduces the toxicity of treatment in comparison to standard chemotherapy
- ✓ IPT gives a chance for treating even those patients, for whom the conventional methods are not applicable.
- ✓ Future extended experimental and clinical trials would contribute for a complete understanding of the therapeutic potential of IPT, as well as its role in the complex therapy in oncology.

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**THANK YOU FOR YOUR
ATTENTION**

