

dr burzynski antineoplaston therapy

****Dr. Burzynski Antineoplaston Therapy: Exploring an Alternative Cancer Treatment****

dr burzynski antineoplaston therapy has been a topic of considerable discussion and debate in the world of cancer treatment. Originating from the research of Dr. Stanislaw Burzynski, this therapy represents a unique and controversial approach to combating cancer, distinct from conventional chemotherapy and radiation. If you've come across this term and wonder what it entails, how it works, and what the surrounding controversy involves, this article aims to provide a comprehensive and clear overview.

What Is Dr. Burzynski Antineoplaston Therapy?

Antineoplaston therapy is a treatment method developed by Dr. Stanislaw Burzynski in the 1970s. It involves the use of naturally occurring peptides and amino acid derivatives called antineoplastons, which are believed to regulate gene expression and suppress cancer growth. These compounds are derived from human blood and urine, and the therapy is administered intravenously or orally.

Unlike traditional cancer treatments that directly attack tumor cells, antineoplaston therapy is designed to restore normal cell function and inhibit cancerous cells from proliferating. Dr. Burzynski's approach hinges on the idea that cancer results from genetic abnormalities, and antineoplastons can correct these abnormalities at the molecular level.

The Origins and Development of Antineoplastons

Dr. Burzynski, a Polish-born physician and biochemist, initially discovered antineoplastons through biochemical research conducted in the late 1960s. He found that certain peptides in the body had anti-cancer properties. Over the decades, his work evolved into a treatment protocol aimed at using these peptides to control or eradicate tumors.

The therapy gained popularity among some patients seeking alternatives to conventional treatments, especially those with brain tumors and other hard-to-treat cancers. However, it remains an experimental treatment and is subject to ongoing clinical trials and regulatory scrutiny.

How Does Antineoplaston Therapy Work?

The mechanism behind Dr. Burzynski's antineoplaston therapy is complex and rooted in molecular biology. Antineoplastons are thought to influence oncogenes and tumor suppressor genes, which play a critical role in cell growth and division.

Targeting Genetic Mutations in Cancer

Cancer arises when certain genes mutate, causing uncontrolled cell division. Antineoplastons are proposed to:

- **Suppress oncogenes:** These are genes that promote cancer when overactive.
- **Activate tumor suppressor genes:** Genes that help prevent cancer growth.
- **Induce apoptosis:** Programmed cell death that removes abnormal cells.
- **Inhibit angiogenesis:** Preventing the formation of new blood vessels that feed tumors.

By modulating these pathways, antineoplastons aim to restore balance and prevent cancer cells from growing uncontrollably.

Administration and Treatment Protocol

Patients undergoing antineoplaston therapy typically receive a cocktail of several antineoplaston compounds. The treatment often involves:

- **Intravenous infusions:** Administered over several hours, sometimes multiple times a day.
- **Oral capsules:** Used to maintain levels of antineoplastons in the body.
- **Long-term treatment:** Protocols can last weeks or months, depending on the patient's response.

Treatment is personalized based on cancer type, stage, and patient tolerance.

The Controversy Surrounding Dr. Burzynski Antineoplaston Therapy

While antineoplaston therapy has attracted patients searching for hope beyond conventional methods, it has also faced significant criticism from the medical community and regulatory bodies.

Scientific Evidence and Clinical Trials

One of the key points of contention is the lack of large-scale, peer-reviewed clinical trials demonstrating the therapy's safety and effectiveness. The FDA has approved some clinical studies, but results have been mixed or inconclusive. Critics argue that:

- Clinical trial data is insufficient or unpublished.
- Methodologies in some studies lack rigor.
- Claims of miraculous recoveries lack independent verification.

Supporters, however, cite anecdotal evidence and smaller studies suggesting benefits, particularly in brain cancer patients.

Regulatory and Legal Challenges

Dr. Burzynski's clinic, based in Texas, has been under regulatory scrutiny for decades. The Food and Drug Administration (FDA) has issued warnings and attempted to halt the marketing of antineoplaston therapy as a proven cancer cure. Legal battles and controversies have marked the therapy's history, making it a polarizing subject.

Despite this, the clinic continues to offer treatment, emphasizing patient choice and the experimental nature of the therapy.

Who Might Consider Antineoplaston Therapy?

For patients facing difficult-to-treat cancers or those who have exhausted conventional options, antineoplaston therapy may appear as a last-resort alternative. It's important to approach this option with careful consideration.

Factors to Weigh Before Choosing This Therapy

- **Consultation with Oncologists:** Always discuss with your primary cancer care team before pursuing alternative treatments.
- **Understanding Experimental Status:** Recognize that antineoplaston therapy is experimental and not widely accepted as standard care.
- **Costs and Accessibility:** Treatment can be expensive and is often not covered by insurance.
- **Potential Side Effects:** Though touted as less toxic than chemotherapy, antineoplastons can cause side effects like fatigue, neurological symptoms, or electrolyte imbalances.

- **Clinical Trial Enrollment:** Participation in approved studies might provide access while contributing to scientific understanding.

Integrating Antineoplaston Therapy With Conventional Cancer Care

Some patients opt to combine antineoplaston therapy with traditional treatments such as surgery, chemotherapy, or radiation. This integrative approach requires close monitoring by healthcare professionals to manage interactions and side effects.

Potential Benefits and Risks of Combination Therapy

- ****Benefits:**** May enhance overall treatment efficacy or reduce reliance on harsh chemotherapy doses.
- ****Risks:**** Increased complexity in treatment plans and potential for unforeseen interactions.

Open communication between all treating physicians is essential for patient safety.

Understanding the Future of Antineoplaston Research

The scientific community continues to observe and investigate the potential of antineoplastons. Advances in molecular genetics and cancer biology could shed light on how these compounds might fit into future treatment paradigms.

Researchers are particularly interested in:

- Identifying biomarkers that predict patient response.
- Developing synthetic derivatives with improved potency.
- Combining antineoplastons with immunotherapy or targeted therapies.

These avenues may transform the current experimental therapy into a more recognized and validated option.

Dr. Burzynski antineoplaston therapy remains a fascinating chapter in the ongoing quest for effective cancer treatments. Whether seen as a beacon of hope or a controversial detour, it underscores the complexity of cancer

biology and the challenges in developing novel therapies. For patients and caregivers, staying informed, seeking professional guidance, and weighing all options carefully is crucial in the journey toward healing.

Frequently Asked Questions

What is Dr. Burzynski's Antineoplaston therapy?

Dr. Burzynski's Antineoplaston therapy is an experimental cancer treatment developed by Dr. Stanislaw Burzynski. It involves the use of antineoplastons, which are peptides and amino acid derivatives thought to regulate gene expression and inhibit cancer growth.

Is Antineoplaston therapy approved by the FDA?

As of now, Antineoplaston therapy is not fully approved by the FDA for general cancer treatment. It has been granted Investigational New Drug (IND) status, allowing clinical trials, but it remains controversial and is considered experimental.

What types of cancer does Antineoplaston therapy target?

Antineoplaston therapy has primarily been studied for brain tumors such as gliomas and glioblastomas, as well as other cancers like colorectal and pancreatic cancer. However, conclusive evidence of its effectiveness is lacking.

What are the main controversies surrounding Dr. Burzynski's therapy?

The controversies include lack of robust clinical trial data supporting efficacy, high treatment costs, regulatory scrutiny, and debates over safety. Critics argue that the therapy is unproven and may give false hope to patients.

Where can patients access Antineoplaston therapy?

Antineoplaston therapy is primarily available at the Burzynski Clinic in Houston, Texas. Patients should approach with caution, thoroughly research the treatment, and consult with licensed oncology professionals before considering it.

Additional Resources

Dr. Burzynski Antineoplaston Therapy: An Investigative Review of Its Claims and Controversies

dr burzynski antineoplaston therapy has been a subject of intense debate within the oncology and medical communities for several decades. Originating from the research of Dr. Stanislaw Burzynski, this treatment approach involves the use of antineoplastons—peptides and amino acid derivatives purported to target cancer cells selectively without the harsh side effects commonly associated with chemotherapy and radiation. While it has attracted a dedicated following and numerous testimonials, the therapy also faces considerable skepticism due to the limited scientific validation, regulatory hurdles, and ethical questions surrounding its promotion and accessibility.

Understanding Antineoplaston Therapy

Dr. Burzynski first introduced antineoplaston therapy in the 1970s, claiming that these naturally occurring compounds in human blood and urine could be harnessed to regulate abnormal cell growth and restore normal cellular function. The therapy is primarily administered as intravenous infusions or oral compounds, aimed at treating various malignancies, including brain tumors, leukemia, and other solid tumors.

The core concept behind antineoplastons revolves around their role as regulatory peptides that may affect gene expression and cellular apoptosis—the programmed death of cancer cells. Unlike conventional chemotherapy agents that indiscriminately kill rapidly dividing cells, antineoplastons are purported to have a targeted mechanism with potentially fewer systemic toxicities.

Mechanism of Action and Scientific Scrutiny

Despite the innovative premise, the exact biochemical pathways through which antineoplastons operate remain incompletely understood. Dr. Burzynski's early studies suggested that these peptides could induce differentiation and apoptosis in cancerous cells by modulating oncogene activity. However, independent replication of these findings has been limited.

Several preclinical studies have attempted to elucidate the molecular effects of antineoplastons, but the results have been inconclusive or insufficiently robust to meet the stringent criteria of modern clinical research. The lack of large-scale randomized controlled trials (RCTs) remains a critical gap, limiting the therapy's acceptance by mainstream oncology.

Clinical Trials and Regulatory Challenges

One of the most contentious aspects of dr burzynski antineoplaston therapy is its regulatory history. The U.S. Food and Drug Administration (FDA) has closely monitored Burzynski's clinical trials over the years. Although some Phase II trials have been conducted—primarily targeting gliomas and other brain cancers—the therapy has not secured FDA approval for widespread clinical use.

FDA Oversight and Legal Disputes

The FDA's concerns have focused on the methodological rigor of the clinical trials, data transparency, and patient safety. Over the years, the Burzynski Clinic has faced multiple warnings and legal actions regarding the promotion of antineoplaston therapy as a proven cancer cure. Critics argue that the therapy is marketed aggressively, sometimes preying on vulnerable patients with limited treatment options.

Conversely, supporters highlight the regulatory obstacles as barriers to innovation, citing anecdotal cases of tumor regression and long-term remission. The clinic's persistence in conducting trials despite these challenges underscores the complex interplay between experimental therapies and regulatory frameworks.

Comparative Effectiveness Against Conventional Cancer Treatments

When examined alongside established cancer treatments—such as surgery, radiation, chemotherapy, immunotherapy, and targeted molecular drugs—antineoplaston therapy presents a markedly different profile. Conventional treatments have undergone extensive phase III trials, demonstrating statistically significant improvements in survival and quality of life for specific cancers.

In contrast, dr burzynski antineoplaston therapy lacks comprehensive phase III data to confirm efficacy or safety conclusively. This absence makes it difficult for oncologists to recommend it as a front-line or adjunct treatment. However, its purported low toxicity and novel mechanism continue to drive interest, particularly for patients with refractory or terminal cancers.

Patient Perspectives and Ethical Considerations

The Burzynski Clinic has treated thousands of patients, many of whom report

positive outcomes or improved tolerability compared to standard chemotherapy. These testimonials, often shared through advocacy groups and social media, have fueled a community of patients seeking alternative cancer therapies.

Access, Cost, and Insurance Issues

A significant barrier to widespread adoption is the financial burden associated with antineoplaston therapy. Because it is not FDA-approved, insurance companies typically do not cover the treatment, leaving patients to bear substantial out-of-pocket costs. This raises ethical questions about accessibility and the potential for exploitation.

Informed Consent and Patient Autonomy

The debate around antineoplaston therapy also touches on patient autonomy and informed consent. While patients have the right to pursue experimental treatments, the dissemination of balanced, evidence-based information is crucial. Critics argue that the clinic's marketing strategies may sometimes overstate benefits without adequately communicating the experimental nature and unknown risks.

Scientific Community's Stance and Future Directions

The broader oncology community remains cautious yet open to novel therapies that could improve outcomes. Dr. Burzynski's antineoplaston therapy illustrates the challenges faced by unconventional cancer treatments: balancing innovation with rigorous scientific validation.

Calls for Rigorous Research

To move forward, the therapy requires well-designed, multicenter randomized controlled trials that adhere to current Good Clinical Practice (GCP) standards. These trials would need to provide clear evidence on survival benefits, tumor response rates, and safety profiles compared to existing therapies.

Potential for Integration with Modern Oncology

If future research substantiates its efficacy, antineoplaston therapy could complement existing treatment regimens, particularly in cancers resistant to

standard approaches. Moreover, understanding the molecular basis of antineoplastons might inspire new drug development targeting cancer cell regulation.

- **Pros of Antineoplaston Therapy:** Potentially fewer side effects, novel mechanism of action, anecdotal reports of tumor remission.
- **Cons of Antineoplaston Therapy:** Lack of definitive clinical evidence, high cost, regulatory and ethical concerns.

The story of Dr. Burzynski's antineoplaston therapy is emblematic of the complexities inherent in cancer treatment innovation. As science advances and patient needs evolve, the dialogue between experimental therapies and mainstream medicine remains vital—underscoring the importance of critical evaluation, patient safety, and hope grounded in evidence.

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Dr. Burzynski's Antineoplaston Therapy: The Complete Guide to Complementary Therapies in Cancer Care Barrie R. Cassileth, 2011 With recent clinical advances, millions of people survive many years after a cancer diagnosis. And while their physicians deliver conventional, evidence-based therapies to treat the cancer, sometimes the cancer patient and his or her symptoms are not treated with equal skill. To manage their physical and emotional symptoms and promote health and well-being, most cancer patients and survivors use complementary therapies: Naturopathy, Ayurveda, herbalism, homeopathy, hypnosis, yoga, acupuncture, music therapy, macrobiotics, chelation therapy, colonics, hydrotherapy and many, many more. But are they safe? Are they effective? What problems do they address? What are the risks? When can they help? This unique and comprehensive book guides the way through the often confusing maze of complementary and alternative therapies promoted to cancer patients and survivors. The functions, benefits,

backgrounds and risks are clearly presented. Learning when, if and how to use them provides medical professionals, cancer patients and survivors with the information they need to better control the symptoms and side effects of cancer and its treatment. Unfortunately, using some of these therapies without this expert guidance can lead to medical complications, or worse. The Complete Guide to Complementary Therapies in Cancer Care is an invaluable resource in making educated health care decisions for managing life during and after cancer. Through the wise and informed use of these approaches, cancer patients OCo whether just-diagnosed, during treatment or throughout Survivors are better able to manage the physical and emotional stresses that accompany cancer, leading to symptom control and improved quality of life.

dr burzynski antineoplaston therapy: Cancer Patient Access to Unapproved Treatments United States. Congress. House. Committee on Commerce. Subcommittee on Oversight and Investigations, 1996

dr burzynski antineoplaston therapy: We Lost the War on Cancer - Review of Alternative Cancer Therapies John P. Thomas, 2014-08-25 We have lost the war on cancer. At the beginning of the last century, one person in twenty would get cancer. In the 1940s it was one out of every sixteen people. In the 1970s it was one person out of ten. Today one person out of three gets cancer in the course of their life. The cancer industry is probably the most prosperous business in the United States. In 2014, there will be an estimated 1,665,540 new cancer cases diagnosed and 585,720 cancer deaths in the US. \$6 billion of tax-payer funds are cycled through various federal agencies for cancer research, such as the National Cancer Institute (NCI). The NCI states that the medical costs of cancer care are \$125 billion, with a projected 39 percent increase to \$173 billion by 2020. The simple fact is that the cancer industry employs too many people and produces too much income to allow a cure to be found. All of the current research on cancer drugs is based on the premise that the cancer market will grow, not shrink. John Thomas explains to us why the current cancer industry prospers while treating cancer, but cannot afford to cure it in Part I. In Part II, he surveys the various alternative cancer therapies that have been proven effective, but that are not approved by the FDA.

dr burzynski antineoplaston therapy: Alternatives in Cancer Therapy Ross Pelton, 2009-09-29 Alternatives in Cancer Therapy offers help for all patients coping with cancer. The therapies discussed in this book are primarily non-toxic, have few, if any, side effects, and tend to strengthen the immune system. They can be used as supplemental regimens that help maximize the effectiveness of traditional therapies such as surgery, radiation, and chemotherapy. Patients have a right to know all of their treatment options, and Dr. Ross Pelton presents dozens of choices, including: * Shark Cartilage * Gerson Therapy * Mistletoe * Isoprinosine * Laetrile * Selenium * Beta-Carotene * Hydrogen Peroxide * Vitamins C and E * The Hoxsey Treatment Non-traditional therapies can enhance the quality of life, and improve overall health while treating the disease. Alternatives in Cancer Therapy provides information on the research, efficacy, potential side effects, and availability of each treatment.

dr burzynski antineoplaston therapy: Allegations of FDA Abuses of Authority United States. Congress. House. Committee on Commerce. Subcommittee on Oversight and Investigations, 1996

dr burzynski antineoplaston therapy: Women Confront Cancer Margaret Wooddell, David J. Hess, 1998-10 Each year hundreds of thousands of women are diagnosed with cancer, and more and more frequently, women are turning to alternative treatments to take control of their illnesses and their lives. Information, however, has been scarce for women navigating through conventional and unconventional medicine. Research funding continues to support traditional cancer therapies. Women Confront Cancer declares the need for new, less toxic therapies and diagnostic procedures. For the first time, Women Confront Cancer unites the voices of women leaders who have breast, cervical, ovarian, and other cancers. Documenting the decision process, the choices, and the dilemmas these women faced as they chose alternative and complementary cancer treatments, a powerful unity emerges, pointing the way to the future of the diagnosis and treatment of cancer by

less toxic methods. Ann Frahm, the author of *A Cancer Battle Plan*, Susan Moss, the author of *Keep Your Breasts*, and Cathy Hitchcock, coauthor of *Breast Cancer*, are only three of the leaders who relate their personal experiences with cancer. All of the women featured in *Women Confront Cancer* share how and why they created treatment programs that combine the best of conventional and unconventional approaches, and how it has improved their health and their lives. A call for patients' rights, for policy reform in cancer research, for better information about both conventional and alternative medicine, *Women Confront Cancer* will be both a source of inspiration for women who have cancer and an aid for them in creating their own approach to healing. * Did you know that October is [NATIONAL BREAST CANCER AWARENESS MONTH] and pink is the color that symbolizes breast cancer awareness?

dr burzynski antineoplaston therapy: Access to Medical Treatment Act United States. Congress. Senate. Committee on Labor and Human Resources, 1996

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dr burzynski antineoplaston therapy: CANCER REMEDIES That the Medical Establishment Doesn't Want You to Use Carolyn D'Our, 2016-05 This book is about the cancer industry's conspiracy to suppress alternative, natural cancer therapies because they are not profitable. It discusses and provides evidence of the medical industry's plot to destroy the work and therapies of alternative practitioner's. It also list a number of successful cancer therapies and discusses techniques to aid in the prevention of cancer.

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dr burzynski antineoplaston therapy: Take Control of Your Cancer James W. Forsythe, 2012-05-01 Cancer rates continue to skyrocket, and the overall survival rate for Stage IV cancer patients in the United States is a grim 2.1 percent. Clearly, the extensive use of expensive,

sometimes ineffective toxins in conventional oncology protocols is a failing strategy. Even the few survivors of these harsh slash-and-burn treatments can have dismal quality of life, suffering with ailments such as nerve damage, heart muscle disease, and liver and kidney failure. And unfortunately, many conventional doctors discourage patients from exploring alternative treatment options. A featured doctor in Suzanne Somers' bestselling cancer book *Knockout*, forty-year oncology veteran James W. Forsythe, M.D., H.M.D, offers a more cost-effective, personalized, and compassionate alternative to traditional cancer treatment in *Take Control of Your Cancer: Integrating the Best of Alternative and Conventional Treatments*. Dr. Forsythe's integrative approach has yielded an astonishing 46 percent positive response rate in a 500-patient study. In *Take Control of Your Cancer*, you will find information on all stages of cancer, including: Warning signs of cancer How to pinpoint the causes of cancer and to avoid recurrence Preventative measures such as healthy diet and regular exercise Overview of how to choose what drugs and supplements to use How to take charge of your cancer treatment and maintain a positive attitude Successful case studies of 40 of Dr. Forsythe's Stage IV cancer patients While Dr. Forsythe offers his patients conventional and alternative therapies on their own as well as an integrative option, *Take Control of Your Cancer* encourages cancer patients and their families to explore their treatment options and look for doctors who personalize treatment for optimal outcomes.

dr burzynski antineoplaston therapy: *The Complete Guide to Alternative Cancer Therapies* Ron Falcone, 1994

dr burzynski antineoplaston therapy: *Securing the Health of the American People* United States. Congress. House. Committee on Commerce. Subcommittee on Health and the Environment, 2000

dr burzynski antineoplaston therapy: *Women's Cancers* Kerry Anne McGinn, Kerry Anne McGinn, , NP, MSN, Pamela J. Haylock, 2003 Experienced oncology nurses address all the issues surrounding women's cancers. This edition offers new data on the long-term effects of cancer and its treatment, as well as updates on genetic influences, environmental factors, and analysis of complementary and alternative therapies. 70 black-and-white illustrations are included.

dr burzynski antineoplaston therapy: Millionaire & Healthy (Millionaire from being Poor:a Reasonable Way for Average People to Become Wealthy and Become Healthy until Your 90's ,

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targets patients, caregivers, and practitioners, offering a roadmap to understand cancer biology, evaluate treatment options, and adopt preventive strategies for improved outcomes. Bishop, a serial entrepreneur and cancer researcher driven by personal losses—his grandfather, father, and brother all succumbed to cancer—infuses the text with 19 years of research and a heartfelt call for thoughtful decision-making. The book opens with a prologue on the biology of belief, where Bishop explores how faith and positive thinking influence health, rooted in his Christian convictions. This sets the tone for a mind-body-spirit approach, suggesting that mental and spiritual resilience can complement physical healing. The introduction frames cancer as both a medical and personal journey, advocating for a balanced strategy that integrates conventional treatments like chemotherapy and surgery with non-toxic alternatives such as acupuncture, Gerson Therapy, and detoxification. Key sections delve into cancer's biological underpinnings, explaining the immune system's role in fighting malignant cells, the multistage process of carcinogenesis (initiation, promotion, progression), and the significance of early detection through screenings like mammograms and colonoscopies. Bishop highlights preventive lifestyle factors—diet (e.g., ketogenic, plant-based), exercise, sleep, and stress reduction—while introducing the unique oral-systemic connection, linking dental health issues like root canals to cancer risk via chronic inflammation. A central feature is an extensive treatment catalog, detailing over 50 therapies with their toxicity levels (low, moderate, high) and FDA approval status as of December 2024. Conventional options (e.g., radiation, immunotherapy) sit alongside integrative methods (e.g., hyperbaric oxygen, Ayurveda), each evaluated for benefits and limitations to aid informed choices. Bishop emphasizes personalized medicine, spotlighting genetic testing and targeted therapies to tailor care to individual needs. The book also tackles practical and ethical challenges: building a multidisciplinary care team (oncologists, naturopaths, caregivers), addressing financial toxicity—the hidden cost burden of treatment—and navigating survivorship, palliative, and end-of-life care. A critique of the pharmaceutical-driven healthcare system argues for a shift from profit-focused drug dependency to prevention-focused wellness. Looking forward, Bishop explores emerging technologies like liquid biopsies, AI diagnostics, and gene editing, blending them with holistic practices to envision a future of patient-centered cancer care. Ultimately, *Cancer Strategy - Critical Thinking* empowers readers with knowledge, hope, and resilience, urging a proactive, integrative approach to conquer cancer's challenges.

dr burzynski antineoplaston therapy: Prostate Health in 90 Days Larry Clapp, 1997 Dr. Larry Clapp was diagnosed with prostate cancer in 1990. Given the limited options of surgery and radiation, he began intensive research into self-healing alternatives and developed a treatment for prostate cancer, which he successfully used to cure himself. Today, cancer-free, he continues his research while helping others using nutrition, massage, herbs, homeopathy, and other alternatives.

dr burzynski antineoplaston therapy: Alternative Medicine, Second Edition Larry Trivieri, John W. Anderson, 2013-03-27 The Bible of Alternative Medicine Learn the health secrets that millions of readers have discovered in the book that is revolutionizing health care in the United States. *Alternative Medicine: The Definitive Guide* is packed with lifesaving information and alternative treatments from 400 of the world's leading alternative physicians. Our contributors (M.D.s, Ph.D.s, Naturopaths, Doctors of Oriental Medicine, and Osteopaths) offer the safest, most affordable, and most effective remedies for over 200 serious health conditions, from cancer to obesity, heart disease to PMS. This guide is easy enough to understand to make it perfect for home reference, while it would also make a fine resource for health care providers interested in learning more about alternative medicine. • 70% of Americans currently use some form of alternative medicine • This 1,136-page encyclopedia puts all the schools of alternative medicine-50 different therapies-under one roof • Highlights dozens of actual patient stories and physician treatments.

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