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Burzynski's Antineoplastons

A truly different approach to treating cancer came to the United States in 1970 when physician and medical researcher Stanislaw Burzynski emigrated from Poland. Dr. Burzynski's unique method is *not* based on healing the body with herbs, diet, nutrition, cleansing, or enzymes, as are the methods presented in previous chapters. Yet his approach is heralded as one of the most promising cancer treatments ever developed. Though expensive, it is non-toxic and has brought about countless complete cures. Those suffering from lymphomas and brain cancers, including pediatric brain cancers, do particularly well. For those who can afford it or who qualify for trials, Burzynski's approach is currently being offered at his clinic in Houston, Texas, where patients are treated by a large staff of qualified doctors.

History

Like Dr. Gerson, Dr. Burzynski came to this country with an impressive academic medical background. Born in Poland in 1943, he showed remarkable abilities in chemistry at an early age. He studied medicine and, at the age of 24, graduated first in his class of 250 students at his medical academy. One year after obtaining his M.D., he also obtained a Ph.D. in biochemistry. Stanislaw Burzynski gained recognition as one of the youngest people in the history of Poland to receive *both* an M.D. and Ph.D. diploma.[1]

Growing up in Poland during and after World War II was not easy for Stanislaw. His father, a teacher, was imprisoned for two years by the Nazis because he continued to teach Jewish students after the Nazis had segregated Jews into walled ghettos. In the late 1940s, when Poland was overrun and controlled by communist Soviet Union, life became difficult in other ways. The Burzynski family property was taken away from Stanislaw's family, and his brother began to fight in the anti-communist underground, risking his life on a daily basis. Stanislaw's brother was eventually killed in 1948 while fighting in the resistance movement. While still a boy, Stanislaw often had to defend himself in physical fights that were triggered by prejudices during this class-conscious era of Poland. As a result of his own physical fights, and after watching his brother and father stand up to oppression, Burzynski turned into a person who knew the meaning of fighting for what one believed in.

When Burzynski started medical school, he quickly became involved in research. During his years as a medical student, he studied amino acids and peptides and published papers about his work. He first started analyzing amino acids in wild mushrooms to see if he could turn some of the toxic chains of amino acids that were present in the mushrooms into new antibiotics. Then, he moved on to studying other organic substances, including blood and urine, that contained peptides. (Peptides are short chains of amino acids.) He began finding peptides in human blood and urine that no one had ever known about before. According to Burzynski, "Nobody had bothered to identify them. Nobody cared what they were."[2]

Dr. Burzynski decided to see if the unidentified amino acid compounds he was finding might be related to kidney disease, and he prepared his doctoral thesis on this subject. The work of identifying these compounds was difficult and required very modern chromatographic equipment as well as hard-to-get chemicals.

After a while, Dr. Burzynski began to wonder if the peptides he had discovered might be linked, not only to kidney disease, but also to cancer. He suspected this as a possibility because people with primary kidney disease (PKD) appeared to have an overabundance of some of these peptides, and he knew that another researcher in Poland had discovered that people with PKD rarely suffered from cancer. Dr. Burzynski began to wonder if the peptides themselves were able to inhibit cancer in some way.

Just as Dr. Burzynski was beginning to look into this, he began to have problems with the communist regime controlling Poland. Dr. Burzynski

had already refused to join the communist party and this had branded him as a dissenter and independent thinker. One way the Polish authorities dealt with free thinkers at that time was to draft them into the army. Thus, in 1970, Dr. Burzynski received orders to report for military duty. If he complied, he would be sent to North Vietnam to fight with the Viet Cong. Because of how the Polish military worked, this could mean it might be decades before he would be able to return to Poland and his scientific research.

Instead of reporting for military duty, Dr. Burzynski quickly obtained a passport and immediately left Poland for New York. When he arrived in the United States, he only had a few dollars in his pocket and his paperwork documenting the 39 peptides he had identified. Soon, Dr. Burzynski received a message from Poland that he would never be allowed to work in any medical school of that country again. He knew then that he would never be able to go back to his home country.

Luckily, shortly after arriving in the United States, Dr. Burzynski got a job at Baylor College of Medicine in Houston. In the university's department of anesthesiology, a scientist named Georges Ungar was studying brain peptides and how those peptides impacted the transmission of memories. Dr. Burzynski's own work on peptides fit right in.

When Stanislaw Burzynski started work at the Baylor College of Medicine in Texas, he had already identified naturally occurring peptides (small chains of amino acids) that could be found in the blood of healthy persons, but not in the blood of people with cancer. Since he thought that the types of peptides he had discovered might have an *inhibitory* effect on cancer, he chose to name them "anti-neoplastons." The term "anti" means opposing, or against, and a common medical term for cancer is "neoplaston." The term neoplaston was derived from the Greek word "neoplasm," which means "new growth."

At Baylor, Dr. Burzynski was able to move forward with his research and to formulate his own theory that certain types of peptides, or antineoplastons, were actually part of a *biochemical communication system* that complimented the rest of the immune system and could regulate the out-of-control division of cancer cells to eventually bring them back to a normal state. He also discovered that not all the peptides he isolated had an impact on cancer cell cultures. In fact, most of them did not show any anti-cancer activity.

As he continued his research, Dr. Burzynski began to identify specific antineoplastons that had anticancer properties against certain types of

cancers. Then, he found one special antineoplaston that actually showed anti-cancer activity against a *broad spectrum* of cancer types. This discovery was huge. Dr. Burzynski called the broad spectrum antineoplaston "Antineoplaston A" and began to concentrate his cancer research on it.[3]

Also while doing research at Baylor, Dr. Burzynski met his future wife Barbara. Barbara was an M.D. and Polish immigrant as well. Barbara Burzynski soon joined Stanislaw in his research, and over the next 15 years or so they worked together, isolating antineoplastons, breaking down Antineoplaston A into smaller fractions, and learning how to produce the most effective antineoplastons synthetically. In 1974, Dr. Burzynski was granted research funding and support from both the National Cancer Institute and the University of Texas M.D. Anderson Cancer Center.

After a while, the use of antineoplastons in a laboratory setting on cancer cell lines was going so well that it was time to start using them in animal studies. However, what Dr. Burzynski found was that, while the antineoplastons he had isolated could shut down human cancer cell lines, they had very little or no effect on similar cancers in animals. In other words, he discovered that the antineoplastons were "species-specific" in their chemical communication traits.[4]

Since Dr. Burzynski's antineoplastons were ineffective on animal cancers, he decided in 1976 that it was time to go straight to their use on people. He chose to start with terminal cancer patients who were considered untreatable, or for whom all other treatment had failed. Since he had passed the Texas medical licensing exams in 1973, Dr. Burzynski felt he was qualified to do this. But the Baylor College of Medicine would not allow him to perform human clinical trials unless he had an investigational new drug (IND) permit from the FDA. Dr. Burzynski spent months filing paperwork to get the IND, a process that generally only takes a matter of weeks for pharmaceutical companies with promising new drugs. Apparently, the FDA was *not* interested in complying with Burzynski and kept asking for more and more documentation. Burzynski kept supplying it until, eventually, his IND application comprised thousands of pages—and when stacked on the floor was over 6 feet tall.[5]

Dr. Burzynski was never given the IND permit by the FDA. However, he finally got permission by one independent hospital to test his antineoplaston compounds at their facility—as long as he only used his protocol on people for whom all other treatment had failed. These early antineoplaston treatments on humans showed great promise. He began

to see people recover who'd been given only a short time to live by the medical establishment. With more and more refinement of his technique, Dr. Burzynski's treatment approach began to show an overall effectiveness that was *better* than traditional cancer treatment methods.

In 1977, Dr. Burzynski opened up his own private practice in Houston, Texas, which he called the Burzynski Clinic. This became the place where he could legally administer antineoplastons to desperate patients. In the early years, the production of antineoplastons was laborious because the peptides had to be isolated from human urine. Eventually, however, Burzynski perfected a way to synthesize the antineoplaston compounds he needed from chemicals. He developed a large manufacturing plant in Houston and made sure that it met every FDA standard for manufacture of pharmaceuticals. The Burzynski Clinic in Houston is now a large treatment center that employs about 20 physicians and a large staff of other medical personnel.

Over the past 25 years, thousands of patients have been treated at the Burzynski Clinic with antineoplaston therapy for terminal cancer and other types of devastating diseases. Dr. Burzynski has authored and co-authored 184 scientific publications and has presented scientific papers at international conventions. He also holds over 160 patents for his treatments in 35 countries around the world. Antineoplaston therapy is non-toxic and has brought about long-term recovery for countless cancer patients.

Julian Whitaker, M.D., of southern California has looked into Dr. Burzynski's approach in detail. He explains how Burzynski's treatment works against cancer in this excerpt from one of his newsletters:

> Antineoplastons consist of small peptides, components of protein, and peptide metabolites that are given by mouth or intravenously. They work by entering the cell and altering specific functions of the genes: Some activate the tumor suppressor genes that prevent cancer, while others turn off the oncogenes that force the cancer cell to divide uncontrollably. Like rifle shots to the heart of the malignant process, the antineoplastons cause cancerous cells to either revert to normal or die without dividing.[6]

In a 1996 special supplement of his popular monthly newsletter, Dr. Whitaker reported numerous cases of people who had recovered from cancer using antineoplaston therapy, three of which are reported below as case stories 1 through 3. Case stories 4 and 5 were testimonials I recorded from Burzynski patients I spoke with myself.

Case Stories

Case Story #1—Adult Malignant Brain Tumor

A 35-year-old school psychologist named Pamela began experiencing double vision in 1987 and, after going through tests, was diagnosed with a tumor in her brain stem. It was classified as an "anaplastic astrocytoma," grade 3. She underwent surgery and two months of radiation, but these treatments did not get her cancer under control. The highly malignant tumor in her brain just kept growing. She was offered chemotherapy, but refused it because her doctors told her there wasn't much chance the chemo would do any good anyway.

In April 1988, Pamela had a follow-up MRI which showed that her tumor was about the size of a quarter, about twice as large as when she was first diagnosed. At this point, a resident at the University of California, San Francisco hospital told her to get her affairs in order because she only had 6 weeks to 6 months to live.[7] Luckily for Pamela, she then found out about the Burzynski Clinic. By July 1988, she had started on antineoplaston therapy.

To Pamela's sheer joy, an MRI in September 1988 showed her tumor had decreased 30 to 40 percent in volume. By the following January, there was no sign of the tumor in her brain at all.[8] She continued on antineoplastons for about two years and her tumor never showed up again. When she was re-checked in 2003, Pamela was still doing fine and had not received any treatment of any kind for 13 years![9]

Case Story #2—Breast Cancer Metastasized to the Bones

In 1990, a woman named Carol underwent a mastectomy and received chemotherapy for "infiltrative and intraductal cancer of the breast."[10] Four years later, she found out that her cancer was still growing and had spread to her bones. First discovered in her spine, she now had cancer in her hip, clavicle, and ribs as well.

It was at this point that Carol began antineoplaston therapy from the Burzynski Clinic. The antineoplaston treatment first halted the spread of her cancer and then began to reverse it. About a year and a half later, the cancer in Carol's clavicle, hips, and ribs was completely gone and she only had a slight involvement of the lumbar spine which was, in fact, reducing. She also claimed to be feeling better than she had in 10 years.