

DR. MICOZZI'S

***INSIDERS'* CURES**

**The “ONE WORD”  
Battle Plan to  
Crushing Cancer**

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Until this very moment in medical history, the common notion in the mainstream crusade against cancer is: Chemo is as good as it gets.

Of course, I always knew this has been untrue. And if you’ve been curious enough to poke your head up from the sea of cancer misinformation we’re drowning in, maybe you’ve glimpsed the truth for yourself.

Chemotherapy is a desperate grasping at straws in an effort to “kill the cancer before we kill the patient.” But it also blatantly ignores the mountains of complementary medical research proving that cancer can be prevented and treated without toxic poison.

You’ll get a glimpse of that mountain for yourself in my *Classified Cancer Answer* exposé.

But in the last few years, even some of the most die-hard mainstreamers have taken notice of a new form of cancer treatment called anti-angiogenesis. It’s radically different from the “poison and pray” chemo approach to treatment. An approach many of us have had to watch loved ones suffer through. But as you’ll see, the difference in methodology is only the first of many reasons to have hope.

### **The “AH-HA!” moment modern medicine was praying for**

In 1998, *The New York Times* created a media frenzy...they reported a scientist by the name of Dr. Judah Folkman had discovered a way to eradicate tumors in mice. The frenzy swelled to such heights that Nobel laureate, Dr. James Watson was quoted as saying, “Judah is going to cure cancer in two years,” And, in effect, Judah did—so why haven’t you heard about it over the past decade?

Indeed, Dr. Folkman was a special kind of scientist. I admired his natural instincts in following the science so much, in fact, that even before the media frenzy in 1998, I personally invited him to speak in Philadelphia to a standing-room only crowd of distinguished physicians and scientists. (This was when I was director of The College of Physicians of Philadelphia, and I was honored to have him come and enlighten my guests).

At that point, Dr. Folkman had already been following this particular scientific revelation for over 30 years.

It all started with the question...how can tumors grow so fast and so aggressively?

During his time at the National Naval Medical Center in Bethesda, MD, he had noticed cancer cells were unable to organize into tumors bigger than a few millimeters in vitro (meaning in the test tube, outside of the body). So somehow tumors were dependent upon the human body for growth.

And then he saw it.

### **Your body is being hijacked**

Dr. Folkman was already considered to be the founder of angiogenesis research, so he knew what to look for. But what exactly is angiogenesis?

It’s your ability to grow new capillary blood vessels in the body.<sup>1</sup> It’s a special process. And in balance, it shouldn’t happen too often (mostly during menstruation for women, wound healing, and of course, while a fetus is still within the womb).

But when the body needs to divert more blood and nutrients to a specific area, it activates endothelial cells in the lining of blood vessels to release enzymes called proteases. These allow endothelial cells to “bust out” of the current capillary they’re in and form new capillaries. This ability to form new blood vessels obviously helps with the healing process, human growth, and supplying much-needed nutrition throughout your body.

### **But it can turn deadly...**

The big break came when Dr. Folkman applied his knowledge of angiogenesis to cancer research. For decades, researchers had marveled at a tumor’s ability to grow exponentially larger in such a short amount of time. But what if these cancerous tumors were using your body to feed themselves and even spread elsewhere?

It wasn’t long after that Dr. Folkman proved tumors secrete angiogenesis-inducing factors (mitogens) which cause neighboring normal capillaries to extend and supply blood to the tumor.<sup>2</sup>

It was an incredible step—one that could eventually lead us away from the “poison and pray” treatment of chemotherapy, which oncologists appear so eager to administer these days.

This single hypothesis spawned nearly uninterrupted breakthroughs for almost 40 years. It’s the kind of watershed moment about which every scientist dreams. Two of the biggest breakthroughs came in identifying a whole family of angiogenic peptides and

in showing that once you shut them down, you can choke tumors out of existence.<sup>3,4</sup>

### **What does that mean for you and your family?**

*“Angiogenesis research will probably change the face of medicine in the next decades, with more than 500 million people worldwide predicted to benefit from pro- or anti-angiogenesis treatments.”<sup>5</sup>*

That is a quote from the January 2006 issue of *Nature*—and they’re right.

Anti-angiogenesis therapy is already turning heads in research facilities and hospitals all over the world. That’s why over \$4 billion has recently been spent researching anti-angiogenesis, making it one of the biggest medical research initiatives in history.<sup>6</sup>

In fact, there are already 374 clinical trials in the works and vested interests are practically drooling over the profit potential.<sup>7</sup>

Sadly, Dr. Judah Folkman passed away recently at the age of 75, but the research he started is now finally thriving. New angiogenesis inhibitors are being discovered all the time. Doctors are now witnessing tumors shrink and in some cases wither away completely. In fact, this therapy should be able to make chemotherapy extinct someday.

But the best news is that you don’t have to wait another minute to start putting this revolutionary technique to work for yourself. As usual...

### **Nature is already seventy steps ahead of us**

...And counting. The great news for all of us is that these angiogenesis revelations have shone light on an entire world of natural anti-angiogenesis compounds.

Much in the same way you might support your immune system with vitamin C, or your joints with *Boswellia* or your prostate health with saw palmetto... there are safe and natural ways to support your body’s angiogenesis balance. Now that you know about angiogenesis, it’s time to find out just how easily you can fill your diet with natural angiogenesis inhibitors and help your body stop cancer cell growth before it ever gets out of hand.

### **Vitamin E (alpha tocopherol)**

It’s important to note that natural vitamin E consists of four tocopherols and four tocotrienols. The reason for the mixed media on vitamin E is that the current

cancer establishment insists on testing d-alpha tocopherol or dl-alpha tocopherol, both of which will not yield anti-cancer effects.

However, alpha tocopherol can neutralize the effects of certain cancer-causing compounds (such as N-nitrosamines). It may also stimulate the release of antitumor factors from the immune system. Animal studies suggest it can prevent some chemically induced cancers and it may reduce the size of tumors. One study, in humans, suggested a beneficial effect associated with the use of vitamin E in patients with superficial premalignant lesions in the mouth.

And it can be used in conjunction with some of today’s more popular cancer treatments. It has been reported that a supplement of 800 mg per day of alpha-tocopherol, taken during radiation therapy for breast cancer, reduced side effects and improved general well-being.<sup>8</sup>

One of the best ways to work vitamin E into your diet is by enjoying a favorite fruit of mine. It’s known around the everglades as “the alligator pear.” You’ll know it as the avocado. This fruit is jam-packed with vitamin E as well as 20 essential nutrients like fiber, potassium, B-vitamins, and folic acid.<sup>9</sup> And healthy essential fatty acids.

If you’re going to supplement, I would recommend 100 IU of vitamin E per day.

### **The “Sun-Maid” Secret—Resveratrol**

You may recognize the name of this plant compound for the “anti-aging” claims that are made. That may all be well and good, but there’s a much more intriguing potential to resveratrol you may not hear elsewhere—it’s potential to act against angiogenesis. This phytochemical compound is found in grape skins and grape seeds—and so in wine. In laboratory studies, it has shown anti-cancer effects by inhibiting the growth of over 12 different types of cancer cells, including prostate, breast, colon, pancreas, and ovarian carcinomas.<sup>10</sup>

Recently, resveratrol has been reported to be an angiogenesis inhibitor that is sufficiently potent in suppressing FGF-2 and VEGF-induced neovascularization *in vivo*.<sup>11</sup> Resveratrol has been shown to directly inhibit bovine endothelial cell proliferation, migration, and tube formation *in vitro*.<sup>12</sup>

In fact, resveratrol has the unique, balanced ability to

provide either pro- or anti-angiogenesis effects depending upon the circumstances. In cancer, resveratrol has been shown to inhibit angiogenesis in tumors.<sup>13</sup>

### **The skin cancer savior—Genistein**

This is a naturally occurring isoflavonoid found in soy products and certain other legumes like fava beans. It has been found to have anticancer activity in multiple tumor-cell types. In one study, genistein was found to inhibit blood vessel formation in melanoma cells both in vivo and in vitro.<sup>14</sup> It has also been found to play a potential role in cervical cancer and prostate cancer. Epidemiological studies have shown there is an inverse relationship between dietary intake of genistein and cancer incidents, including breast, colon, and prostate cancer.<sup>15</sup>

A generally recommended dose is 50 mg per day. I recommend a brand called Bonistein™ Genistein.

### **Curcumin**

This powerful spice from India has been associated with dozens of health benefits by this point, as is usually the case with these natural wonders, but its anti-angiogenic properties are all but unsung.

More commonly known as turmeric, this spice has been used in Ayurvedic medicine for centuries and can serve as an antioxidant, analgesic, anti-inflammatory and antiseptic. Curcumin affects a variety of growth factor receptors and cell adhesion molecules involved in tumor growth, angiogenesis, and metastasis. In fact, curcumin is currently being examined specifically for effects on head and neck cancers, the sixth most common cancer worldwide.<sup>16</sup>

While the research still hasn't pinpointed an ideal dosage for fighting cancer, studies have used anywhere from 3,000 to 10,000 mg per day. A safe average dosage is 3,000 to 4,000 mg per day of a standardized supplement. Or, some recommend eating 1 teaspoon of turmeric per meal, more like a food quantity as a spice.

### **Fisetin**

This naturally occurring pigment is found in many fruits, including strawberries, grapes, mangoes, and others as well as green tea. Recently, Indian researchers set out to determine if fisetin inhibits angiogenesis. The researchers first exposed endothelial cells to fisetin and found that it strongly inhibited the growth of endothelial cells and the ability of these cells to or-

ganize into new capillaries.

Even better, fisetin strongly suppressed production of two key regulators of angiogenesis: vascular endothelial growth factor and endothelial nitric oxide synthase.

All of this combined shows that fisetin inhibits angiogenesis both in vitro and in vivo and helps to squash many of the pro-angiogenic factors produced by cancer.<sup>17</sup>

### **Piperine**

Piperine (*Piper nigrum*) is the compound in black pepper that gives it its kick. It has a long history of use in Ayurvedic and Southeast Asian medicine—used as a general restorative tonic.

Piperine has been shown to substantially increase the body's ability to absorb the nutrients in foods and supplements. It has been shown to work a few different ways: by interfering with the body's ability to metabolize (or use up) substances, stimulating absorption of nutrients through the intestinal lining, and actually slowing down the action of the intestines in order to give the body more time to absorb the nutrients there. Similar to super-antioxidants that support other antioxidants, piperine can increase the effectiveness of other beneficial nutrients, including antioxidants enzymes.

Research has shown it can boost the bioavailability of cancer-fighter curcumin substantially. This is important, since curcumin is not easily absorbed by the body.

In addition to these complementary effects, piperine has been shown to have direct antioxidant, anti-tumor, and anti-inflammatory properties.<sup>18</sup> A recent in vitro study showed piperine is able to directly stimulate immune cells.<sup>19</sup> And in recent tests on mice, piperine was shown to inhibit the spread of breast cancer cells in vitro and in vivo.<sup>20</sup>

A generally recommended dose is 20 mg per day of a brand called BioPiperine® Piperine, which is a 50:1 standardized extract of *Piper nigrum* fruit.

### **And the list goes on...**

These are just a few of the anti-angiogenic compounds we know about today. It's quite remarkable just how many researchers are finding—and with the growing list, it's becoming quite easy to integrate these compounds into your daily diet. Below is a list of some of the most readily accessible natural, anti-angiogenic compounds from foods and spices.

If you’re concerned about cancer, one of the most important steps you can take is to load your plate, meal after meal, with a large variety of these anti-angiogenic foods. And be sure to experiment with the use of fresh herbs, to add even more protective benefits to each meal. And of course, keep them organic and pesticide-free if you can.

### **Fruits:**

Apples, blackberries, blueberries, cherries, clementine tangerines, cranberries, grapefruit, lemons, nectarines, oranges, peaches, pomegranates, raspberries, red grapes, strawberries, and tomatoes.

### **Herbs & Spices:**

Basil, black pepper, cilantro, cinnamon, cloves, cocoa powder, flaxseed, garlic, ginger, ginseng, lavender, licorice root, nutmeg, oregano, parsley, rosemary, tarragon, thistle, thyme, and turmeric.

### **Vegetables:**

Artichokes, beets, bok choy (Chinese cabbage), broccoli, Brussels sprouts, red cabbage, carrots, cauliflower, chard, collard greens, endives, fennel, garlic, kale, mustard greens, olives, onions, peas, parsnips, peppers, pumpkins, radishes, salsify, scallions, shallots, soybean sprouts, spinach, string beans, sweet potatoes, tomatoes, turnips, watercress, and winter squash.

### **Mushrooms:**

Enoki mushrooms, king oyster, maitake, matsutake, oyster mushrooms, reishi mushrooms, and shiitake.

### **Seafood:**

Cuttlefish, flounder, haddock, halibut, herring, mackerel, oysters, salmon, sardines, sea cucumbers, seaweed, shrimp, sole, squid, squid ink, and tuna.

### **Legumes:**

Almonds, cashews, chestnut, edamame, fava beans, lentils, lima beans, pine nuts, tofu, natto, and walnuts.

### **Beverages:**

Apple cider, cocoa powder, coffee, green tea, miso, red wine, soy milk, and white wine.

You’ll recognize many of these foods from the list of cancer preventive foods compiled by the British Empire Cancer Campaign of the 1920’s and promoted as part of the Nazi War on Cancer during the 1930’s. Decades later, the U.S. National Cancer Institute seized on their misunderstanding about beta-carotene as the “magic bullet” ingredient that explained the anti-cancer activity of these foods. But they missed the boat, as I explain further in *Classified Cancer Answers* when it comes to the vitamins that are really important, and now we have the new evidence about the role of anti-angiogenesis factors in these foods.

### **Sources:**

1. <http://www.angio.org>
2. Cavallo T, Sade R, Folkman J, Cotran RS (1972) *J Cell Biol* 54:408–420
3. Folkman J, Klagsbrun M (1987) *Science* 235:442–447
4. Ausprunk DH, Falterman K, Folkman J (1978) *Lab Invest* 38:284–294
5. *Nature* 01/2006; 438(7070):932-6. DOI:10.1038/nature04478
6. <http://www.angio.org/understanding/fact.php>
7. <http://www.scienceofcancers.org/brain-cancer-clinical-trials.php>
8. *Complementary and Integrative Medicine in Cancer Care and Prevention*. New York: Springer, 2007, pg. 188-193
9. [www.californiaavocado.com](http://www.californiaavocado.com)
10. Aggarwal BB, Bhardwaj A, Aggarwal RS, Seeram NP, Shishodia S, Takada Y. *Anticancer Res* 2004 Sep-Oct;24(5A):2783-840
11. E. Brakenhielm, R. Cao, Y. Cao. *FASEB J*, 15, 1798–1800 (2001)
12. K. Igura, T. Ohta, Y. Kuroda, K. Kaji. *Cancer Lett*, 171, 11–16 (2001)
13. *In Vivo* 2007 Mar-Apr;21(2):365-70
14. *Journal of Experimental & Clinical Cancer Research* 2009; 28:124
15. *Drug News Perspect* 2009; 22(5): 247-254
16. *Molecular Cancer* 2011, 10:12
17. Bhat TA, Nambiar D, Pal A, Agarwal R, Singh RP. *Carcinogenesis* 2012 Feb;33(2):385-93. doi: 10.1093/carcin/bgr282. Epub 2011 Dec 1
18. *Food Chem Toxicol* 2012; 50(7): 2,342-2,348
19. *Genet Mol Res* 2012; 11(1): 617-627
20. *Acta Pharmacol Sin* 2012; 33(4): 523-530



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