

National Cancer Research Foundation

Prostate

We believe that all cancers are the result of a nutritional deficiency to the nervous system, which causes a change in biofeedback communication, all cellular nutrition, DNA replication and cellular manufacture. Upon, correcting these deficiencies, the body will function in a normal manner, resulting in normal cell function, the cancer cells will no longer be able to survive and die off.

The nervous system is comprised of the nerve cells as we know them, hormones, and lymph nodes. Their functions are interactive, however, the medical field does not acknowledge this involvement or incorrect involvement due to nutritional deprivation as the cause of many illnesses. As a result, the nervous system is further starved by conventional treatments, hindering the progression initially, the body re-evaluates the environment and produces new cells in response to the further depleted environment.

The doctors state that the “cancer is now more aggressive” instead of understanding the concept we derived. We found that proper nutritional restoration to nervous system and cell nutrition throughout the body causes corrective domino - effect reactions. Upon nutritional correction, the body resumes correct cell production. When the environmental factors are correct, the body no longer manufactures the cancer cells, the existing cancer cells are no longer able to exist in the corrected environment and die in a natural manner, like algae in a swimming pool.

The high failure rate in treating cancer is because the medical society as a whole is treating symptoms and not the cause. Because the cause was never addressed nor corrected, the progress continues because nothing corrected the pathway. We are showing - correct the cause, the body will make corrective steps, resolve the problem, restore normalcy.

Our observations have provided interesting results which tend to confirm our unproven theories:

1. Those who never had any other therapy appear to respond to the nutritional program faster and more effectively.
2. Dosage 7 or 8 showed dramatically better results than of dosage 4.
3. Gleason 9 patients without other previous treatments showed stable but slower improvements.

In addition, they felt numerous improvements overall.

4. Lupron shuts down the pituitary gland function and overall hormonal production. Too many doctors focus only on the PSA, the other side effects are not properly considered. They drop the PSA down to almost “0”, which immediately biologically castrates the patient. Testosterone drops from a normal 700 down to about 20, extinguishing many needed bio-chemical reactions and their resulting domino-effect reactions that would naturally follow. Doctors seem to believe that these extinguished functions will slow down the prostate cancer growth, and that prostate growth is dependent on hormonal production. The patients suffer biological castration, muscular and other physical distress symptoms, and the hormones required for numerous bodily functions have been thoroughly depleted. It takes approximately 18 months before the Lupron leaves the body totally, it's strongest affects are during the first 3 - 4 months, still effective for the first 12 months in the body. Because of this, we expect those on the program who took Lupron, PC-Spes or other hormonal treatments to expect their PSA levels to rise up through 12 months after stopping those hormonal treatments. After that period, the PSA levels should start to decline back down. Those who panicked from rising PSA's and stopped the program went on to other programs, we did not see them benefit long-term from those other programs. Those who stayed with the program, saw these events take place, meanwhile, they have shown increased improvements all around. Now after time has passed, they are enjoying lower and normal PSA's and very good overall health.

5. PC-SPES altered the hormonal metabolism. Most people stopped only because it was taken off the market in February 2002. When they stopped, the PSA rose, they were concerned, however, the primary cause of the rise was not cancer growth-related. Instead, the accurate cause was that the PC-Spes and other hormonal treatments, such as Lupron, were specifically hindering the biofeedback and hormonal metabolism, which lowered the PSA. Meanwhile, the nutritional program was causing the biofeedback to initiate the manufacture of hormones to restore the depleted source. The battle between the hormonal treatments functional effort to stop production and the natural nutritional program inducing the hormonal production. The result was additional hormonal production to compensate for the hormonal treatment's adverse and un-natural process. The PSA picks up on that through the bio-feedback receptors, as a result, the PSA level rises. This continues while the hormonal treatment is still within the body causing this event.
6. Strong correlation between Lupron and bone cancer, blood clots, mood swings and depression.
7. A high relationship exists between PC-SPES, LUPRON and other hormonal treatments with osteoporosis, Hip & knee replacements, also related to bone issues and poor calcium metabolism.
8. While PSA may be a marker for prostate cancer, where "4" is an accepted maximum, we have seen many people with a PSA of "1.6", yet diagnosed with advanced prostate cancer, Gleason 9. Similarly, some people with a PSA of 12 undergo radical prostate surgery and no cancer was evident after all other testing and biopsies.
9. Urine pH reflects the alkaline/acid chemistry. The diet and choice of foods will affect prostate progress/hinderance. The volume of correct nutrients is important. Some people incorrectly focus on pH only and regulate the nutritional intake by the pH, which is not a correct procedure. However, when the body is producing a pH below 7.0, it appears that the chemistry is more conducive to cancer cell survival. And PSA numbers tend to show higher readings while the person is more acidic. Therefore, it also appears that the higher pH will correlate with a weaker survival ability for the cancer cell, and the PSA may or may not reflect that situation.
10. It has been shown that certain activities will cause a PSA to rise due to any physical stimulation to the prostate, whether it be simply riding a bicycle, sexual activity, hot shower, riding in a car, etc. Therefore, again, the PSA is not accurate.
11. We observed that most PSA numbers did not show any specific relevancy to actual prostate cancer and instead reflected a response to various stimulating affects not relative to the accurate status of prostate cancer, including the disturbance of hormonal metabolic function. In addition, there were many factors to affect the PSA reading, which we believe causes mis-leading interpretations. Instead of correcting this disturbance, doctors or patients themselves attacked the symptom instead of correcting the cause.
12. The most accurate testing procedure that we saw was the Color Doppler, developed by Fred Lee.
13. Prostate, and other-type cancer patients in general, never take into consideration that their diet and lifestyle requires attention and improvements.
14. Those people who never took PC-SPES tended to respond best. Almost all who were PC-SPES oriented tended to focus only on "PSA" and were not coherent of the more important factors. They were extremely nice people, however, we stopped working with them because too many were nasty if they didn't get immediate results or if we didn't tell them what they wanted to hear.