



## Herbal Cancer Remedy: An Alternative Treatment Option for Cancer Patients

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### Abstract

**Background:** Cancer is certainly one of the most upsetting things that can happen in a life time, it completely disturbs the family of the affected person. In resource-poor rural settings in India, the cost of chronic illness, especially cancer is much higher than that of communicable diseases. Lack of health insurance, comprehensive government sponsored treatment schemes and crowded clinics compel many cancer patients to look for treatment far outside of the mainstream medicine. Many poor cancer patients venture into herbals, homeopathy, local traditional medicine or even black magic.

**Objective:** The aim was to follow up two cancer patients treated with an herbal therapy called 'HUMA'.

**Patients and Methods:** Out of the two cancer patients that were followed-up one had oral cancer and the other had high grade spindle cell sarcoma of the left distal forearm. Both these patients were from rural areas and opted for alternative treatment out of economic compulsion. The herbal formulation was derived from various important Ayurvedic herbs, viz. *Azadirachta indica*, *Curcuma longa*, *Embelica officinalis*, *Ocimum sanctum*, *Semecarpus anacardium*, and *Tinospora cordifolia*, among others.

**Results:** Cancer regression was observed in both the patients without any visible adverse side effects. Complete remission of cancer was observed in the oral cancer patient.

**Conclusions:** In absence of any conventional therapy the regression of cancer that was observed in these patients can be attributed to the alternative herbal treatment.

**Keywords:** HUMA; Alternative cancer treatment; Oral cancer; Spindle cell sarcoma

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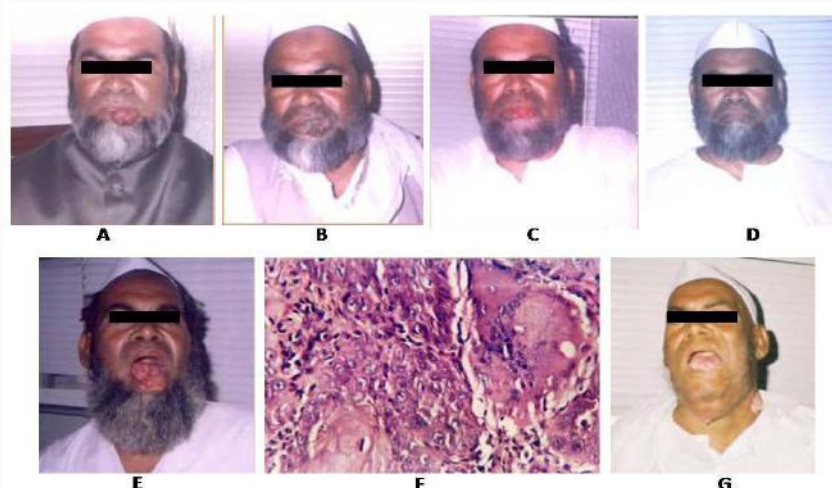
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### Introduction

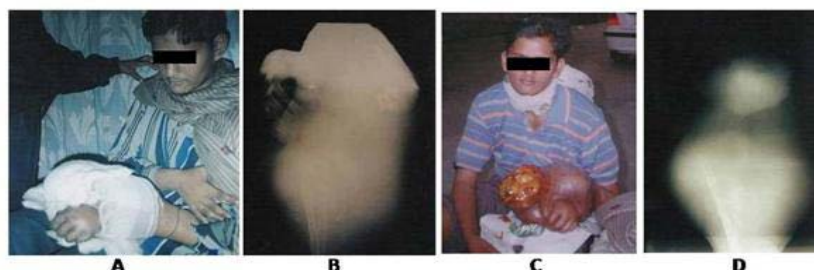
Although there have been great achievements in the battle against cancer over the past decades; however, cancer still remains one of the leading causes of death in developing countries like India and China [1]. There are more than three million prevalent cases of cancer in India, though the real number is likely to much larger as many cases left undetected and unreported. India is projected to see 1.23 million new cancer cases a year, with a 20% increase expected by 2020, leading to 1.7 million new cases a year by 2035. While this is alarming growth, other cancer-stricken countries are in the same range with much smaller populations [2]. There are around 1,600 oncologists for India's population of 1.3 billion, or one oncologist for every 812,500 people, far from the optimal rate of one per 100,000. Due to these shortages, many who encounter and treat cancer sufferers are without qualification. Nearly 80% of patients from rural areas first present their cancer to practitioners with no allopathic qualifications.

The majority of Indian cancer patients have late stage incurable diseases (75% to 80%) when first diagnosed [3], calling for a longer duration of treatment involving surgery, chemotherapy and radiotherapy, besides medication and check-ups. Due to lack of health insurance, comprehensive government sponsored treatment schemes a significant number of patients stop visiting hospitals after two or three cycles of chemotherapy primarily because of financial constraints. They also drop-out from regular follow-up visits [4] and try some alternative methods for cancer treatment. Many poor cancer patients venture into herbals, homeopathy, local traditional medicine or even black magic. The effectiveness of these alternative therapies is questionable; however, many economically backward cancer patients opt for such treatment out of financial compulsion.

Botanical medicines have been used traditionally by herbalists and indigenous healers worldwide



**Figure 1:** Response of herbal therapy HUMA in oral Cancer A-At presentation; B- After 1month; C- After 6 Months; D- After 1 Year, E-Relapse of disease; F-Histopathology; G-After 3 months after restart of therapy.



**Figure 2:** Response of HUMA in treatment of spindle Cell sarcoma A&B-At presentation; C&D - After 3 monthes; B&D-X-ray of the tumor.

for the prevention and treatment of various diseases [5]. Herbal products are gaining popularity in the treatment and prevention of various diseases. Specific to cancer, studies reported that herbal products are mainly used to slow down the disease progression and to relive symptoms [6]. In this article we report the progression of two patients who could not afford to undergo conventional cancer therapy after diagnosis because of financial problems and tried an herbal therapy. The aim of the present investigation was to follow up two cancer patients treated with an herbal therapy called 'HUMA'.

## Materials and Methods

The herbal therapy HUMA is derived from various important Ayurvedic herbs, viz. *Azadirachta indica*, *Curcuma longa*, *Embelica officinalis*, *Ocimum sanctum*, *Semecarpus anacardium*, and *Tinospora cordifolia*, among others. The herbal medicines are orally administered and well tolerated by patients [7]. Instances of adverse side effects are less due to individual dosing of the medicine. The alternative cancer therapy HUMA is quite popular in Lucknow, Uttar Pradesh. We followed two sarcoma patients one was suffering from oral cancer and the other had distal forearm sarcoma. Both the patient only received HUMA for the treatment of cancer after diagnosis.

## Results

The follow-up of two cancer patients treated with the herbal therapy is described.

### Case Presentation

#### Case 1

A 58 years old male who was a chronic tobacco edict (Gutka)

presented with growth in tongue and lower lips. A Biopsy of the tongue tissue performed revealed squamous cell carcinoma. The suggested treatment plan for the tumor [staged as T3/4 N1 MX] included radiation and chemotherapy; the patient decline conventional therapy primarily because of the financial constraints and instead began HUMA therapy. After about a month of therapy the growth of his tongue and lip started showing signs of regression. And after 6 months of therapy the growth of his lip dried and detached (Figure 1). The growth of his tongue also regressed leaving a white scar. The patient wanted to discontinue the therapy after 1 year as his tumor regressed completely, though his tongue scar remained. After stoppage of therapy the patient remained incidence free for about 2 years. However, he again resorted to tobacco chewing after six months after stoppage of treatment. The patient when reported to the clinic had a new growth on his tongue at the previous site of tumor. The poly herbal therapy was restarted, though the patient showed sign of some regression, but his growth did not regress after continuing the therapy for over 2 months. A biopsy from the tongue was again performed which indicated keratinizing moderately differentiated squamous cell carcinoma. The patient then underwent few rounds of chemotherapy; however, there was no remarkable response. The patient stopped coming to the clinic and was lost to follow-up.

#### Case 2

A 21 years old male presented with a massive solid tumor in his left distal forearm. He was earlier treated in his village by homeopathic medicines for 4 months. However, when his condition did not improve he was taken to allopathic physician near his village. He suggested an immediate amputation of his left arm. However, the

patient and his relative not aware about the magnitude of the problem did not consented for surgery. They wanted to try alternative medicine and chose HUMA, primarily because of financial compulsion. Before starting HUMA therapy the patient was informed that the only way to cure his problem was through surgery; however, the patient was very keen to try HUMA. Pathology from a fine needle aspirate and cytology of the tumor suggested high grade spindle cell sarcoma. After about 15 days of therapy the tumor softened and continued to soften during the next two months. X-ray of the forearm done after 3 months indicated marked shrinkage of the tumor (Figure 2). Seven days after this the patient had massive bleeding as a portion of tumor detached. His problems were managed with conventional medicines. The patient was instructed for cleaning and dressing of his tumor every day. Ten days after this incidence maggot infestation of the tumor was identified. After repeated persuasion and some financial help the patient finally consented and underwent a successful surgery. No cancer cells were identified in the histopathology of the operated tumor. The patient then received 3 cycles of chemotherapy. We last saw the patient 1 year after the surgery and he was absolutely normal.

## Discussion

People have used herbal medicines throughout our human history and they are currently the most commonly used medicines world-wide. Herbal medicines are in great demand in the developed world for primary health care due to their efficacy, safety and lesser side effects. According to WHO about 70–80 % of the people in African and Asian countries are primarily depended on herbals of treatment of various diseases [5]. Medicinal plants maintain the health and vitality of individuals, and also cure various diseases, including cancer without causing toxicity. These medicinal plants possess good immunomodulatory and antioxidant properties, leading to anticancer activities. The antioxidant phytochemicals protect the cells from oxidative damage [8]. The herbals that are presently used for treatment are also known for their anti-cancer activity viz *Azadirachta indica* [9], *Curcuma longa* [10], *Embelica officinalis*, [11], *Ocimum sanctum* [12] *Semecarpus anacardium* [13], and *Tinospora cordifolia* [14]. This herbal therapy is not only less expensive as compared to chemotherapy but also produced less side effects and also know to have induced regression of cancer/tumor in many patients [7,15,16]. A combination of burdock (*Arctium lappa*), sheep sorrel (*Rumex acetosella*), slippery elm bark (*Ulmus rubra*), and Indian rhubarb (*Rheum officinale*) or turkey rhubarb (*Rheum palmatum*), popularly known as *Essiac* [17], is still one of the most popular herbal remedies for cancer. It was promoted and popularized by a Canadian nurse Rene Caisse. Though scientific studies conducted by the the U.S. Food and Drug Administration (FDA), the National Cancer Institute, and the American Cancer Society failed to find clear evidence of an anticancer effect; however, public opinion about this therapy is still strong. *Essiac* continues to be a popular cancer therapy despite unsubstantiated claims of its effectiveness.

The self-care concept has considerably evolved among patients with chronic diseases, particularly cancer [18]. Many cancer patients are trying to manage their health problem staying at home and opting therapy of their choice. However, the scenario in the developing world is very different; access to standard cancer therapy is still big issue for patients in poorer nations [19]. Many economically challenged cancer patients have to depend on some form of alternative therapy for treatment. And after the proliferation of internet it has been observed that many well to do, educated cancer patients are also

opting alternative treatment over conventional therapy. These patients do not general visit oncologist/hospitals and their disease management is done mainly at their home. Taking care of a dying patient is a big challenge not only for the nurses [20], but also for the alternative medical practitioners treating cancer. It is often a big challenge for the practitioners of alternative medicine to deal with terminally ill cancer patients. They often do not have the skills and adequate knowledge of taking care of dying patients.

Due to ignorance and lack of effective cancer screening process many treatable cancer patients land in cancer clinic with advance disease when virtually not curative treatment is possible [3]. Waiting time for cancer treatment is more in India due to lack of infrastructure and treatment facilities. Above all, financial problems will push many cancer patients to alternative practitioners with no allopathic qualifications and having limited knowledge about oncology. From our observation we can conclude that not all alternative cancer therapies are bad. Some may show beneficial action where as others may be toxic. Even certain homeopathic therapies were shown to be useful in cancer [21,22]. In India, various alternative medicine systems are officially recognised and practiced. Cancer patients primarily venture into alternative medicine in search of palliative care. Conventional curative treatment is often out of reach of many poor cancer patients. The need of the hour is a comprehensive dialogue between practitioners of different systems of medicine so that the best care can be provided in cancer treatment and palliation.

## Conclusion

In India not all cancer patients have the luxury to undergo conventional therapy or allopathic follow-up. When cancer stuck, many have to search for their own treatment options, be it herbal, traditional, local or black magic. Many patients try all these therapies out of financial compulsion and in some when conventional therapy fails to cure their cancer. Promising tumor regression was observed in two cancer patients treated with an herbal therapy HUMA. The herbals that are presently used for treatment are known for their anti-cancer activity. In absence of any other therapy we believe that the cancer regression observed was due the alternative therapy. Proper scientific evaluation of this therapy is required.

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## References

1. Cao P, Selvan SR, Akkol EK, Wang N, Yang H, Cheng X. Complementary and alternative medicine in cancer prevention and therapy. Evidence-Based Complementary and Alternative Medicine. 2015.
2. Is India prepared for a cancer tsunami?
3. Broom A, Nayar K, Tovey P, Shirali R, Thakur R, Seth T, et al. Indian cancer patients' use of Traditional, Complementary and Alternative Medicine (TCAM) and delays in presentation to hospital. Oman Med J. 2009; 24: 99-102.
4. Bhardwaj M. Defeated by high costs, cancer patients give up on treatment. The New Indian Express. 2014.
5. Vijayaalakshmi LG. Herbal Remedy for Liver Cancer – Review. J Pharm Sci & Res. 2015; 7: 21-24.

6. Afifi FU, Wazaify M, Jabr M, Treish E. The use of herbal preparations as complementary and alternative medicine (CAM) in a sample of patients with cancer in Jordan. *Complement Ther Clin Pract*. 2010; 16: 208e212.
7. Pal SK, Fatima SH. Cancer treatment with the alternative herbal medicine HUMA: Two case reports. *Middle East J Cancer*. 2014; 5: 41-46.
8. Patil SD, Chaudhari MA, Sapkale PV, Chaudhari RB. A recent review on anticancer herbal drugs. *J Drug Discov Therapeutics*. 2013; 1: 77-84.
9. Hao F, Kumar S, Yadav N, Chandra D. Neem components as potential agents for cancer prevention and treatment. *Biochim Biophys Acta*. 2014; 1846: 247-57.
10. Schaffer M, Schaffer PM, Bar-Sela G. An update on Curcuma as a functional food in the control of cancer and inflammation. *Curr Opin Clin Nutr Metab Care*. 2015; 18: 605-611.
11. Baliga MS, Dsouza JJ. Amla (*Emblica officinalis Gaertn*), a wonder berry in the treatment and prevention of cancer. *Eur J Cancer Prev*. 2011; 20: 225-239.
12. Kwak TK, Sohn EJ, Kim S, Won G, Choi JU, Jeong K, et al. Inhibitory effect of ethanol extract of *Ocimum sanctum* on osteopontin mediated metastasis of NCI-H460 non-small cell lung cancer cells. *BMC Complement Altern Med*. 2014; 14: 419.
13. Joseph JP, Raval SK, Sadariya KA, Jhala M, Kumar P. Anti cancerous efficacy of Ayurvedic milk extract of *Semecarpus anacardium* nuts on hepatocellular carcinoma in Wistar rats. *Afr J Tradit Complement Altern Med*. 2013; 10: 299-304.
14. Shaikh R, Pund M, Dawane A, Iliyas S. Evaluation of Anticancer, Antioxidant, and Possible Anti-inflammatory Properties of Selected Medicinal Plants Used in Indian Traditional Medication. *J Tradit Complement Med*. 2014; 4: 253-257.
15. Pal SK. Cancer alternative therapy HUMA: a clinical perspective. *Annals of Ayurvedic Medicine*. 2013; 2: 80-88.
16. Pal SK, Fatima SH, Kalandar A. Effect of poly herbal preparation HUMA on oral cancer: Two case reports. *Translational Medicine and Biotechnology*. 2013; 1: 65-69.
17. Shukla Y, Pal SK. Complementary and alternative cancer therapies: past, present and the future scenario. *Asian Pacific J Cancer Prev*. 2004; 5: 3-14.
18. Hasanpour-Dehkordi A. Self-care Concept Analysis in Cancer Patients: An Evolutionary Concept Analysis. *Indian J Palliat Care*. 2016; 22: 388-394.
19. Jack A. Access to good therapy is big issue for cancer patients in poorer nations. *Combating Cancer*. September. 2014.
20. Sanagoo A, Moghadam AA, Hazini A, Gashb EA, Jouybari LM, Mojarad FA. The comparison of family member's satisfaction of palliative care and standard care for patients with incurable cancer. *Crit Care Nurs J*. 2016; 9: e6243.
21. Chatterjee A, Biswas J. A Homeopathic approach to treat patients with advanced gallbladder, periampullary, and liver carcinomas: A report of 3 cases. *J Altern Complement Med*. 2012; 2: 180-186.
22. Banerji P, Banerji P. Homeopathy: treatment of cancer with the Banerji Protocols. In *A Compendium of Essays on Alternative Therapy* (Ed. Bhattacharya A). In Tech. 2012; 123-144.