

Cancer Treatments

Established treatments, trials and alternative (unproven) treatments

If you have been diagnosed with cancer, it is possible that different treatments have been suggested to you. The Cancer Council has produced this information to help you decide between treatments that may help you and treatments that are unlikely to help you.

Your doctor will recommend one or more established treatments or suggest that you consider taking part in a clinical trial of a new treatment. You may be thinking about using complementary therapies along with treatments suggested by your doctor. You may also have read about, or been told about, an alternative treatment that may help.

How are they different?

Established treatments

These are proven treatments such as radiotherapy, chemotherapy, hormone therapy, immunotherapy and surgery. These are also known as 'medical', 'conventional' or 'mainstream' treatments.

These treatments have been tested in clinical trials and shown to be effective. (See the description of clinical trials below.) For example, it has been proven in clinical trials that:

- removing a skin cancer at an early stage prevents it from growing or spreading
- many childhood leukaemias can be cured with chemotherapy
- tamoxifen can prevent some breast cancers from recurring.

Established treatments are prescribed by general practitioners, cancer specialists (oncologists) and other medical specialists. You have these treatments in hospitals and doctors' surgeries and sometimes at home.

Treatments being trialled

These are treatments that are being tested in clinical trials. Clinical trials test new drug therapies, procedures, treatment combinations, preventative measures, screening methods and alternative treatments to see if they are better than the established treatments.

Clinical trials examine treatments that have shown promise during initial testing. For example, a researcher may think that a chemical that affects cell growth could be used to destroy cancer cells. Tests evaluating its safety and effectiveness will be done in the laboratory and

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then on animals. If it is thought to be safe and effective enough, it will be tested on people in a clinical trial.

There are three clinical trial phases. The cancer specialists carefully watch the effects of the new treatment on the people in the trial. If the treatment goes through to the end of the third clinical trial phase, the results of the new treatment are compared with established treatments. If the treatment that was trailed is better, and usually after it has been confirmed with other trials, it will be recommended to other doctors for their patients.

A clinical trial will only be conducted if the new treatment is thought to be at least as effective as the established treatment for a cancer.

Clinical trials are conducted and monitored according to strict guidelines. The treatments are given strictly to plan. Results are collected, analysed and published in scientific journals.

People in trials are treated according to an agreed document that sets out the terms of treatment (known as a treatment protocol). They are reviewed frequently during and for a time after the treatment phase, and so receive very high quality care. Some studies have shown that people treated in clinical trials have better outcomes than people who do not join clinical trials.

People are told about clinical trials by their doctor or they may hear about them from the media, the Internet or other sources. They can volunteer to join the trial.

Alternative (unproven) treatments

These are treatments that are said — by the people who provide them — to be alternative to established treatments. People who provide alternative (unproven) treatments say they will or may cure cancer, but this has not been shown in clinical trials.

- An alternative treatment may have been tested but 'no evidence of benefit' found. This means it is uncertain whether it works or not.

- 'Evidence of no benefit' means a treatment has been tested and shown not to work against cancer.

Alternative (unproven) treatments are also known as integrative, unproven, holistic, non-mainstream and unconventional treatments or remedies.

Alternative cancer treatments for which 'miracle cures' have been claimed include magnets, various diets, coffee enemas, fresh cell therapy, microwave therapy, oxygen therapy and laetrile and other plant products. Be wary of these claims. Ask the alternative practitioner to give you evidence to back them. One or two books by people who deliver a certain treatment is not strong evidence. Look for articles in recognised medical or scientific journals. Recognised medical journals are listed in, an international database of biomedical journals.

You can search the database through www.ncbi.nlm.nih.gov/entrez/query.fcgi.

It is even more important to discuss these 'apparent cures' with the doctors treating you. Your doctors will usually have up-to-date information on the claims.

Complementary therapies

These are therapies such as massage, aromatherapy and meditation. People may feel a greater sense of wellbeing while they take the treatments. These are often called 'supportive therapies'. They are not promoted as cancer treatments or cures in their own right.

Some, like massage, have been used for centuries to complement mainstream medicine. They may help people feel more relaxed and able to cope better with the impact of their illness.

Key points

- Established treatments are known to cure some cancers and provide relief from symptoms of cancer.
- Treatments being trailed are promising treatments that are tested in clinical trials. They are only tested if they are predicted, on initial testing, to be at least as effective as the established treatment for a cancer.

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- Alternative treatments have not been shown in clinical trials to cure or slow cancer down because trials have not been done ('no evidence of benefit'). Others have been tested and shown to be ineffective ('evidence of no benefit').
- Complementary therapies may be used to enhance established treatments.

How can they help?

When choosing a cancer treatment, you will be seeking one or more of the following:

- cure
- relief from symptoms
- help with a problem related to your illness (like anxiety)
- reassurance that you are doing all you can.

How established treatments may help

Your doctor will tell you if there is a cure for your cancer, or treatment that may slow its process. For over half of all cancers, surgery and/or radiotherapy and/or chemotherapy will kill the cancer cells and stop them from coming back. Although the treatment itself may cause side effects and be upsetting, most people are prepared to put up with this to try to get rid of the cancer.

Sometimes, the doctor won't be able to reassure you that the cancer will be cured. Sometimes, a few cancer cells escape and slowly grow into a new spot of cancer elsewhere in the body. Many people who have established treatment for cancer won't know for several years whether their cancer has gone away. If the cancer has not reappeared (recurred) within five years of treatment, then often you have a high chance of having been cured.

It is possible that there is no cure for your cancer. There may be no effective established treatment and/or the cancer may be advanced when you are diagnosed. There are still established treatments that can help you. Established treatments may be able to reduce the size of the cancer or delay its growth, so that it doesn't

affect how your body normally functions. They can also relieve pain and other problems caused by the cancer. This is called 'palliative treatment'. Some people can still have years of high quality life even though their cancer has not been cured.

If you want more information about the treatment your doctor recommends, you can ask for a second opinion from another specialist. Your doctor should not be offended: it is quite normal to want to know that your treatment is the best available.

How treatments that are being trialled may help

Your doctor may suggest that you join a clinical trial. This might happen if there is:

- no established treatment that will cure you
- a promising new treatment being tested for your cancer.

Remember, treatments being trialled are not certain to cure you. They may turn out to be only as effective as the existing treatment for your cancer.

Treatments being trialled often have side effects. These will be explained in the patient information/consent sheet that you will be asked to read and sign before the trial begins. Just because a treatment is new, it does not mean it is better—that is what the trial is trying to find out.

Sometimes, people participating in a clinical trial might receive an inactive or 'placebo' treatment, or be treated to control symptoms. In these cases, no established treatment is required; in other words, you are not missing out on any treatment you should otherwise be having.

How alternative treatments may help

Some people with cancer want to experiment with alternative treatments. A questioning approach helps people make their way through the many alternative treatments on offer. See 'Questions to ask' in this brochure.

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How complementary therapies may help

Complementary therapies can help you to cope better with the challenges you face as a person with cancer. Physical therapies like yoga, massage and t'ai chi can help you to feel more relaxed and stronger. Measures like aromatherapy and music therapy will help if these are the sorts of therapies that you enjoy. If you are spiritually inclined, you will find comfort and strength in formal or informal services and rituals related to your beliefs.

Key points

- Established treatments can cure many cancers and provide relief for symptoms that cannot be cured.
- A treatment being tested in a clinical trial may be an option for you if the established treatment for your cancer is not adequate or a promising new treatment is being compared with the established treatment.
- Complementary therapies can be useful in easing symptoms like anxiety or tension associated with fears and uncertainties about having cancer.

When should alternative (unproven) treatments be avoided?

When they will delay diagnosis of cancer

If you have a troubling symptom and you wish to seek the advice of an alternative therapist, it is a good idea to also see a medical practitioner. Some symptoms of cancer may not be noticed or may be misdiagnosed by an alternative therapist.

Symptoms that should always be checked by a doctor include any new or unexplainable swelling, bleeding, pain and continued hoarseness or coughing. These symptoms don't necessarily mean that you have cancer, but should be checked.

When they will interfere with established treatment

Many alternative treatments are probably harmless, but not all. Some herbs and vitamins can interact with chemotherapy and radiotherapy so that they don't work as they should, or can cause harm. Before you begin a therapy

prescribed by an alternative therapist, check with your cancer specialist that it is safe and won't affect your medical treatment, reduce the effectiveness of the medical treatment, and/or increase the risk of side effects.

When they will prolong or worsen the disease experience

Some people find that complementary therapies like relaxation, yoga and massage can improve their experience of established treatment, making them feel less anxious and more in control.

For some people, alternative therapies can make the experience much worse. This can happen:

- if you rely on alternative treatments that are not proven to work
- if your alternative therapist makes you feel responsible when their treatment doesn't make you better
- if it makes you sicker
- if it upsets you or costs more than you can really afford.

When they stop you using medical treatment that could improve your health

Some alternative therapists suggest to people they treat not to have established medical treatments or to cease them. The alternative therapist may warn that medical treatment will stop the alternative therapy working. Be very wary of claims like this. Always get an opinion from a cancer specialist.

Key points

- Beware of 'magic' or 'miracle' cures. Always get an informed opinion from your cancer specialist and/or the Cancer Council Helpline.
- Complementary therapies can be helpful additions to established treatment for people with cancer.
- Most alternative therapists cannot diagnose cancer.
- Some alternative treatments can interfere with established treatments and worsen your experience of cancer.

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Questions to ask

Whether you are choosing a cancer specialist (surgeon and/or medical oncologist and/or radiation oncologist) or an alternative therapist, you need to be able to trust and talk openly with that person. This does not mean that you need to have warm feelings for each other. The person you choose may not even be very friendly! However, you will need to feel that they are expert, approachable, respectful, supportive and able to meet your needs for information and advice.

One way of finding out if the person is expert is to ask questions about their qualifications and experience. Here are some questions that may help when you choose a medical or alternative practitioner. (You could ask your general practitioner some of these questions, if he or she is referring you to a specialist.)

- What training does the practitioner have? Is their degree from an educational institution you know of or can find out about?
- Does the practitioner treat patients in hospitals where doctors are trained?
- What will the practitioner charge for a visit? How many visits will you need to make?
- Are there additional costs, for example, for different stages of treatment or additional expertise?
- Is the practitioner willing to refer you to publications that demonstrate that the treatment works?
- Are they members of a professional group that registers and represents that group of specialists in dealing with state and federal departments of health?

Also ask yourself if you are comfortable with the practitioner. Do you feel that they are attentive, trustworthy and level-headed?

Do you know other people who have been patients or clients of the practitioner? What do they say about them?

You may wish to find out more about the treatment the practitioner recommends. To find out if a treatment is worth trying, be cautious, ask questions and confirm claims.

Be cautious

You don't have to uncritically accept any claims made by a person seeking to treat you. You may trust the practitioner, and still wish to independently check their advice. Beware of 'pseudoscience' — things that sound very scientific and plausible but which are not actually backed up by evidence of proven benefit.

Ask questions

You will be more sure of the treatment if you get satisfactory answers to the following questions:

- In what way will this treatment benefit me?
- What results can I expect to see?
- Are there any long-term risks associated with this treatment? If so, what are they?
- What side effects do people have with this treatment?
- How much will it cost?
- Will Medicare/my private health insurance cover the cost?
- How long will the treatment take?
- When could I expect to see a result from the treatment?
- How many people have received this treatment?
- How many of them responded?
- What happened to the ones that didn't respond?
- What's in it for the person offering me this treatment?

Confirm claims

Established treatments are subjected to scientific testing. This means:

- the theory behind a proposed treatment is based on accepted scientific principles
- testing on animals usually occurs before a new treatment is tested on humans
- the results of these trial/s are published in 'peer-reviewed' medical and scientific journals. This means that other specialists with expertise in the field check that the study was conducted correctly and that the results are valid.
- the results of trials are also verified by trials from specialist cancer hospitals throughout the world.

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If you want to check that a treatment has been trailed and the results published, you can do a literature search through a medical library or via Medline on the Internet. A health information service for consumers may be able to help you, for example the Cancer Council Helpline 13 11 20.

Key points

- Ask your cancer specialist questions that are important to you: Will the treatment work? How do they know the treatment will work? When will I see results? What side effects can occur? How much will it cost?
- Be sure that you have confidence in the practitioner. If you don't have confidence in a cancer specialist, ask your general practitioner for referral to another specialist. If you are seeking to change alternative practitioners, your general practitioner or a trusted friend or adviser may be able to refer you on.

A final word

You have the right to choose whatever treatment you want for your cancer. Most people choose established treatments for their disease, and many also choose complementary therapies for some symptoms. A few choose no treatment, or a 'miracle cure'. We recommend that you make an informed choice where you can. This will include asking the opinion of people you respect and researching your options. You are welcome to call the Cancer Council Helpline on 13 11 20 to talk about the choices before you.

Useful websites

You may be interested in looking for information about cancer treatments on the Internet. While there are some very good websites, you need to be aware that some websites provide wrong or biased information. The following websites contain reliable information.

National Center for Complementary and Alternative Medicine (NCCAM)

<http://nccam.nih.gov>

Includes publications, information for researchers, frequently asked questions, and links to other related resources.

Quackwatch

www.quackwatch.com

Aimed at combating health-related frauds, myths, fads and fallacies.

Therapeutic Goods Administration (TGA)

www.health.gov.au/tga

The Cancer Council Victoria

www.cancervic.org.au

Provides general information on cancer, including diagnosis, treatment and support services.

For more information contact the Cancer Council Helpline on 13 11 20 (cost of a local call). This is a confidential service staffed by cancer nurses. Information is available in languages other than English.

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