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Fermented Wheat Germ and Cancer Regulation

Reference: Demidov, Garami, Wikipedia, Hidvegi

Solid tumor chemotherapy has not had a stellar run lately. Folks with cancers from our internal organs (solid tumor, compared to blood tumors) find that the chemo they take may slow the disease, but then it comes back stronger and angrier. We haven't been able to eradicate solid tumors except with surgery. Some would argue that there is an increment of survival between surgery and relapsing cancer that chemo offers. Hence, we are eager to find means by which we can regulate cancers and turn them into a chronic disease. Diabetes was once a rapid and lethal illness. It is now a chronic disease, well managed by skillful use of insulin, diet and exercise.

This column outlined a key vulnerability of cancer earlier this year. Cancer cells are very sloppy with their glucose metabolism. They cannot burn glucose all the way to CO2 and water and obtain maximum energy. They are only able to make partial use of glucose in a very inefficient manner. The hunt is therefore on to make that vulnerability a key strategy to success.

Along comes Dr. Hidvegi and fermented wheat germ. Without delving into all the mechanisms by which Ave or Avemar (brand names) work, here are a few: Ave blocks a critical enzyme in the sloppy glucose pathway that cancer uses, transketolase. That also blocks DNA synthesis because ribose production mechanisms are blocked. Cancer cells have to multiple to live! It reduces the proteins on the surface of cancer cells that help hide from the immune system. It helps increase protein tags inside of blood vessels that beacon white cells to come into cancers to fight the cancer. Uniquely, cancer cells have a "guardian angel protein" called Poly-ADP-ribose-polymerase that is inactivated by capsase, an enzyme AVE stimulates. There are about 10 more discrete mechanisms all that Ave has been shown to affect. And all without toxicity. With current doses, humans show no toxicity and calculations suggest a 50 fold margin for safety.

This sounds almost to good to be true. But even the cancer center, Sloan Kettering, has a web site on Ave with the results of two quite positive smaller studies suggesting that it should be studied further. There are more and more studies coming up in the literate sug-

gesting we may have a real phenomenon to watch. There is great interest in breast cancer in particular. Ave appears to make Tamoxifen even more effective. It appears to have an estrogen receptor activity. In colorectal cancer, it has had one study in which there was an 82% reduction in recurrence and a 67% reduction in death. That was an open study, but still.....!

WWW. What will work for me. If I had cancer, I would take it. I've had cancer, and been cured with surgery. I'm paying attention. I'm going to start recommending its use for all my cancer friends and clients. It's part of the portfolio of regulating cancer, and turning it into a chronic disease. Thinking outside the box. This is where the future of cancer care will come from.

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John Whitcomb

This entry was posted in Uncategorized on October 7, 2013.