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Have We Lost The War On Cancer? December 12, 1991 | By Samuel S. Epstein and Ralph W. Moss.

As America debates the healthcare crisis, the time has come to look more closely at the biggest ticket item, cancer. Huge expenditures on cancer only make sense if we are making progress. In fact, we are moving backwards.

A recent report from the American Hospital Association states the facts. Percease Medicare payments for cancer now exceed those for any other disease, and are rising more rapidly than for any other disease. By the year 2000, the report chillingly predicts, cancer will become the leading cause of death and ``dominant specialty`` of American medicine.

There are no accurate figures on cancer`s overall cost. The best estimate is more than \$100 billion a year. Where does it all go?

The direct costs of cancer include more than 50 million visits to physicians, a million operations, at least 750,000 radiation treatments and uncountable diagnostic tests. Many highly profitable magnetic resonance imaging facilities are owned by the doctors who prescribe the tests, a situation the editor of the New England Journal of Medicine called ``a terrible conflict of interest``.

Indirect costs of cancer include research and the loss of income from premature disability or death. Nearly \$20 billion has been given virtually without strings to the National Cancer Institute since 1971. The American Cancer Society solicits more than \$330 million a year from the public. The budget of the Memorial Sloan Kettering Cancer Center in New York is more than \$350 million.

Few could begrudge the cancer establishment these huge costs if they resulted in significant progress. However, the incidence of cancer has escalated to epidemic levels. Since 1950, adjusting for the aging population, incidence rates have increased by 40 percent. Rates for cancers of the breast, prostate and colon in New males have increased by 60 percent, childhood cancers by 30 percent, and other less common cancers by over 100 percent. Cancer now strikes one in three and kills one in four, with half a million deaths last year.

Contrary to the optimistic and misleading hype of the National Cancer Institute, American Cancer Society, Sloan-Kettering and other cancer centers, our ability to treat and cure cancer has not materially improved over decades. Apart from rare cancers, five year survival rates for common advanced cancers have scarcely improved. For example, the mortality rate for nonlocalized breast cancer has remained a static 18 percent over the last 40 years.

Meanwhile, treatment has become highly toxic, sophisticated and expensive and a major source of profit to giant pharmaceutical companies closely interlocked with the cancer establishment. Bone marrow transplantation comes with a very high price tag about \$100,000 per patient and a very low chance of success. Other modern treatments, such as interferon, interleukin 2 and gene therapy, are so toxic that other drugs have to be developed and used in efforts to counteract their side effects.

Prevention is the key to reducing the inflationary impact of cancer. Our total environment has become progressively permeated with industrial carcinogens in air, food, water and the workplace. The 1958 Delaney law, which banned the deliberate introduction of any level of carcinogenic pesticides and other chemicals into our food supply, has been recently gutted in favor of an allegedly ``negligible risk`` standard by the Bush administration, supported by a rollover Congress.

Not a word of support for the Delaney law, the scientific validity of which has been repeatedly endorsed by independent expert committees, has come from the National Cancer Institute and American Cancer Society. This cancer establishment has also remained silent while the administration rolls back regulations on dioxin and asbestos and refuses to phase out the manufacture and use of industrial carcinogens, contributing still further to the future toll of avoidable cancer.

Besides prevention, there is a critical need to mount an intensive and fairminded investigation of promising non-toxic innovative cancer therapies. Many such therapies are both low cost and nonpatentable. Last year, the

congressional Office of Technology Assessment reported on some 200 papers supporting such innovative therapies and recommended that the cancer institute actively investigate them. It refused.

Twenty years ago this month, responding to pressures from the cancer establishment and promises to cure cancer by the Bicentennial, President Nixon signed the National Cancer Act and inaugurated the ``War Against Cancer.'' The war is now all but lost, and this reality must be forced on the National Cancer Institute and the American Cancer Society by Congress and the public. However, only a grassroots movement of activist citizens will convince politicians and presidential candidates of the need for drastic action.

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