

Medical Tribune

Thursday, February 27, 1992

THE PHYSICIAN'S NEWSPAPER

Volume 33, Number 4.

Cancer strides challenged

Establishment's therapeutic claims overstated, says activist coalition

By Bill Ingram

A bitter debate broke out this month, focusing on whether the seemingly relentless advance of cancer is being slowed or not. As it turned out, cancer officials themselves were divided on some of the issues.

An estimated 1.3 million new cases are expected this year, up from 1.1 million last year. Deaths are projected at 520,000, up from 514,000 last year.

Continued from page 1
treatment progress. With breast cancer, there are more cases, but the death rate remains the same. Adjuvant chemotherapy and tamoxifen are major advances that are now starting to affect the statistics."

"Have we won the war? No," said Richard Adamson, Ph.D., NCI chief of cancer etiology. "Have we made progress? Yes, particularly with childhood cancers, testicular cancer and Hodgkin's. Death rates for colon and rectal cancer have fallen 15 to 20 percent in the last 20 years; ovarian has fallen 20 percent, bladder 30 percent and cervix 40 percent."

At a press conference in Washington, D.C., 60 physicians and scientists charged that even in the face of these discouraging data, the "cancer establishment confuses the public with repeated claims that we are winning the war....

"Our ability to treat and cure most cancers has not materially improved," said the group of 60, led by Samuel Epstein, M.D., professor of occupational and environmental medicine at the University of Illinois.

On the issue of lifestyle factors, ACS president Walter Lawrence, M.D., reiterated the very etiologic assessment that Dr. Epstein had attacked. He insisted that "two-thirds to three-quarters of cancers are due to external things we might modify, such as tobacco and diet."

Dr. Heath and Laszlo would not go along with their superior, conceding a point to Dr. Epstein.

"I'm uncomfortable with those figures," said Clark Heath, M.D., ACS vice president for epidemiology. "I'm not uncomfortable with attributing 30 percent of cancer deaths to smoking, but those overall figures are pretty damned soft."

Since 1950, the overall cancer incidence has increased by 44%, breast cancer and male colon cancer by 60% and prostate cancer by 100%, according to Dr. Epstein.

"For decades, the five-year mortality rate for non-localized breast cancer has remained at 18 percent, and for lung cancer, 13 percent," he said.

The National Cancer Institute and the American Cancer Society were accused of "largely attributing [rising rates] to smoking

and dietary fat, while discounting or ignoring the causal role of avoidable exposures to industrial carcinogens in air, food, water and the workplace."

Prevention studies and initiatives languish. Dr. Epstein charged: they are allotted only 5% of the \$1.8 billion NCI budget. "Millions have died from what should be a preventable disease."

The ACS and NCI hit back hard at the charges.

"Dr. Epstein is irresponsible. He's hollering fire in a crowded

theater where there's no fire," said John Laszlo, M.D., ACS senior vice president for research. "His claims about carcinogens in the air, for example, that's been looked at scientifically. There's no evidence to suggest a cancer cause there.

"Recent increases in rates are largely due to early detection—picking up cases this year that in the past would have been picked up three or four years later," Dr. Laszlo said. "And we're making

See back of section, page 3

Dr. Laszlo agreed.

NCI's Adamson also was dubious: To reach the 75% figure, "all environmental factors probably would have to be included—viruses, synthetic chemicals, radiation, fibers and so on, and I'm not sure you could modify all of them."

The group of 60 also charged that the cancer establishment "repeatedly grossly exaggerated their ability to treat and cure cancer. Claims [for drugs] are generally based on [initial] tumor response rather than on prolongation of survival."

When asked, Dr. Epstein cited interferon, interleukin and taxol as examples.

Dr. Laszlo agreed that "people are not always objective. I object to exaggerations. I'm never happy when I see early reports like those on interleukin-2 and taxol!"

"There's a long list [of drugs] involving overexpectation," said Dr. Heath.

Though conceding these points, cancer officials were adamant about cancer prevention efforts.

"In the coming year we will be spending not 5 percent, as Epstein says, but 33 percent of our \$597 million budget on causation and prevention-related research, more than on

treatment," Adamson said. "We agree that occupational and environmental factors need serious consideration. We have 65 studies going in occupational groups."

"Whole environment factors" under NCI scrutiny, Adamson said, include chemicals and radiation, plus host factors—hormone levels, immunologic status and individual genetic endowment.

"Epstein says we should study substances in fat," the NCI official said. "We have. Halogenated pesticides, for example, have not been found elevated in breast cancer [patients], as compared with those with benign breast disease."