

# Cancer - it's not what we're told

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Part 3

## Treatments cause spread of disease

### Chemo toxins responsible for secondary cancers

**IN parts one and two, we showed that the medical establishment does not provide the public with correct information about most of the aspects of the condition that is given the label 'cancer'.**

Another erroneous idea is that cancer spreads to other parts of the body in a process called 'metastasis', also called a secondary cancer, because it almost invariably occurs in a different organ from that of the primary cancer.

There are a number of reasons that so-called metastasis is claimed to occur. One of them is because the primary cancer was not completely eradicated by the treatment, and cancer cells are claimed to have migrated to a new location in the body.

The National Cancer Institute (NCI) web page about metastasis states: "In metastasis, cancer cells break away from the original (primary) tumour, travel through the blood or lymph system, and form a new tumour in other organs or tissues of the body."

The page also claims: "The new, metastatic tumour is the same type of cancer as the primary tumour. For example, if breast cancer spreads to the lung, the cancer cells in the lung are breast cancer cells, not lung cancer cells."

The Oxford Concise Medical Dictionary, however, defines a cell as follows: "Complex organisms are built up of millions of cells that are specially adapted to carry out particular functions. The process of cell differentiation begins early on in the development of the embryo and cells of a particular type (e.g. blood cells, liver cells) always give rise to cells of the same type."

This raises a fundamental question: If cells are specialised, how can cells of one organ spread to another organ?

Despite its claims, the medical establishment does not understand all of the processes involved, as indicated by a January 2017 article entitled, *Gene discovery could shed light on how cancer cells spread*, which says: "The underlying mechanisms that control how cancer cells

spread aren't well understood."

It is claimed to be unethical to experiment on humans, which is the reason that animals are used for cancer research experiments, as indicated by a 2021 article, *Application of Animal Models in Cancer Research: Recent Progress and Future Prospects*, which states: "There are many animal types and construction methods used to construct cancer animal models, and the progress of each animal

researchers cannot be studying the same disease that they believe occurs in humans.

It is therefore not possible to draw meaningful conclusions for human health from the results of animal experimentation when it involves the creation of artificial disease. This is one of the most potent arguments against the use of animals for research studies, but that is a topic for another article.

that primary tumours "can often be cured using local surgery or radiation".

However, the article adds: "Systemic approaches, including screening, chemotherapy, targeted therapy and immunotherapy, are therefore the mainstay of metastasis prevention and treatment."

Sadly, this additional toxic onslaught far too frequently results in the death of the patient, who is then reported as having 'lost their battle with cancer'. In reality, the patient has lost their battle against the accumulated toxins, which include whatever factors were involved in causing the primary cancer.

One rather bizarre direction that cancer research is taking involves the idea that 'germs' can be used as potential treatments, despite the claim that 'infections' are cited as causal factors.

For example, an October 2015 article entitled *Cancer-fighting viruses win approval*, published on the website of the journal *Nature*, states: "On 27 October, the Food and Drug Administration (FDA) approved a genetically-engineered virus called talimogene laherparepvec (T-Vec) to treat advanced melanoma."

There are many problems with this approach, not least of which is that it involves genetic engineering, a technology that has been shown to be an uncertain, unpredictable and imprecise process that has the potential to be extremely dangerous.

Investigations are also being conducted to determine if bacteria have the potential for use as cancer treatments, for example a 2019 article is entitled *Therapeutic bacteria to combat cancer; current advances, challenges, and opportunities*.

The basis for this new line of research seems to have arisen from observations that tumours may regress when patients experience symptoms of an 'infection', especially a fever.

This misinterpretation of the observation has occurred because the medical establishment does not understand the true nature of the symptoms attributed to a so-called infection.

The fact that the medical establishment does not understand cancer does not mean that no-one understands it, as will be discussed in the next and final part of this series.

**To be continued...**



Image: Toxicology Library

model in tumour research has its own characteristics."

One of the favourite animals used by medical researchers is the mouse, for reasons explained in the article: "The mouse genome is highly homologous to the human genome, which can simulate a series of biological characteristics such as the occurrence, development and metastasis of human cancer cells in vivo, and has the advantages of convenient feeding, low price and easy gene modification."

What is particularly problematic is that metastasis is not a natural occurrence in animals even when experimented upon, as Dr Tony Page explains in *Vivisection Unveiled*: "... artificially carcinogen-challenged laboratory animals do not normally develop metastases at all."

This is an extremely significant point, because it highlights a major problem with the use of animals in such experiments, which is that the disease under investigation is often induced by artificial methods. This means that

One of the main sites of secondary cancer is the liver, which is the body's major detoxification organ. Liver cancer can therefore be understood as the result of a high body burden of toxins that the body is losing its ability to process and eliminate.

These toxins will include the chemicals used as chemotherapy. This means that the original treatment for the primary cancer is a contributory factor to metastasis, a fact that is admitted in a 2015 article, entitled *Reasons for Cancer Metastasis*, which states that "the majority of the presently available treatments for cancer also bear the potential to induce metastasis."

There is ample evidence to show that there is more than just the potential to induce metastasis.

One of the major concerns about metastasis is that it is associated with an increased risk of death, although the treatments used are never considered to be contributory. For example, a 2021 article, *Targeting metastatic cancer* states