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A NUTRITIONAL WAR ON CANCER



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MAYBE IT'S JIM CAHILL'S* training as a psychologist that allows him to be so open with a stranger. "I'm angry," he says. "I'm going through a lifestyle change, and I'm resenting the intrusion in my life." It's an honest response to a demanding clinical treatment that may save his life. No, it's not surgery, though he recently had a tumor on his prostate removed. And it isn't chemotherapy, radiation treatment or a course of prescription drugs. Cahill, a tightly wound 50-year-old with a taste for Porterhouse steaks and Dr. Pepper, is trying to eliminate meat, dairy products, alcohol, cigarettes and processed foods from his life. This "life sentence"

Can plant foods shrink tumors, bolster immunity, counteract the toxicity of conventional therapy and even reverse some

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of clean living is difficult, he says, but so was what preceded it: until recently, he suffered from chronic sinus problems, severe back pain, knee problems, depression and fatigue in addition to cancer. Now, he says, "I've got cancer and I feel better than I ever did before."

That's a line Cahill's physician, Keith Block, M.D., never tires of hearing. A conventionally trained oncologist who also has studied acupuncture, herbal medicine, nutrition and homeopathy, Block is a rarity in modern medicine: a doctor who champions almost anything that works for his

cancers? Keith Block, M.D., says yes—and so do his patients, who live longer and better lives on a vegetarian diet.

BY AMY O'CONNOR

patients. His grasp of both alternative and conventional approaches—and his refusal to adopt either one exclusively—has drawn fire from both camps. “I do not support treating people with alternative techniques, and I don’t know why a medical doctor would,” says Robert J. White, M.D., professor of neurosurgery at Cleveland-based Case Western Reserve University School of Medicine, who treats about 50 patients with malignant brain tumors a year. “I subscribe to and believe in radiation, surgery and chemotherapy. There are enough studies that show that these sorts of modalities offer a cure.” But these methods don’t always work for everyone, and the conventional “war on cancer” has yielded flat survival rates.

THIS COUNTRY’S CONVENTIONAL “WAR ON CANCER” HAS YIELDED FLAT SURVIVAL RATES.

“Why use a hammer when a fly swatter will do?” Block responds, referring to the less aggressive nature of alternative treatments. Whereas conventional cancer treatments such as radiation and chemotherapy nearly kill patients in the process of knocking out the disease, Block takes the opposite approach, building up his patients’ overall health with a strictly vegetarian diet while they’re battling

cancer. The strategy, Block says, is not as passive as it might sound. Just as conventional therapies work by using poison or a scalpel to slow or stop the runaway growth of cancerous cells, certain foods promote the erratic growth of cancer cells while others work to inhibit them. Block’s diet takes advantage of both actions by eliminating the tumor-promoting foods and encouraging the consumption of cancer inhibitors. This approach, known as nutritional oncology, improves his patients’ disease resistance, quality of life and longevity. And it’s why people from all over the world come to his bustling practice, which offers the most effective treatments gleaned from conventional and complementary realms of medicine.

Why isn’t food considered a therapeutic tool by the rest of the medical establishment? Block has been asking this question for 20 years, ever since he experienced the power of dietary change first-hand. Shortly after medical school, Block was suffering from chronic migraines and a debilitating gut infection that only worsened with conventional treatment. Desperate, he turned to meditation, acupuncture and other holistic therapies, adopted a macrobiotic diet, and felt his maladies subside. This personal experience led him to explore other alternative fields such as biofeedback, botanical medicine, acupuncture and nutrition.

Now in his 40s, Block looks and acts like a man who has never had a physical setback. Tall and dashing, he darts around the Block Medical Center in Evanston, Ill., with the fluidity and deliberation of a martial artist. He almost never wears a white coat—he believes they create barriers between doctor and patient—and isn’t afraid to get close to patients, even those whose cancers are too advanced to respond to treatment. When a distraught

WHAT DO THEY EAT?

The diet that Keith Block, M.D., prescribes is based on soyfoods, fruit, vegetables and grains, and resembles the traditional macrobiotic diet. Philosophically, Block believes a vegan diet is best, but patients who can’t make the leap to a plant-based diet are allowed to eat limited amounts of fish and low-fat dairy products. “I was not as nutritionally flexible early on, and I had several patients who said ‘I can’t do this,’” he says. “Today, I’m more of a believer in addressing the needs of the particular person.”

The Block diet is high in fiber—which may help retard the development of some cancers by increasing fecal bulk, thus speeding the transport of carcinogens out of the body. Less than 15 percent of calories come from fat, which epidemiological evidence suggests will result in tumors that are smaller or easier to treat. An extremely low-fat diet may also have a direct impact on survival rates by starving tumors of the fat they crave. Protein is restricted to amounts that nourish the body without overfeeding tumors. But the foundation of the diet is complex carbohydrates, which account for more than half of all calories. This means that his patients eat plenty of plant foods that are rich in cancer-preventing compounds such as beta carotene and the indole compounds of cruciferous vegetables.

Vegetables are divided into three “garden” groups: leafy, above-ground and root vegetables, with several servings from each group recommended per day. (Cabbage, bok choy and turnip greens are included in the leafy group; broccoli, cauliflower, winter squash and pumpkin are in the above-ground group; and carrots, leeks, onions and turnips are in the root group.)

Recommended fruits include apples, apricots, cherries, peaches, melons and strawberries. Soybean products such as tempeh, tofu and soymilk are fundamental to a cancer-prevention diet because they are rich sources of plant protein, contain phytoestrogens, a hormone-mimicking agent that may prevent hormonal cancers, and may help shrink tumors. Grains and legumes, especially barley, brown rice, buckwheat groats (kasha), millet, whole oats, lentils and chickpeas are also essential, while miso, sea vegetables, grain-derived sweeteners, sesame seeds, sunflower seeds, pecans, olive oil and sesame oil are supplemental.—A.O.



woman bursts into tears, he reaches over and holds her hand. He gently strokes the head of an elderly man who is in the final stages of lung cancer and moaning in pain, comforting him as well as his nervous family. In another room, he spends nearly an hour with a former breast cancer patient and her husband, delighting in the news of her pregnancy.

But this calm and caring manner belies a tremendously crowded schedule. In addition to his clinic, Block also holds teaching posts at several Chicago-area hospitals, is involved in research and clinical care at two nutritional and behavioral oncology programs, consults to the congressional Office of Technology Assessment, is vice president of a Chicago chapter of the American Cancer Society, and co-owns a food-service outlet with his wife, Penny. They have four children and observe the Jewish Sabbath; no work from sundown Friday to sundown Saturday. Nonetheless, Block finds time to fulfill a demanding speaking schedule, make his rounds at Ravenswood Hospital and Edgewater Medical Center in Chicago and Midwest Regional Medical Center in Zion, Ill., develop his own line of whole foods-based nutritional supplements, and oversee research on his long-term cancer survivors. His agenda is so grueling it defies belief, but he adheres to his own program, and is a living testament to its merit.

DIET AS PREVENTION . . . AND TREATMENT

THE BASIS of Block's approach is a tidal wave of clinical evidence demonstrating that a low-fat, high-fiber, plant-based diet can slow or reverse tumor growth and bolster the body's natural resistance to disease. On the other hand, a diet rich in animal products speeds cancer's progress while inhibiting the immune system. Block's treatment, which emphasizes whole, organic foods, is a logical extension of what we already know about the ways nutrition can promote our quality of life. He takes it one step further, arguing that food can treat, not just prevent cancer.

There's plenty of scientific evidence to support this claim: Saturated fat and animal protein have been

correlated in numerous well-respected scientific studies with increased cancer rates. And for reasons not fully understood, fat and protein from animal sources can cause normal cells to morph into cancerous tumors; established tumors to mushroom; and the body to become the ideal biochemical medium for cancer cells to flourish and spread, or metastasize, from one organ to another.



MANY OF BLOCK'S PATIENTS TURNED TO HIM AFTER THEIR CONVENTIONAL DOCTORS GAVE UP ON THEM.

In contrast, plant foods inhibit cancer. Phytochemicals in broccoli, cauliflower and other cruciferous vegetables help cancer-fighting enzymes purge carcinogens in cells. Garlic strengthens the immune system. Soyfoods contain genistein, a chemical that counteracts hormonal cancers and shrinks tumors. Carotenoids in orange-colored fruits and vegetables as well as leafy greens shield cells from careening free-radicals that can cause cancer. And nutritional biochemists speculate that these already identified cancer-fighting properties in plants are just the tip of the iceberg.

In addition, studies indicate

that high doses of certain vitamins taken in supplement form, as well as some Chinese herbs, can mitigate the side effects of chemotherapy and radiation. "People say all the time that the proof isn't in yet in terms of using diet as a treatment for cancer," Block says. "I strongly disagree." So does a growing cohort of long-term cancer survivors, who turned from their mainstream physicians to Block for treatment. Because Block's controversial methods have only recently begun to attract research dollars (and many of his patients turn to him long after conventional physicians give up), survival rates with his method versus conventional treatment alone have been difficult to quantify. However, he promises that preliminary data currently being considered for peer-reviewed publication is "very intriguing." And some of his patients' stories seem nothing short of miraculous.

NOTHING THEY COULD DO

GLORIA CANTU and her husband, Omero, were on vacation when they realized her abdominal pains and rapid weight loss might not be due to the flu. They returned home to Iowa City, where a specialist diagnosed Gloria with a tumor two inches in diameter on her pancreas. The prognosis was bleak. Pancreatic cancer is notoriously lethal, and conventional approaches almost always fail; the overwhelming majority of patients die within one year. According to Omero, who translates for his Spanish-speaking wife, their doctor told Gloria: "There's nothing we can do for you. You have four to six weeks to live." Nonetheless, the doctor prescribed a course of chemotherapy and radiation, which damaged Gloria's stomach and kidneys but not the tumor.

Desperate, the Cantus went to see Block, whom their son had seen on a television program. During their initial consultation, he placed the Cantus on a diet that emphasized grains, vegetables, tofu and soy cheese. Originally from Mexico, the Cantus found it an awkward adjustment. "At the beginning we hadn't even heard of many of the foods on the list," Omero says, laughing. "We knew brown rice, but everything else

was new. Thank God we were able to find them at a health-food store.”

Gloria’s improvement was dramatic. In three days, a terrible case of diarrhea was gone. Six months into the program, using the diet, a full exercise program, intensive counseling, and one course of radiation and mild chemotherapy, the tumor on her pancreas started shrinking. After one year—with no further conventional treatment—only scar tissue was left where the tumor had been. “Gloria is remarkable because her scans are completely clear,” Block says. “She’s one of a group of patients who have really responded to our treatment.”

Who is responsible for Gloria Cantu being alive and in complete remission four years after mainstream experts gave up? It depends on who you ask. Block credits her husband, the “knight in shining armor” who helped her adhere to a strict, unfamiliar dietary regimen. The Cantus credit their faith in God and “Dr. Block’s diet, because that’s when she started turning around.” Her original physician disagrees. “He says it was a delayed reaction to the chemotherapy [he administered],” Omero says.

CONVENTIONAL ADVICE MAY DO HARM

A HIGH DEGREE of skepticism still colors the medical community’s response to nutrition therapy, even though the last decade has been a watershed period for nutrition and cancer research. Several influential studies, including the massive China Health Project by T. Colin Campbell, Ph.D, professor of nutritional biochemistry at Cornell University in Ithaca, N.Y., created believers out of many doubtful scientists by demonstrating that Asians have lower incidences of cancer because their diets are higher in plants and soyfoods—and lower in fat—than the typical Western diet. In response, the American Institute for Cancer Research (AICR) developed dietary guidelines for preventing cancer: Reduce dietary fat intake—both saturated and unsaturated—from the current average of approximately 40 percent of total calories to 30 percent; increase consumption of fruits, veg-

DO DOCTORS ADVISE CANCER PATIENTS TO EAT FOODS THAT PROMOTE THEIR ILLNESS?

etables and whole grains; consume salt-cured, smoked and charcoal-broiled foods only in moderation; and drink alcoholic beverages only in moderation.

But after a patient is diagnosed with cancer, even these directives are dropped by the AICR and most physicians. Rather than exhorting cancer patients to adopt a more stringent version of the cancer-prevention diet, patients are told to eat as much as they want of whatever they want (including the milkshakes, hamburgers and cheesy casseroles listed in the National Cancer Institute’s Eating Hints for Cancer Patients). The logic behind this advice—cancer patients should eat high-calorie, protein-rich foods—is that cancer patients need extra calories so they don’t waste away. True enough. But according to Block, evidence suggests that the fatty comfort foods sanctioned by the National Cancer Institute and recommended by most doctors tend to feed the cancer and starve the patient.

Experts know that drastic changes occur in a cancer patient’s body. Metabolism speeds up as the immune system marshals its forces to fight the disease. Rapidly growing tumors become sinkholes for nutrients and calories. The body churns through protein, calories, vitamins and minerals, impairing immunity and leaving the patient increasingly susceptible to infection and unable to tolerate chemotherapy, radiation or drugs. Eventually, the cancerous tumors prevail, and severe malnutrition often leads to death.

According to Block, the right diet can alter the course of this bleak trajectory. He believes that the fewer animal products and protein patients eat, and the more whole grains, vegetables and soyfoods, the

better their chances of outliving their cancer. This theory—which Block puts into practice at his clinic—is also supported by several recent studies. For example, a 1993 trial found that among breast-cancer patients in Sweden, those whose disease reoccurred two to four years after surgery ate diets significantly higher in fat—especially saturated fat—than patients whose cancer did not return. An American study that same year found that men with advanced prostate cancer ate more saturated fat than a control population, indicating that animal fat could promote the growth of malignant tumors that are already there. Since these men already had cancer, the researchers could not say that animal fat caused the cancer. But several epidemiological studies show a strong correlation between per capita fat intake and mortality from breast and other hormonal cancers, particularly for post-menopausal women. Other studies show that Italian and Asian women, who eat lower on the food chain and consume relatively little animal fat or protein, live longer with advanced breast cancer than American women.

There are exceptions. One famous study of 89,000 nurses showed no relation between fat intake and breast-cancer rates. But Block suggests that the level of dietary fat the subjects consumed (in this case about 30 percent), was not nearly low enough to make a difference in their breast-cancer rates. And a study published this winter, which failed to find a relationship between fat and breast-cancer rates among women in four countries, did not address types of fat or the total dietary intake of plant foods sufficiently, Block says: “Just because you eat a diet low in fat doesn’t mean it contains adequate, let alone advisable, levels of [cancer-fighting] phytochemicals that would negate [cancer-promoting] free radicals.”

Hormonal cancers aren’t the only ones affected by dietary fat. Clinical trials have shown that a diet high in polyunsaturated fat diminishes immune responsiveness, and a diet high in saturated fat may encourage cancer cells to metastasize. Other studies indicate that a low-fat diet en-

BLOCK BELIEVES CONVENTIONAL PRACTITIONERS WILL ONE DAY TOUT NUTRITIONAL ONCOLOGY.

hances immune functioning, crucial for fighting off all diseases, including cancer.

Does all of this constitute proof positive that diet can cure cancer? Even Block admits that it doesn't. Epidemiological studies can never prove cause and effect. But they do provide compelling evidence, and that, combined with his own experience, is enough for Block and his patients. After all, in the early 1970s, many physicians were arguing that there wasn't enough scientific evidence to prove that smoking cigarettes causes lung cancer and emphysema. In 20 years, Block is confident that mainstream practitioners will be advising cancer patients to change their diets with the same certainty they now tell their patients to quit smoking. "You can wait until then," he says. "Or you can start now before all the proof is in."

A NEW WAY TO FACE CHEMO

THE "CHEMOROOM" of the Block Medical Center is unremarkable in many ways, except there are no vomit bags in sight. Most cancer patients succumb to nausea and fatigue after one chemotherapy session, but at Block's clinic, Josephine Chester, whose breast cancer is now in complete remission, is taking one of her last rounds of chemotherapy while munching on an organic apple. A healthy eater all her life, Chester learned to give up her occasional bacon-and-egg breakfast in favor of the Block nutritional program. Now she eats only whole grains, miso, tofu, legumes and organically grown vegetables and fruit, and keeps her fat

intake below 15 percent of her total calories. She credits this diet with allowing her to endure highly toxic chemotherapy and a mastectomy with no complications.

"During my first three or four sessions of chemotherapy, my gut was doing the hokey pokey, but I never threw up," she says. "One time I got to the end of chemo and I was so hungry my husband and I went to the Blind Faith Cafe [a vegetarian restaurant] to eat. When I told my nurse friend that, she couldn't believe it." This same friend was equally shocked when Chester's surgeon allowed her to go home one day after a radical mastectomy, because he saw no reason to keep her hospitalized.

Anyone who has watched a friend or loved one go through conventional cancer therapies would be surprised by Chester's story, as well as her appearance. While chemo patients are typically lethargic, nauseated and losing their hair as a result of their toxic treatments, Chester is animated and energetic, eager to describe a favorite tofu recipe or bemoan the challenge of finding an organic banana. She has a full head of salt-and-pepper hair, and a pink tinge to her cheeks. She hasn't suffered from the typical side effects of treatment, and she credits her diet and supplement regimen.

How can a plant-based diet lessen the toll of chemotherapy and radiation? According to Block, there is strong evidence that phytochemicals in cabbage, onions, garlic and other cruciferous vegetables are powerful blood detoxifiers, flushing poisonous residues of drugs and chemotherapy from the body. On the other hand, saturated fats can make the body sluggish, conducive to inflammation and physiologically unbalanced. "We see from an empirical and experiential point of view—compared to what happens in most settings—that our patients are tolerating conventional treatments dramatically better, with few or no side effects," Block says.

The nutritional and herbal

supplements that Block prescribes may also help during conventional treatment. For example, Chinese practitioners prescribe dong quai to diminish damage to the kidneys caused by chemotherapy. And a 1981 study found that, among patients undergoing their first course of chemotherapy, those given high doses of vitamin A supplements responded better to treatment and showed less disease progression than patients who did not receive the vitamin. Other studies show that antioxidant supplements, including vitamins A and E, helped patients' immune systems rebound after chemotherapy, and has been shown to reduce or eliminate hair loss in some patients.

DRASTIC CHANGES, DRAMATIC RESULTS

FOR BLOCK'S PATIENTS, the studies and the controversy they inspire are just academic trivia. For them, the definitive proof is in the way they feel. "I lived the all-American life, doing everything wrong," says Roger Ball, a 66-year-old Indiana resident whose multiple myeloma—a cancer of the head and neck—went into remission with diet and exercise alone. "My oncologist recommended chemotherapy, and told me 'Diet and exercise isn't going to help.'" Ball says. "But I eat a vegetarian diet and do the NordicTrack, and my cancer is in remission."

Others can't bring themselves to change so drastically. To them, the thought of switching over from a high-fat, meat-laden diet—especially late in life—seems almost as dire as the disease. In these cases, Block's program offers little hope. Ball remembers his old habits fondly. He doesn't spend much time regretting his years of poor eating. But everything is different now that he has cancer; there's too much at stake to revert to his old habits. Glancing at his wife, Helen, and his sister, he says: "I'm happy, and I've got a couple of loved ones with me. I'd like to hang around for awhile." •

**Some names and identifying characteristics have been changed in this story.*

Amy O'Connor is VEGETARIAN TIMES' news editor.

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