

Metabolic disease drug gains popularity among terminally ill cancer patients

Treatment not yet tested on humans

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A drug approved to treat metabolic disease in children is gaining popularity among terminally ill cancer patients despite warnings that the drug has not been tested on humans.

Dr. Akbar Khan has been supplying patients at his private medical centre in Toronto with Dichloroacetate (DCA) after a University of Alberta study demonstrated it could successfully shrink tumours in rats without damaging healthy cells.

The husband of one of Dr. Khan's lung cancer patients alerted him to the drug, hoping his wife could benefit. The woman died before Medicor Cancer Centres could complete the appropriate research, Dr. Khan said, but in March, 2007, another lung cancer patient received doses of DCA.

The drug is a cancer-controlling drug, rather than a cure, he said. Two of 10 patients he has treated so far have show significant improvements. A four centimetre tumour in one patient's shoulder disappeared while another patient's debilitating abdominal discomfort was abated.

The eight remaining patients have shown mild improvement while receiving milder dosages, he said. Known side effects of DCA include heart burn and numbness in the hands, Dr. Khan said. It is available for about \$150 per week, depending on dosage, he said.

But Dr. Terry Polevoy told the Edmonton Journal that the College of Physicians and Surgeons of Ontario should take away the Khans' licences for offering a compound that has not been proven to shrink tumours in humans.

"They are not oncologists. They should not be making these decisions," Dr. Polevoy said.

"I think they should be disciplined for using this stuff. That, to me, is unethical, to use something that has never been proved to do anything."

Dr. Khan, a physician for 13 years and founder of Medicor, counters that his patients have each been well aware of the risks and benefits of DCA. "What right is it of a physician to tell the patient, 'No you can't try this drug,' if the patient is facing a terminal and there is no other treatment?" he said

"We did our homework and our job as physicians is to advise the patients on what our opinions are. We have to respect the patient's opinion, but we have to give them the safest possible treatment and in the end it's the patient that makes the decision."

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