

2018



ATAVISTIC CHEMOTHERAPY OF CANCER

PATIENT INFORMATION

PACKAGE

The Oncology of the Future”
Digital Journal

atavisticchemotherapy.com

The Revolutionary New Science and
Drug-Based Approach to Treat Cancer
Effectively and Humanely in the 21st
Century

CONTENT:

- 1.** Are you a Candidate for Atavistic Chemotherapy?
- 2.** Informed Consent Process & Registration
- 3.** What is Atavistic Chemotherapy?
- 4.** Why a Therapy Directed Against Bacteria, Protozoa and Fungus?
- 5.** Drugs Employed
- 6.** Most Common Side Effects
- 7.** Your Daily Life During Treatment

1. Are you a Candidate for Atavistic Chemotherapy?

Atavistic Chemotherapy is not an alternative treatment for cancer, but rather a drug-based therapy that we believe is the correct way to treat cancer based on the origin and biological behaviour of cancer cells.

If you are interested in undergoing Atavistic Chemotherapy to treat your cancer, please review all the information contained in this brochure.

Eligibility criteria for patients to join our trial are:

Inclusion Criteria:

- Patients with malignant disease confirmed histologically, a cancer that is considered incurable, progressive and fatal within the next 16 months.
- Patient with an expectation of life greater than 3 months.
- Patients with malignant disease that may be evaluated or measured clinically either through radiographic studies, visually, using blood tumour markers or through any other method medically approved for that purpose.

Exclusion Criteria:

- Patients over 75 years of age.
- Patients who are pregnant.
- Patients that have a known allergy to any of the drugs plan for use.
- Patients with severely compromised renal, hepatic, pulmonary or cardiovascular conditions, or any other clinical conditions such as AIDS, tuberculosis etc., which in the opinion of the investigator the treatment may pose a risk to the subject.
- Malignancies of hemato-lymphatic origin (leukemias, lymphomas and myelomas).

2. Informed Consent and Registration

This is a clinical study registered with the National Institutes of Health (USA) under the identifier: NCT02366884 (www.clinicaltrials.gov). This study was initiated in 2011, and it is NOT being sponsored by any pharmaceutical company. All drugs involved are already in the market and available worldwide. It has been financed and sponsored in its entirety by the Arguello brothers. This is a not-for-profit activity, and patients pay only for the cost of the drugs involved in their treatment and services (currently \$1,500 USD/month).

Also, make a list of any questions you have to which you don't see the answer. When you are ready, Dr. Frank Arguello may be contacted as follows:v

Email: ArguelloF@AtavisticChemotherapy.com

Phone: (301) 760-7777 (Maryland, USA)

Not all clinical trials are right for all patients. A trial may be safe for one patient to join, but not safe for another. Each protocol has strict rules that we must follow to decide who may join the clinical trial. These rules are called eligibility criteria (see above). This protects patients from getting treatment that may harm them.

- All patients must read, understand in full, and complete an Informed Consent Form, accepting treatment with atavistic chemotherapy's benefits and potential risks, if any.
- The purpose of the informed consent process is mainly to protect the patient. However, it also provides the doctor with evidence that you understand and accept that the treatment fulfills ethical and legal requirements.
- Please note that a capable adult cannot be forced to take any type of medical treatment, conventional or non-conventional. In general, anything other than a life-threatening emergency in which the patient is unconscious requires consent before treatment.
- Informed consent assumes that you are legally able to make your own decisions. If you are not, the person who is legally allowed to make decisions for you undergoes the informed consent process on your behalf.

- For informed consent to take place, the information that is given must be understood. This responsibility is shared by the patient, since the doctor can't know what you don't understand unless you ask about it. You will have the chance to consider the information and ask questions. However, making these questions known is your responsibility.
- Informed consent assumes that when you make your decision, you are not pressured. Rather, you are making a free choice, based on what you feel is best for you.
- Even when there are no other acceptable medical treatment options, it is still your right as a competent adult to refuse a treatment that you do not want. You may also refuse to be in a study. However, once you sign the consent form, it is taken to be your formal, legal agreement that you consent to the plan or procedures listed, unless you revoke (take back) your consent before treatment is given.
- You will receive a copy of the consent form. The clinic retains the original as a legal record of your agreement to the treatment.
- All patients in clinical trials are volunteers. You can choose to quit a clinical trial at any time, but talk to your doctor first. Your doctor can tell you how quitting the trial might affect your health and if there are other treatment options. Your relationship with your health care providers will not be changed by your decision.

The Enrollment Process

Once you have read all the above information and discussed your case with Dr. Arguello, and you or your relatives have asked all questions, we may proceed with the Registration and Informed Consent process.

Please click this link to register and complete the consent form:

REGISTER & INFORMED CONSENT FORM

After your registration and consent form are completed, click the button "SUBMIT." You will automatically receive an e-mail with a random password and login information. You will need to wait until your registration is accepted and confirmed via e-mail by Dr. Arguello, before you can access your registration again.

Your registration will be evaluated by Dr. Arguello. If he has additional questions for you, and/or if he needs to obtain specific reports, CDs, or studies, he will let you know.

Once approved, again log in to the site to change the password, if you wish to do so. You will also have private access to your medical file, protocols of treatment, communications between you and Dr. Arguello, etc. Dr. Arguello prefer communications via e-mail, telephone, WhatsApp and Messenger. Wishing you many more beautiful years!
Thank you for your interest in our work.

3. What is Atavistic Chemotherapy?

Contrary to popular belief, chemotherapy does not refer only to the use of toxic drugs to treat cancer. By definition, chemotherapy is simply a therapy based on the use of chemicals (drugs). In the case of depression, for example, a psychiatrist may opt to treat a patient with chemotherapy (chemical medications), instead of using psychotherapy or electro-convulsive therapy. In reality, a practice as common as taking vitamins to prevent or treat a disease is chemotherapy, because vitamins are chemicals (drugs), as are Tylenol® (acetaminophen), Advil® (Ibuprofen), etc.

Atavism is a state in which a cell, or even an entire organism, expresses genetic traits that were commonly seen in its evolutionary ancestors. These are structural and visible traits which have not normally been seen for a very long time, but which inexplicably make reappearance.

Atavistic Chemotherapy implies the selection and use of drugs (chemicals) that, based on the principles of atavistic oncology, should be effective in killing cells which have devolved or returned to a primitive unicellular behavior (malignant behavior). These are drugs which have historically been used in the treatment of diseases in which primitive cells proliferate, invade and metastasize (migrate). These diseases include bacterial, protozoal and fungal infections. We adopted the use of this term to differentiate atavistic chemotherapy from traditional chemotherapies.

4. Why a Therapy Directed Against Bacteria, Protozoa and Fungus?

The only form of life on planet Earth is the cell. The first cells that originated on Earth about 3.5 billion years ago were independent, single cells with a life of their own. Since then, the cells have evolved; some cells continue living in nature independently from each other, and with the machinery necessary to procure their own food, to multiply and migrate to distant places to preserve and spread their progeny (e.g., unicellular organisms such as bacterial, protozoal and fungal cells). Other cells evolved forming colonies of cells, some of which developed other more complex specialized functions to help each other (e.g., multicellular organisms such as animals/humans and plants). However, all the basic elements to sustain life remain identical in all living cells, whether as unicellular or multicellular organisms.

As indicated in the introductory video and other sections of our website (www.AtavisticChemotherapy.com), along with plants and other animals, human beings are multicellular organisms. This means that our bodies are formed by groups of cells with different abilities and functions. Despite the apparently great differences between types of cells in our bodies, all multicellular organisms evolved from bacteria-like unicellular organisms over a period of several billion years. In fact, most of our cellular functions are biologically identical to the functions of unicellular organisms like bacteria, protozoa and fungi. Among these identical functions are the metabolism of glucose, DNA replication, and the synthesis of enzymes and other proteins.

Atavistic oncology postulates that cancer cells are cells that have reactivated past evolutionary genetic information preserved in the genome (DNA). Thus cancer cells reacquire the abilities and behavior of their ancestral precursor cells, the primitive unicellular organisms. Therefore, malignant or pathogenic characteristics found in cancer cells such as unlimited replicative potential; capacity for invasion, migration, and metastases; ability to evade host's immune system, and acquire multidrug resistance; ability to live in hostile conditions, and the capacity to kill the host, are cellular traits reasserted from their hereditary past as primitive, independent single-celled organisms. Bacterial, protozoal and fungal cells do exactly the same when they enter into our bodies (they proliferate, invade and destroy surrounding tissues, migrate to other organs, and eventually kill the host). They simply obey to very primitive, instinctive patterns of basic cellular behavior that allows them to survive within the host.

This does not imply that cancer cells are bacteria, or protozoa, or yeasts. It means that cancer cells express functions or behaviors similar to their ancestral parents, the unicellular organisms (such as bacteria-like and protist-like organisms) from which our cells originated. This explains why all multicellular organisms, plants and animals/humans develop cancers. Obviously cancer does not occur in unicellular organisms since they represent the cellular behavior that we call cancer when one of our cells behave like them.

If this is true, a combination of drugs that are effective to eradicate certain unicellular organisms should work in cancer treatment. Not only should they work, but this approach must also be superior to any other approach used in the past to treat cancer. Because of the overwhelming results we have obtained and shown on our website, we prophesize that atavistic chemotherapy will become the way cancer is treated in the world.

5. Drugs Employed

All the drugs given as part of atavistic chemotherapy are FDA approved and have been safely used in medical practice for decades. None of them are experimental drugs, and we obtain them from around the world for use in the atavistic treatment regimen. We use these drugs in the treatment of cancer under the well-accepted “off-label” medical practice.

The term “off-label use” refers to the prescribing of a drug that is approved for one use, but is used to treat a different disease. Off-label use of medications is not unusual. The use of minocycline is a good case in point. Minocycline is an antibiotic that can kill bacteria found on the skin. It is approved for, and commonly used in the treatment of acne vulgaris in teenagers. Minocycline was later found to have many other beneficial uses, including the treatment of mental diseases such as schizophrenia, or to protect nerve cells after a stroke. Minocycline has not been FDA-approved for all of these purposes, per se, but once a drug is approved for use in humans, its use in the treatment of other diseases is left to the discretion of doctors.

The drugs used in the trial have been selected based on the principles of “Atavistic Metamorphosis” published by Dr. Arguello in 2011, and after years of testing them in hopeless cancer patients.

They fall in the pharmaceutical group of antibacterial (antibiotic), antifungal and antiprotozoal (antiparasitic) drugs. Antiviral drugs also have a place within the principles of atavistic chemotherapy because viruses preceded cells in their origin, and they were the precursors of the first cells on this planet. However, costs and toxicity of antiviral drugs have forced us to use them only when other approaches fail.

Although the drugs we use have been around for many years, atavistic chemotherapy and Immunotherapy is a new type of cancer treatment. A reason for not divulging the names of the medications is to prevent patients from self-medicating. It also prevents well-meaning caregivers from misusing drugs they are not familiar with in the treatment of cancer. However, these cautions don't mean that patients are left in the dark. All patients undergoing atavistic chemotherapy are informed of the drugs they are receiving. Atavistic chemotherapy is intended for 8 to 12 months of daily treatment. The longevity of treatment better ensures that all cancer cells have been eliminated by the end of therapy. All medications are taken orally.

6. Most Common Side Effects

Some side effects may be associated with the use of atavistic chemotherapy and Immunotherapy. The most common side effects are:

- Fatigue
- Nausea
- Loss of appetite
- Hair loss
- Skin rashes
- Dry skin

Fatigue

Fatigue is one of the most common side effects of atavistic chemotherapy. The degree of tiredness seems to occur in proportion to the severity of the patient's cancer. Patients with small amounts of cancer rarely experience undue fatigue. Conversely, patients with large amounts of cancer usually do experience fatigue. This symptom tends to disappear during the first month of treatment. We believe that worsening fatigue occurs as a result of the increased work your body must do to remove the waste products generated from dying and disintegrating cancer cells.

Nausea

Nausea is most common during the first few weeks of treatment, and then it tends to go away. Nausea with atavistic chemotherapy is very different from that seen in conventional chemotherapy. In conventional chemotherapy, damage to the cell lining of the stomach and intestines causes nausea. The nausea that may occur during atavistic chemotherapy generally only happens one to two hours after the medications are administered, and the nausea is usually mild. Nausea and vomiting can be treated by changing the way you eat and by using drugs especially designed to help relieve these symptoms. These medications are called antiemetic drugs. Sometimes patients need to try more than one antiemetic drug before finding one that is effective.

The following measures are also helpful in reducing nausea:

- Eat several small meals, instead of one large one.
- Eat slowly.
- Avoid foods that trigger nausea.
- Drink water an hour before meals (instead of with meals).

Skin problems

Some patients experience dry skin or rashes during treatment. Dry lips are a common occurrence. Using skin creams, lotions, and bath oils can help you regain moist skin when drying, itching, or cracking is present. The regular use of lip balm during the day may also prevent cracked lips.

Loss of hair

Female patients may have hair loss during atavistic chemotherapy treatment, usually after two months of treatment. Hair loss may involve the head, eyelashes, eyebrows, underarms, or pubic area. Unfortunately, the occurrence of hair loss is unpredictable. Hair usually grows back during treatment. Dr. Arguello is constantly developing new combinations of anticancer drugs to prevent this distressing side effect. Meanwhile, a short haircut can make hair look thicker and fuller. Protecting exposed skin from the sun with sunscreen, clothing and hats also helps minimize hair loss.

Diarrhea

Diarrhea can develop during atavistic chemotherapy. It can be caused by the use of antibiotics or by the vegetable oil that is used to enhance medication absorption.

Many of the drugs used in atavistic chemotherapy are better absorbed in the presence of fats. Therefore, patients are instructed to take their medicines with some type of vegetable oil, preferably olive oil, along with their regular meals. However, some people's digestive systems are more sensitive than others to fats. Diarrhea can be the result. Probiotics and over-the-counter Pepto-Bismol, Kaopectate or Imodium are useful in controlling diarrhea. On the other hand, milk and milk products can make diarrhea worse and should be avoided. A liquid diet without carbonation is sometimes helpful. If you experience more than seven or eight loose stools in 24 hours, contact your doctor.

IMPORTANT: Bear in mind that you have a serious disease which can, by itself, create life-threatening situations. Thus, symptoms you experience may not be directly related to side effects of treatment, per se. If you experience any of the following, go immediately to your local emergency room:

- Loss of consciousness
- Sudden swelling of a leg which turns red and painful
- Sudden chest pain
- Uncontrollable bleeding

Do not wait for Dr. Arguello's phone call or email. It is more appropriate to contact your local doctor or to go directly to an emergency room in these situations.

7. Your Daily Life During Treatment

For some inexplicable reason, as soon as the diagnosis of cancer is made, many patients switch their diets to veggies and fruits only. Not only that, there are "Cancer Diets" and "Cures" based on strict diets of vegetarian, sugar-free, fat-free, or animal-product-free meals. Of course, fruits and vegetables are tasty and colorful additions to any meal, and you should eat them as part of your diet. But in terms of health and nutrition, fruits and vegetables have little to offer to humans. Bunnies, birds, horses and cows depend exclusively on them because their digestive systems and nutritional needs are different from ours

Although it may seem cruel to attack the innocent veggies and fruits, the facts are these: there are 13 important vitamins for humans, and fruit is good for one of them— vitamin C. Vegetables offer also the vegetable form of the fat-soluble vitamins A and K1. However, your body will be able to absorb these only if you add some fat, such as butter or olive oil. The useful forms of vitamin A—retinol and K2—are found only in animal foods..

As for minerals, there are 16 needed in our diets and fruit is good for one of them—potassium. Deliberately consuming extra potassium is not normally necessary, since most people get plenty of potassium from their regular diets.

Vegetables are great sources of iron and calcium, but the vitamins and minerals in animal foods (meat, fish, eggs, and dairy products) are superior to those in fruits and vegetables, hands down! Vegetables contain fiber, which has been found to prevent some diseases. However, that preventative attribute isn't acquired overnight. It takes place only after a life-long use of fiber. Your primary objective is to be strong for the treatment you are taking, so you can deal with any problems that your disease may cause, such as anemia, weight loss, or obstructions.

Plant-derived proteins are small and of poor nutritional quality, as compared with animal proteins. This is why horses and cows have to eat grass day and night to satisfy their nutritional needs. Lions, on the other hand, are carnivores; this is why in the wild, lions eat only every five or six days. We humans are, by nature, omnivores. This is ingrained in our DNA. An omnivore is an animal that derives its energy and nutrients from a diet consisting of a variety of sources, including plants (vegetables, fruits, and grains) and animal products (meat, chicken, fish, eggs, and dairy products).

Human beings cannot choose whether or not to be omnivores; our omnivorous natures are a fact of life, so we must eat both plant and animal products to maintain our health. Hunger and malnutrition in some African countries are not caused by a lack of plant products in the diet, but rather by the almost complete absence of meat-based protein and fat.

The Diet We Need to Succeed

Whether you believe in the above or not, during the time you are in atavistic chemotherapy and Immunotherapy, we will require that you feed yourself a truly balanced diet that includes animal products (meat, chicken, fish, and broth derived from them, eggs, and dairy products) and plant products (vegetables, fruits, and grains).

Daily Activities and Exercise

If running or other physical exercise were good to recover health, our hospitals would have gym equipment in patients' rooms rather than beds. Physical exercise is essential to having a healthy body and mind, under normal circumstances. However, your current circumstances are not normal.

Your body has a limited amount of energy to use each day. We want that energy to be focused on repairing tissues. You will be healing areas occupied by dying cancer cells. Therefore, during the first month or two, limit your activities, and rest as much as possible. Walking a little every hour will help prevent clotting deep in the veins of your legs, as well as maintain mobility, muscle tone and muscle mass. As treatment progresses, your body may start to want to do more activities. Listen, and obey what your body is telling you.

Tricks of the Mind - Panic Attacks

Anxiety and panic attacks are not uncommon in people who are suffering from serious health issues or diseases. Cancer is not the only culprit; heart attacks, car accidents, and surgeries can also cause panic attacks. You are starting a new treatment to which you are not sure how you are going to react. This, by itself, can trigger an anxiety attack. These attacks are 100% real, and what your body is feeling is real, but all of the symptoms are generated by your mind.

The phenomenon of an anxiety attack occurs when the mind becomes fixated in thinking that something catastrophic is happening, or is going to happen. The perception of physical danger can create symptoms similar to those of a heart attack. Little pains are exaggerated. Itching on the head is suddenly transformed into brain metastases. Movements of the intestines are perceived as an imminent collapse of your body. Suddenly, the heart is beating fast as hell and pounding in your chest. You cannot breathe well, your forehead and hands start to sweat, and you begin to feel dizzy, as if you are going to faint. You don't faint, but you imagine the ambulance coming and rushing you to the hospital at high speed.

If any of this sounds familiar to you, you have had a panic attack. The good news is that panic attacks can be prevented by changing your thoughts. Learn to catch yourself when you start fantasizing about catastrophe. If you start to experience symptoms that feel like a heart attack, say out loud, "This is a panic attack." The simple act of recognizing a panic attack for what it is takes away its power over your mind.

Drinking sweet, hot tea can help. Chamomile tea has a calming effect. Breathe deeply and regularly. Remember that the side effects of the medicines are not like a heart attack; side effects are mainly detected through careful laboratory blood tests. Tumors, when they grow, create different symptoms, not anxiety or a racing heart at night. Expel those types of ideas from your mind and substitute them with thoughts about happy moments in your life and/or images of full recovery, and doing again all the things you like to do.

Emotional Stress and Depression

Cancer is a catastrophic diagnosis for patients and their families. Positive thinking doesn't cure it, but positive thinking and a positive attitude are needed to overcome the inconveniences caused by your disease, and to encourage compliance with your treatment.

Thinking positively is easier said than done, but there are constructive activities which promote it. Listen to audiobooks, or watch DVDs by motivational speakers and spiritual leaders. Even if you are not a religious person, you will find great solace and great motivation watching videos by pastors like Joel Osteen and Dr. Charles Stanley. Explore the Internet, YouTube and local support groups.

Long Duration of Treatment

Atavistic chemotherapy and Immunotherapy typically lasts 12 months or more. Do not be shocked or apprehensive about the long duration of therapy. The treatment of tuberculosis, leprosy, and other infectious diseases caused by unicellular microorganisms can last for years, sometimes decades. People with those diseases are happy that a treatment exists for them. Likewise, you can celebrate! Rejoice that you are fighting, not with conventional chemotherapy and radiation, but with a new, logical, scientifically sound treatment.

END

Rev. 11/07/2017

www.AtavisticChemotherapy.com