

## **Iscador Mistletoe Therapy**

Mistletoe Therapy is deeply rooted in European culture and a part of herbal medicine for thousands of years, it can be safely integrated within a holistic approach to cancer care.

Mistletoe is a prescription-only medicine in the UK and not readily available on the NHS; the majority of patients access treatment through centres with private outpatient day clinics.



#### What is Iscador?

Iscador is an anthroposophical herbal preparation of mistletoe (Viscum album L.) grown commonly in Northern Europe. It is manufactured in Germany to high standards of pharmaceutical quality and sustainability, where the whole plant is used and both winter and summer harvests of mistletoe are blended. Visit www.iscador.com/en-de/mistletoe-

**preparations/production.html** to see how lscador is made.

## Mistletoe as an adjuvant cancer therapy

Iscador is used medicinally in low doses to stimulate and activate the immune system. Research shows it modulates the immune response and has direct anti-cancer effects. It helps the innate immune system work more efficiently and increases white blood cells and natural killer (NK) cells. NK cells directly recognise and break down stressed cancer cells and release anti-tumour cytokines. NK cell numbers may be lowered by radiotherapy and chemotherapy.

Iscador is a supportive therapy in cancer, used to improve patients' well-being, energy, and quality of life. It is not a curative treatment and should be integrated within, not as an alternative, to conventional cancer care. Mistletoe is appropriate for all types of cancer, however, a consultation with one of our medical team ensures an individualised and effective approach.

## **Indivdualised therapy**

The composition and concentration of viscotoxins and lectins, considered important for their use in cancer therapy, vary by the season and the host tree on which Mistletoe grows. The balance of these bioactive substances, individual patient characteristics, and type and site of cancer is carefully considered in the selection of preparation to prescribe.

## **Iscador preparations**

The following preparations of Iscador are available to prescribe. NCIM prescribes Iscador as oral liquid or subcutaneous injections.



## **Letter to GP/Oncologist**

With permission, and when appropriate, NCIM will write to the patient's GP and Oncologist to inform them of the treatment plan with Mistletoe Therapy (Iscador).

## **Prescribing pharmacy**

NCIM works with a local independent pharmacy, Buxton and Grant, to fulfill Iscador prescriptions. Payment for treatment is made directly to the pharmacy:

#### **Buxton and Grant Pharmacy**

76 Whiteladies Road Clifton, Bristol, BS8 2XU

**Telephone:** 0117 973 5025

www.buxtonandgrantpharmacy.co.uk

An individualised regime may differ slightly from the typical regimes described on the following page.

## Iscador by mouth

Oral preparations of Iscador are prescribed in either 0.1% or 3% concentrations.

A typical regime is to take 10 drops in 20ml of water, 5 days per week (Mon-Fri), with breaks at the weekend, and take until the bottle is finished (approximately 3 weeks of treatment), followed by a 1-week break before starting the next bottle. Patients start with 1-2 bottles initially and then continue on a regular regime. Once on a regular regime, up to 4 bottles can be issued per prescription. Follow-ups are recommended at 6 and 12 weeks and then a minimum of 6 months thereafter (or sooner if health or related circumstances change).

#### **Side-effects**

Clinical research shows that oral Iscador is very safe and adverse effects are extremely rare. Some cases have been reported of flulike symptoms, feeling unwell, nausea, diarrhoea and skin rashes.

#### **Cost of treatment**

1 bottle of oral treatment

(payable to the pharmacy)

£37 + £9 special delivery next day

Repeat prescription fee

(payable to NCIM)

£10

## **Iscador by subcutaneous injection**

Subcutaneous preparations are prescribed, in Series 0, 1 and 2 (0.01mg-20mg). Each Series contains 7 x 1ml ampoules of increasing strengths:

- **Series 0:** 2x0.01mg, 2x0.1mg, 3x1mg
- Series 1: 2x0.1mg, 2x1mg, 3x10mg
- Series 2: 2x1mg, 2x10mg, 3x20mg

A typical regime is to take 2 injections per week on a Monday and Thursday; 1 box of 7 ampoules gives 3.5 weeks of treatment. A break of 1-2 weeks may be recommended at various intervals. Patients start with 2 boxes of Series 0 and should feed back about their response and observations after taking the higher-strength injections. Their clinician will review and consider the next appropriate prescription. Treatment is prescribed in multiples of 2 boxes (14 ampoules).

#### **Side-effects**

Studies show that subcutaneous Iscador is safe. Only a few patients will react with systemic side effects, which may include fever, skin reactions that persist for more than 72 hours, general feelings of unwellness, headaches, shivering or dizziness on the day of injection.

## **Equipment**

Patients will need to purchase 2ml syringes and needles (the pharmacy can supply at 40p each), alcohol wipes and a Sharps bin, and will need to find out how to safely dispose of Sharps waste in their area.

### An optimal dose response

#### An optimal dose response is identified by:

- Improved wellbeing (e.g. improved sleep, mood, motivation, energy, tolerability to conventional treatment, reduced symptoms, and feeling of warmth)
- Increased temperature a few hours after injection, or an increased baseline temperature
- A mild local inflammatory reaction up to 5cm in diameter at the injection site and subsiding within 72 hours.

As people respond differently; an optimal dose response may occur with lower strengths or not until higher strengths. It may take several weeks to establish a suitable strength for maintenance therapy. Once on a regular regime, patients can request up to 4 boxes per prescription. Follow-ups are recommended at 6 and 12 weeks and then a minimum of 6 months thereafter (or sooner if health or related circumstances change).

#### **Cost of treatment**

2 boxs of subcutaneous treatment - 14 ampoules

ampoules (payable to the pharmacy)

£182 + £9 special delivery next day

Repeat prescription fee

(payable to NCIM)

£10

#### **Useful links**

#### **EVIDENCE**

https://www.mistletoetherapy.org.uk/research/

#### **PATIENT EXPERIENCES**

https://www.mistletoetherapy.org.uk/patient-experience/

#### **ISCADOR FREQUENTLY ASKED QUESTIONS**

https://www.iscador.com/en-de/service/frequently-asked-questions-about-mistletoe-therapy/

#### **HOW ISCADOR IS MADE**

https://www.iscador.com/en-de/mistletoe-preparations/production.html



# **Abnobaviscum Mistletoe Therapy**

## **Preparations**

Abnobaviscum Mistletoe is manufactured using a wider variety host trees: fir, maple, almond, birch, hawthorn, and may be prescribed as an alternative to Iscador in some circumstances.

Treatment is prescribed as subcutaneous injections, either in homeopathic potency (D6 D10 D20 D30) or as a single-strength herbal extract ranging between 0.02mg - 20mg.

#### **Cost of treatment**

**1 box of subcutaneous treatment** - 8 ampoules (payable to the pharmacy)

£60 approx\*

## Repeat prescription fee

(payable to NCIM)

£10

\*pharmacy purchases direct from Germany, cost varies slightly according to exchange rate

#### **Further information**

www.abnoba.de/

## **Prescribing pharmacy**

#### **Ferryhill Pharmacy**

9 Millburn Street Aberdeen, Scotland, AB11 6SS

**Telephone:** 01224 580950 www.ferryhill-pharmacy.co.uk

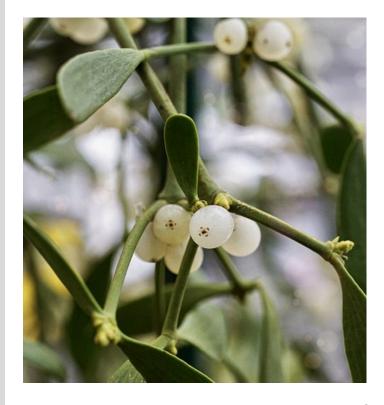
### **Questions and concerns**

Any questions or concerns during treatment should be directed to our Clinical Services administration team who will contact the patient's clinician. We aim to respond to queries within 48 hours.

**Email:** enquiries@ncim.org.uk **Telephone:** 0117 370 1875

For urgent concerns outside office hours, patients should contact their GP or seek emergency medical advice by dialing 999 or 111.

See more FAQs on page 5.



## **Appointment fees**

Initial Consultation
(60 minutes)

Mistletoe Check-In
(15 minutes, telephone only)

**Follow-up Appointments** (60 or 30 minutes as desired)

Recommended at 6 and 12 weeks after starting treatment and a minimum of every 6 months thereafter.

**Mistletoe Supervision** 

For first injection

For subcutaneous treatment only. Patients can also arrange this privately.

£100

£200 (60)

£100 (30)

## **Support towards appointment fees**

NCIM work closely with a charity, the Health and Wellbeing Trust (HWT) who award patient bursaries to people living with cancer which are used towards appointment fees. Ask us for more information on how to apply.

Initial Consultation (60 minutes): allows time for a detailed conversation about health and to begin exploring different integrative approaches to cancer care from a holistic perspective, including Mistletoe Therapy. The clinician will assess the patient's suitability for Mistletoe alongside their clinical context and conventional treatment plan, and talk them through the process of introducing Mistletoe Therapy into their regime.

Mistletoe Check-In (15 minutes): a Mistletoe Check-In appointment is available during the early stages of subcutaneous therapy to assess the individual experience and response to treatment and discuss next steps (this is optional and not in place of a follow-up).

Follow-up Appointments (30 minutes): follow-ups are an integral part of supporting the patient journey with Mistletoe Therapy and are recommended at 6 and 12 weeks after starting treatment and a minimum of every 6 months thereafter. 6-month reviews are required to make adjustments to ongoing treatment regimes as necessary.

Mistletoe Supervision (30 minutes): with subcutaneous therapy, the first injection must be supervised by a healthcare professional. This is for patient safety and to check that patients feel confident and comfortable self-administering their injections. Supervision can be at our NCIM clinic, or patients can make private arrangements with a suitably qualified healthcare professional local to them.

## **Mistletoe Therapy clinicians**

#### **Dr Roger Smith**

Dr Smith is qualified in Integrative Medicine and specialises in conventional, holistic, and lifestyle approaches in supportive cancer care; leading our Mistletoe Therapy service.

#### Dr Emi Maruo

Dr Maruo is a medical doctor and medical homeopath with an interest in integrative cancer care, particularly using diet, homeopathy and Mistletoe Therapy.

#### **Dr Asim Vine**

Dr Vine is qualified GP and NCIM Diploma graduate with additional training in Mistletoe Therapy and using integrative approaches.

### **Dr Elizabeth Thompson**

Dr Thompson set up an Integrative Cancer Care service at the University Hospital Bristol, after which she launched NCIM and practices both Integrative Medicine and medical homeoapthy.

#### Kiriaki Marselou

Kiriaki is a conventionally practicing pharmacist and medical homeopath with additional training in nutraceuticals and mycotherapy which can be supportive in cancer care. Kiriaki can assess a patient's suitability for Mistletoe Therapy which is reviewed and prescribed by one of our medical doctors.

Read more about our clinical team www.ncim.org.uk/meet-the-team

## **Mistletoe Therapy FAQs**

#### Is Mistletoe suitable for all cancers?

While Mistletoe Therapy is indicated for most cancers, it is not always appropriate with lymphomas, blood cancers and brain tumours. Case-specific context is necessary and should Mistletoe not be recommended, an alternative herbal preparation of Helleborus niger may be considered. Helleborus niger is extract from Christmas rose and its immune-stimulating action is milder than Mistletoe. You can read more about Helleborus niger on page 6.

## Can Mistletoe be prescribed for children?

NCIM will consider oral preparations of Mistletoe for children, however, each individual case would need to be assessed for appropriateness.

## What preparations are prescribed?

NCIM prescribes oral and subcutaneous preparations of Mistletoe manufactured by Iscador. There are other manufacturers of Mistletoe such as Helixor and Abnobaviscum. Extracts of different preparations of Mistletoe have varying levels of active constituents and are considered in a variety of contexts. You can read more about Abnobaviscum on page 3, which may be recommended by NCIM in some circumstances. At this moment, NCIM are not offering intravenous or intra-tumoural methods of treatment.

## Do patients need to attend in person?

In person appointments aren't necessary and consultations can take place over Zoom. Treatment is posted out to patients from the pharmacy. Patients who choose subcutaneous treatment will need their first injection supervised by a healthcare professional, either at NCIM or to be arranged privately closer to where they live.

## Is oral or subcutaneous treatment more effective?

The majority of research and evidence is on subcutaneous treatment, so this is the preference for most patients. However, NCIM has been prescribing oral Mistletoe for many years with many positive experiences and it may be the preferred method in some contexts. Examples include those undergoing other complex treatments, who don't wish to self-inject, are cautious of sensitivity to herbal medicines, in remission or wish to support recurrence, or where cost may be a factor.

## What benefits can be expected?

Mistletoe supports cancer patients in improving general wellbeing – for example, sleep, energy, mood, motivation, appetite, and warmth. Mistletoe may also reduce side effects of conventional cancer treatment and improve quality of life. Mistletoe Therapy can be initiated at any time during cancer care; earlier intervention may have a greater effect.

## Can Mistletoe be prescribed for patients overseas?

We would encourage patients to seek treatment in their own country as shipping can be problematic outside of the UK, but do enquire with us and we may be able to work with you or help find treatment local to you. Unfortunately, we are unable to consult or prescribe for patients in the USA and Canada but we're aware treatment can be sourced from Canada.

# Other Complementary Services at NCIM

In addition to Mistletoe and Helleborus niger therapies, there are other approaches patients may wish to consider to support their cancer treatment and help manage symptoms, such as:

- Lifestyle
- Nutrition and food supplements, including Mycotherapy: medicinal mushroom extracts
- Homeopathic and anthroposophical medicines
- Hypnotherapy
- Therapeutic coaching including Hypnotherapy, Emotional Freedom Technique (EFT) and Mindfulness practice

Please enquire with our Clinical Services administration team.

## **Helixor Helleborus niger Therapy - Christmas Rose**



## **About Helleborus niger**

Helleborus niger, also known as Christmas rose, thrives in the beech forests of the Alpine foothills and flowers in the cold, dark months of winter. The wild plant is harvested by hand, twice a year; flowers and stems in the winter, leaves and roots in the summer. Its vitality and resilience reflect a long tradition of use in anthroposophical care and numerous studies and case reports demonstrate safe and effective use as a complementary cancer therapy.

## Therapeutic effects

Helleborus increases the effectiveness of mistletoe therapy and as a cooling therapy, injections are at a later time to mistletoe, preferably evening or on the "mistletoe-free" days.

### **Active constituents**

The pharmacologically active secondary plant substances of Helleborus, the phenolic compounds, steroidal saponins, and ß-ecdysone are shown to have cytotoxic and anti-inflammatory properties. Its anxiety-relieving properties help with fear and restlessness; its anti-oedematous effects alleviate lymphedema, ascites, and pleural effusion.

## **Preparations**

Christmas rose is harvested from the wild plant twice a year and made into 'mother tinctures' and mixed to produce a whole extract without additives.

Helleborus niger is prescribed in homeopathic potency (D3, D4, D5, D6, D12, D20 and D30) and supplied in boxes of 8 ampoules.

Homeopathic dilution of the whole plant extract is injected subcutaneously, from 2 to 3 times per to daily.

There are no known contraindications or drug interactions. With lower potencies, temporary redness with itching and burning at the injection site can occur.

#### **Further information**

www.helixor.com/helleborus-therapy/

## **Equipment**

As with Mistletoe Therapy, patients will need to purchase syringes and needles (1ml in size, the pharmacy can supply at £2.20 per pack of 10), alcohol wipes and a Sharps bin, and will need to find out how to safely dispose of Sharps waste in their area.

#### **Cost of treatment**

**1 box of subcutaneous treatment** - 8 ampoules (payable to the pharmacy)

£75 approx\*

Repeat prescription fee (payable to NCIM)

£10

## **Prescribing pharmacy**

### **Ferryhill Pharmacy**

9 Millburn Street Aberdeen, Scotland, AB11 6SS **Telephone:** 01224 580950 www.ferryhill-pharmacy.co.uk

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Version date: 30 July 2024

<sup>\*</sup>pharmacy purchases direct from Germany, cost varies slightly according to exchange rate