

Mistletoe Therapy

Mistletoe Therapy has a long-standing tradition of medicinal use in supportive cancer care for at least a century. It can be safely integrated within a holistic approach to cancer care.

Treatment is available in the UK on private prescription (non-NHS). Patients access treatment through private out-patient day clinics and integrative medicine centres in the UK. It can be administered as an oral solution, subcutaneous injection, and intravenously. At NCIM we prescribe oral and subcutaneous treatment.



The Mistletoe plant is sustainably harvested from natural habitats in Switzerland, Germany and France, multiple times throughout the year.

At NCIM we prescribe preparations from the following manufacturers: Iscador, Abnoba and Helixor.

Mistletoe as an adjuvant cancer therapy

Mistletoe Therapy 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.

Mistletoe Therapy can be used as a supportive therapy in cancer, 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 standard treatments. Mistletoe is generally appropriate for all types of cancer, however, a consultation with one of our medical team ensures an individualised and effective approach.

Individualised therapy

The composition and concentration of viscotoxins and lectins, considered important for their use in cancer therapy, vary by the season, the host tree on which Mistletoe grows, and the manufacturing methods.

The balance of these bioactive substances, individual patient characteristics, and type and site of cancer is carefully considered in the selection of preparation and regime to prescribe. Individualised regimes may differ slightly from the typical regimes described on the next page.

Preparations

At NCIM we commonly prescribe the following **subcutaneous** preparations (other host tree preparations may be considered as necessary).

Iscador

Qu (oak), P (pine), M (apple), U (elm)

Abnoba

Abietis (fir), Fraxini (ash)

Helixor

A (fir), M (apple), P (pine)

Iscador is the only manufacturer of **oral** Mistletoe (liquid solution) using Qu (oak), P (pine), and M (apple) host tree preparations.

Prescribing pharmacies

NCIM works with independent pharmacies. Patients pay for treatment directly to the pharmacy.

Buxton and Grant Pharmacy (Iscador)

76 Whiteladies Road Clifton, Bristol, BS8 2XU

Telephone: 0117 973 5025

www.buxtonandgrantpharmacy.co.uk

Ferryhill Pharmacy (Abnoba & Helixor)

9 Millburn Street

Aberdeen, Scotland, AB11 6SS

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

ISCADOR by subcutaneous injection

Iscador preparations are prescribed in Series packs of herbal extract. Each Series pack contains 7 x 1ml ampoules of increasing strength.

Cost of treatment

2 packs (14 ampoules) (payable to the pharmacy)

£185.50 + postage

Repeat prescription fee (payable to NCIM)

£10

Iscador preparations:

- **S0:** 2 x 0.01mg, 2 x 0.1mg, 3 x 1mg
- **\$1:** 2 x 0.1mg, 2 x 1mg, 3 x 10mg
- **S2:** 2 x 1mg, 2 x 10mg, 3 x 20mg

Comparing products

Please note that due to differences in harvesting and production methods, the products and strengths between manufacturers are **not comparable**.

Stronger doses are not necessarily better; response to treatment is individual and monitoring is required to identify the optimal dose-response (ODR) that is right for each patient.

ABNOBA by subcutaneous injection

Abnoba preparations are prescribed in homeopathic potency or single-strength herbal extract. Each box contains 8 x 1ml ampoules.

Cost of treatment

1 box (8 ampoules) (payable to the pharmacy)

£60*

Repeat prescription fee

(payable to NCIM)

£10

Abnoba preparations:

- Homeopathic potency D6 D10 D20 D30
- Single-strength from 0.02mg 20mg

Typical regimes

Patients take 2 or 3 injections a week, starting with the lowest Series, single-strength, or potency. Monitoring response is essential and reviewed at follow-up (at 6 and 12 weeks from starting treatment). The clinician will consider the next appropriate preparation to prescribe until an optimal dose-response (ODR) is experienced - read more on page 3.

HELIXOR by subcutaneous injection

Helixor preparations are prescribed as a herbal extract in Series packs of increasing strength (7 x 1ml ampoules per pack) or boxes of single-strength (8 x 1ml ampoules per box).

Cost of treatment

1 pack/box (7/8 ampoules) (payable to the pharmacy) £75 -£100*

Repeat prescription fee (payable to NCIM)

£10

Helixor preparations:

- **\$1:** 3 x 1mg, 3 x 5mg, 1 x 10mg
- **S2:** 2 x 10mg, 2 x 20mg, 3 x 30mg
- **S3:** 1 x 1mg, 2 x 5mg, 3 x 10mg, 1 x 20mg
- **S4:** 2 x 20mg, 2 x 30mg, 3 x 50mg
- Single-strength from 0.01mg 100mg

www.iscador.com www.abnoba.de www.helixor.com

^{*}Buxton & Grant pharmacy charge an additional £9 for next day special delivery.

^{*}Ferryhill pharmacy purchase direct from Germany, cost varies according to exchange rate. No additional postage.

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An optimal dose response (ODR)

An optimal dose response is identified by:

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

Patients are asked to monitor and record their response to treatment for review by their clinician.

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 dose for maintenance therapy. Once on a regular regime, up to 4 boxes can be prescribed at a time, with follow-up every 6 months.

Side-effects

Studies show that subcutaneous Mistletoe Therapy is safe. Only a few patients will react with systemic side effects, which may include fever, skin reactions greater than 5cm or that persist for more than 72 hours, general feelings of unwellness, headaches, shivering, or dizziness on the day of injection. In the event of an overreaction, patients should pause therapy and seek advice about their next dose.

Equipment

Patients will need to purchase 2ml syringes and needles (the pharmacy will supply), alcohol wipes, and a Sharps bin, and will need to enquire with their local council waste disposal department about how to safely dispose of Sharps waste in their area.

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.

Useful links

RESEARCH

www.mistletoetherapy.org.uk/research

PATIENT EXPERIENCES

www.mistletoetherapy.org.uk/patient-experience



ISCADOR by mouth (liquid solution)

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

A typical regime is to take 10 drops in 20ml of water, 5 days per week (Monday - Friday), taking breaks at the weekend. Use until the bottle is finished (approximately 3 weeks), followed by a 1-week break before starting the next bottle.

Patients start with 1-2 bottles and review at follow-up (at 6 and 12 weeks from starting treatment), and then continue as a regular regime. Once on a regular regime, up to 4 bottles can be prescribed at a time, with follow-up every 6 months.

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

(payable to the pharmacy)

£37 + postage

Repeat prescription fee (payable to NCIM)

£10

^{*}Buxton & Grant pharmacy charge an additional £9 for next day special delivery.

Appointment fees

Initial Consultation

(60 minutes)

2 x Follow-Ups

(30 minutes each)

Follow-up required at 6 and 12 weeks from starting treatment

£440*

Additional follow-up Appointments

(30 minutes)

As needed, and required every 6 months for review of treatment

£110

Mistletoe Supervision

(30 minutes)

For first injection of subcutaneous treatment

£110

Support towards appointment fees

NCIM works closely with a charity, the Health and Wellbeing Trust (HWT) who award patient bursaries for financial support towards NCIM appointment fees. NCIM also has limited funding available to award similar patient bursaries. Bursaries are subject to the funding available at the time of application. Ask us for more information on how to apply.

Initial Consultation (60 minutes): allows time for a detailed conversation about health and wellbeing, and to begin exploring 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 treatment plan, and talk them through the process of introducing Mistletoe Therapy into their regime.

Follow-up Appointments (30 minutes): follow-ups play an integral part in supporting patients with Mistletoe Therapy and are automatically scheduled at 6 and 12 weeks from starting treatment and every 6 months thereafter. Further follow-up is recommended at regular intervals and can be booked at any time.

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

Getting started: appointments can be online (Zoom) or in person at our NCIM clinic. Patients need to provide a few personal details for NCIM to open a patient record and confirm the initial consultation. We will send out our welcome information and new patient forms to complete and return ahead of the initial consultation.

Integrative Cancer Care clinicians

Dr Roger Smith

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

Dr Emi Maruo

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

Dr Asim Vine

Dr Vine is a 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 (including Mistletoe), and homeoapthy. *Note Dr Thompson's fees are £250 (1-hour) and £125 (30-mins).*

Kiriaki Marselou

Kiriaki is a conventionally practicing pharmacist and homeopath with additional training in nutraceuticals and medicinal mushrooms for use in supportive cancer care (note that Mistletoe Therapy consultations must take place with one of our medical doctors).

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

^{*}appointments can be paid separately (1x £220 and 2x £110)

Mistletoe Therapy FAQs

Is Mistletoe suitable for all cancers?

While Mistletoe Therapy is indicated for most cancers, it is not always appropriate in haematological (blood) cancers, and brain tumours. Case-specific context is necessary and should Mistletoe not be recommended, an alternative homeopathic preparation of Helleborus niger may be considered. Helleborus niger is made from extract of 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 case would need to be assessed individually for appropriateness.

Can Mistletoe be taken alongside cancer treatments?

Essentially, yes. To date, no safety concerns about using Mistletoe with cancer treatments, have been highlighted. Many European countries include Mistletoe Therapy as standard care. Mistletoe Therapy can be initiated at any time during cancer care; earlier intervention may have a greater effect. We encourage patients to have an open conversation with their oncologist about introducing Mistletoe into their regime.

Do patients need to attend in person?

In-person appointments aren't necessary (but are available) and consultations can take place online (Zoom). Mistletoe treatment is posted 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 with subcutaneous treatment and is usually the recommendation for patients undergoing active treatment. However, NCIM has been prescribing oral Mistletoe for many years with positive experiences and it may be the preferred method in some contexts, such as those who: are undergoing complex treatments, don't wish to self-inject, are cautious of sensitivity to herbal medicines, are in remission or wish to support non-recurrence, or where cost may be a factor.

What benefits can be expected?

Mistletoe Therapy supports cancer patients by improving general well-being, for example, sleep, energy, mood, motivation, appetite, and warmth. Mistletoe may also reduce sideeffects of cancer treatments and improve quality of life.

Can Mistletoe be prescribed for patients outside the UK?

Unfortunately, shipping Mistletoe treatment from the UK to other countries is not straightforward. We encourage patients to seek treatment in their own country to ensure a robust supply chain. If patients have difficulty finding a practitioner or supply in their country, we recommend getting in touch with us and we'll do our best to help source care and treatment.

Integrative Cancer Care at NCIM

Mistletoe and Helleborus niger therapies are one of several approaches that can safely support patients alongside their cancer treatments.

We encourage patients to consider a range of holistic therapies which can be discussed with our integrative cancer care team:

- Lifestyle
- Nutrition and food supplements, including medicinal mushroom extracts
- Medical homeopathy and anthroposophical medicine
- Hypnotherapy
- Therapeutic coaching (may include Hypnotherapy, Emotional Freedom Technique (EFT), and Mindfulness practice)

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 taken at a later time to mistletoe, preferably in the evening or on "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 x 1ml ampoules.

Homeopathic dilution of the whole plant extract is injected subcutaneously, taken daily, or 2 - 3 times per week.

There are no known contraindications or drug interactions. It may not be suitable in pregnancy but relative context is considered. 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 (the pharmacy will supply them), alcohol wipes, and a Sharps bin, and will need to find out how to safely dispose of Sharps waste in their local area.

Cost of treatment

1 box (8 ampoules) (payable to the pharmacy)

£78*

Repeat prescription fee

(payable to NCIM)

£10

*Ferryhill pharmacy purchase direct from Germany, cost varies according to exchange rate. No additional postage.

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: 12 February 2025