

**CANCER SCREENING & TREATMENT  
CENTER OF NEVADA  
CENTURY WELLNESS CLINIC  
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**Presents**



**POLY-MVA OUTCOME-BASED  
INVESTIGATION**

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**POLY- MVA  
CLINICAL OUT- COME BASED  
INVESTIGATION  
01/2004 – 12/2005**

**SPONSOR:**

**Foundation for the Advancement of  
Cancer Research:  
Albert Sanchez, EdS., PhD.**



# POLY MVA PROTOCOL STRUCTURE



# CASES	STATUS	PERCENTAGE
113	ORAL ONLY	55%
94	IV + ORAL	45%
43	DISCONTINUED	20%
72	EXPIRED	34%
115	NON-MEASURABLE	55%
92	MEASURABLE	45%

**TOTAL CASES 207**



## **POLY-MVA PROVEN ACTIONS**



**Cellular energy production:**

**The transfer of electron energy to DNA is measured and reported in three U.S. patents.**

**The use of this energy in the regeneration of nerve filaments following transient ischemia was reported by Francis J. Antonawich, Ph.D. Department of Neurology SUNY Stony Brook, N.Y. in "Experimental Neurology".**

**Increase in cell voltage was shown by Merrill Garnett, D.D.S. using a fluorescent probe.**



## **POLY- MVA PROVEN ACTIONS**



- 1. Aid in cellular energy production**
- 2. Support liver detoxification**
- 3. Protect cell integrity**
- 4. Acts as a heavy metal chelator**
- 5. Acts as a powerful antioxidant**
- 6. Support nerve and neurotransmittal function**
- 7. Enhance WBC function**
- 8. Assists in unblocking energy flow along meridians**



## POLY- MVA THE PRODUCT



1. A patented palladium lipoic compound
2. MVA: Minerals  
Vitamins: B1, B2, B12  
Amino Acids: formyl-mcthionine, acetylcysteine, molybdenum, rhodium & ruthenium
3. Palladium (PL) is a rare metal often combined with platinum in jewelry. M.W. 106 found in nature alloyed with platinum, copper and nickel. Highly conductive metal.
4. ALA a super antioxidant and detoxifier. It is both water and fat soluble. It is an effective chelator with heavy metals.





# POLY-MVA INVESTIGATION TUMOR PARAMETERS



1. **Physical Exam** – tumors in skin, liver, spleen lymph nodes, etc...
2. **X-Rays**: tumors detectable in CXR, bone X-Rays, mammograms, etc...
3. **CT Scanning**: tumors detectable in brain, chest, abdomen, pelvis or bones
4. **Ultrasounds**: breasts, GB., liver, ovaries, spleen, etc...
5. **MRI's**: brain, neck, sinuses, joints, breasts, etc...
6. **Pet Scans**: total body scanning



# POLY-MVA INVESTIGATION TUMOR MARKERS



1. Bladder - NMP-22, BTA
2. Breast - CEA, CA 27-29
3. Colorectal – CEA, CA 19-9, 5HIAA (Carcinoids)
4. Esophagus – CEA, CA 19-9
5. Gastric – CEA, CA 19-9
6. Liver – AFP, CEA, & CA19-9
7. Lung – CEA, CA 19-9
8. Lymphomas - ESR, LDH, Beta – 2 Microglobulin
9. Pancreas – CEA, CA 19-9
10. Ovary – CA-125
11. Testes – AFP, HCG



# POLY-MVA CLINICAL INVESTIGATION



- **ORR – OVERALL RESPONSE RATE (CR + PR + SD)**
- **DISCONTINUATIONS AND EXPIRATIONS ARE NOT MEASURABLE IN THIS STUDY**
- **CR – COMPLETE RESPONSES      40/92 = 43%**
- **PR - PARTIAL RESPONSES        34/92 = 37%**
- **SD - STABLE DISEASE              18/92 = 20%**

**DEFINE: CR -DISAPPEARANCE ALL MEASURABLE DISEASE**

**PR - > 50% REDUCTION OF DISEASE**

**SD - < 50% REDUCTION OF DISEASE**



# POLY-MVA PROTOCOL BY TUMOR TYPE



TUMOR TYPE	NUMBER	TUMOR TYPE	NUMBER
AML/ALL/CML	4	LYMPHOMA	10
BLADDER	2	MELANOMA	6
BRAIN	6	MYELOMAS	4
BREAST	54	OVARY	7
COLORECTAL	22	PANCREAS	4
ESOPHAGUS	4	PROSTATE	26
GASTRIC	3	RENAL	7
HEAD / NECK	13	SARCOMAS	4
LUNG	26	UTERUS/CERVICAL	5

**TOTAL NUMBER OF CASES 207**



# POLY- MVA PROTOCOL TUMOR RESPONSE RATES OF THREE MAJOR CANCERS



CANCER TYPE	CASES	CR	%	PR/SD	%	ORR
BREAST IV	54	13/54	26	16/54	29	54%
LUNG IV	25	6/25	24	3/25	12	30%
* PROS IV	26	6/26	23	13/26	50	73%

\* Best Response



## DOES IV LOADING DOSE OF POLY-MVA MAKE A DIFFERENCE?

- ORR in patients on oral Poly-MVA only  
= 42/92 or 45%
- ORR in patients on IV + oral Poly-MVA  
= 50/92 or 55%
- Loading dose difference = 10%



# IV POLY-MVA RESULTS



PATIENT	SEX	TUMOR TYPE	START DATE	STATUS	DURATION
GE	F	BREAST IV	06/04	PR	> 17 MOS
ME	F	BREAST IV	01/05	PR	> 10 MOS
WC	M	LUNG IV	06/04	PR	> 17 MOS
MS	F	LUNG IV	05/04	CR	> 18 MOS
JR	M	LUNG IV	01/04	CR	>23 MOS
LM	F	LUNG IV	06/04	PR	>17 MOS
RS	M	PROSTATE IV	11/04	PR	> 12 MOS
WA	M	PROSTATE IV	06/04	CR	> 17 MOS

CR COMPLETE REMISSION  
PR PARTIAL REMISSION



## IV POLY-MVA RESULTS



PATIENT	SEX	TUMOR TYPE	START DATE	STATUS	DURATION
TO	F	BREAST IV	07/04	PR	> 16 MOS
AO	F	SARCOMA IV	04/04	PR	> 19 MOS
KQ	F	BREAST IV	05/04	PR	> 18 MOS
BA	F	LUNG IV	02/04	PR	> 21 MOS
FU	M	ESOP IV	07/04	PR	> 16 MOS
RZ	M	BRAIN IV	06/04	PR	> 17 MOS
RT	F	BREAST IV	09/04	PR	> 14 MOS
MA	F	BREAST IV	06/05	PR	> 5 MOS
PL	F	BREAST IV	11/04	CR	> 12 MOS
TC	M	CRC IV	04/05	CR	> 7 MOS
JB	F	BREAST IV	06/04	CR	> 17 MOS
AD	M	PROSTATE IV	10/04	CR	>13 MOS

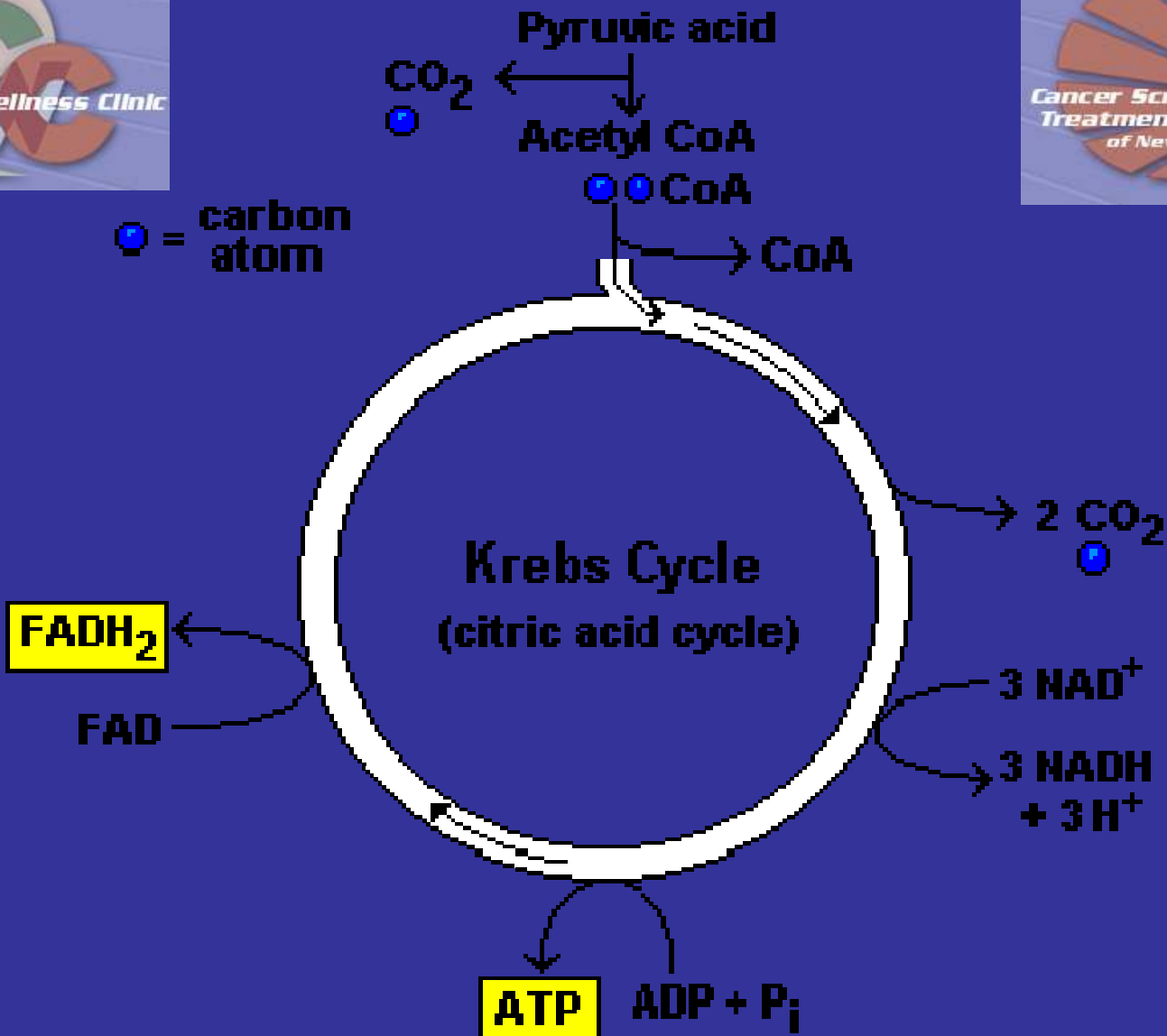
CR COMPLETE REMISSION  
PR PARTIAL REMISSION



# POLY-MVA CLINICAL PROTOCOL SAMPLE CASES



PT	SEX	TUMOR	START DATE	RESP	CLINICAL SUMMARY
BA	F	LUNG IV	03/04	PR	60 YO BF BILAT LUNG METS STABLE CXR, STABLE MARKERS
WC	M	LUNG IV	04/04	CR	78 YO WM LUNG AND SKIN METS CLEAR CXR, MARKERS NL
MD	M	PROSTATE IV	05/04	CR	60 YO WM NORMAL PSA, NORMAL SCANS
GJ	M	H/N IV	01/04	CR	72 YO WM NORMAL PE, NORMAL MRI
LR	F	BREAST IV	05/05	CR	53 YO WFWITH LIVER METS, STABLE
LM	F	LUNG IV	04/04	PR	49 YO WF STABLE CXR, STABLE MARKERS
JN	M	NHL IV	05/04	CR	61 YO WM NO ADENOPATHY, NORMAL MARKERS
AO	F	SARCOMA IV	04/04	PR	19 YO WF IMPROVED CXR, NEG SCANS
BF	F	BREAST VI	11/04	CR	52 YO WF WITH BONE/LIVER/LUNG METS;CXR-NL;MARKERS NL
PL	F	BREAST IV	06/04	CR	52 YO WF WITH LUNG AND BONE METS, ALL TESTS STABLE





# POLY-MVA



## Key Biochemical Reaction

**ANAEROBIC  
METABOLISM**

**GLUCOSE**

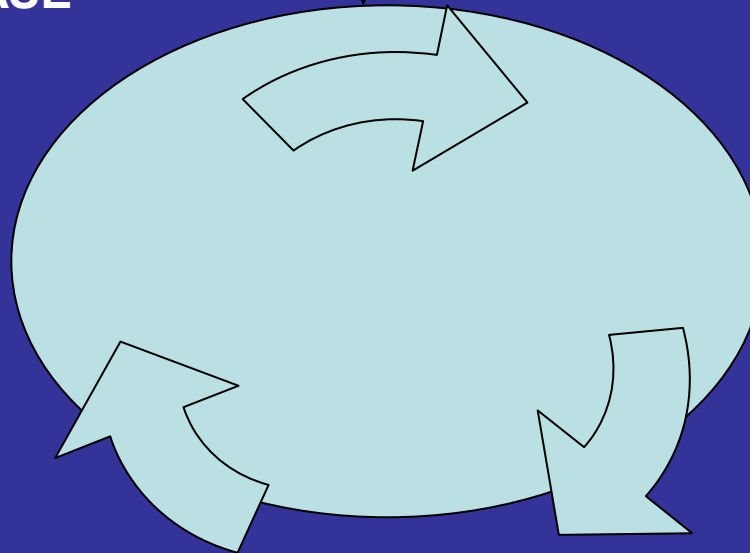
**2 ATP MOLECULE**

**2-PYRUVATE**

**38 ATP MOLECULE**

**PYRUVATE  
DEHYDROGENASE**

**AEROBIC  
METABOLISM**



**KREB'S CYCLE**



# SAFETY PROFILE IV / ORAL Poly-MVA



<b>NAUSEA / VOMITING</b>	<b>0%</b>
<b>DIARRHEA</b>	<b>&lt;5%</b>
<b>SHORT OF BREATH</b>	<b>&lt;5% (40 ml only)</b>
<b>SKIN RASH</b>	<b>0%</b>
<b>ABN LIVER TESTS</b>	<b>0%</b>
<b>ABN RENAL TESTS</b>	<b>0%</b>
<b>TRANSFUSION REACTIONS</b>	<b>&lt;5%</b>



## POLY-MVA PROTOCOL SUMMARY

(includes all measurable cases plus expirations)

- **Total Cases = 207**
- **Early discontinuations = 43**
- **Measurable cases =  $207 - 43 = 164$**
- **Pts responding to oral / IV Poly-MVA + CT  
=  $92/164$  or 56%**
- **Measurable pts responding to Poly-MVA without CT  
=  $46/92$  or 50%**
- **Overall response rate (ORR) = CR+PR+SD**



## Summary: Poly MVA Out-Come Based Investigation



1. This Clinical Oncology “Outcome Based” investigation over an 23 month period was conducted on Stage IV patients with multiple cancer origins.
2. The investigation was voluntary and not double-blinded or placebo controlled.
3. The major parameters included:
  - CR – All Clinical disease in Remission
  - PR – Greater than 50% reduction in tumor mass / markers
  - SD – Less than 50% reduction in tumor mass / markers
4. A 56% overall response rate (ORR) combining CR +PR +SD.
5. No significant adverse toxicities-IV or oral.
6. The ORR in patients on Poly-MVA only was 50%.
7. The ORR in patients on chemotherapy + Poly-MVA was 45%.
8. Pts receiving an initial IV loading dose of Poly-MVA had a 10% improved response rate.
9. This investigation has been approved by the Nevada State Board of Homeopathic Medicine.
10. This investigation has not received FDA approval, however an IRB is pending in the state of Nevada.



## CONCLUSIONS OF POLY- MVA INVESTIGATION



**Poly-MVA appears to be a safe and effective natural food supplement for palliative assistance in stage IV cancer patients either with or without concomitant chemotherapy.**

**The safety profile is excellent and there were no treatment related deaths or any significant adverse reactions or negative interactions with chemotherapy or hormonal treatments.**

**An IV loading dose of Poly-MVA confers a 10% improved ORR in this investigation.**

**The best responding tumors were:**

- 1. Prostate**
- 2. Breast**
- 3. Lung**

**Because these results show an improved ORR over historical controls further study on this supplement is indicated.**

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