Coley's Toxins:
A Cancer Treatment History
by Wayne Martin, BS, ChE

I am writing this letter to reveal the instructions for making Coley's Toxins, a simple procedure. First, however, I want to offer a bit of history on Coley's Toxins.


In 1890, Bessie Dashiell, a young woman in her late teens, came to Dr. Coley with a painful injury to one hand. The injury eventually proved to be round cell sarcoma. Coley amputated her hand, but the cancer spread throughout her body, and she died a horrible death. Coley was shaken by the woman's death and decided there had to be a better way to treat cancer. He spent many hours going through the records of New York Hospital until he found a clue. In 1885, a poor German immigrant named Stein had had surgery for round cell sarcoma four times, and his case was considered hopeless. Then he was infected with erysipelas. He nearly died from the woman's death and decided there had to be a better way to treat cancer. He spent many hours going through the records of New York Hospital until he found a clue. In 1885, a poor German immigrant named Stein had had surgery for round cell sarcoma four times, and his case was considered hopeless. Then he was infected with erysipelas. He nearly died from the infection, but when he recovered, the cancer was gone. Coley searched for Stein throughout the lower East Side ghetto until at last, six years later, he found Stein - in the best of health.

At that point, Coley decided to infect late-stage cancer patients with erysipelas. His first case was a patient named Zola. Zola's case nearly duplicated Stein's experience. Coley had much trouble getting an infection started with Zola and, when he did, it was so severe that he feared Zola would die of the infection. Yet, as in the case of Stein, Zola went into a remission that proved to be a cure.

Coley began to treat twelve late-stage cancer patients by infecting them with erysipelas. Two patients died from the infection. One patient suffered from an infection with a fever of 105°F. In that case, the patient's tumors disappeared, but a recurrence caused death, Coley was unable to infect the other nine patients.

Coley turned to a erysipelas vaccine, killed by heating to 66°C for two hours. This vaccine caused a mild fever reaction, but not one strong enough to work as an anticancer treatment. Coley added the newly discovered Bacillus prodigiosus - now called Serratia marcescens - to the vaccine. That was killed by heating to 66°C. This was and is Coley's Toxins and was injected into a tumor or done as intradermal injections. First, the patient experienced cold, followed by a fever of 101° to 104° for a few hours.

The first patient to be treated with Coley's Toxins was a boy named John Ficken. He had a large tumor of malignant sarcoma in the abdomen that had been like a bowling ball. His condition was considered hopeless. On January 24, 1893, the new Coley's Toxins was injected into the tumor. The reactions to the injections were severe chills and fever. The injections were done every other day for five months. After this time, the boy's tumor had decreased by 80%, and Coley stopped treatment. The boy was gaining back lost weight. He was sent home at this time and was traced in 1907, still alive and well. Coley had had a success with his first cancer patient treated with Coley's Toxins.

Coley started to treat cancer patients with Coley's Toxins with a degree of success. Soon, other doctors were beginning to get Coley's Toxins from Coley. Despite numerous successes, on December 15, 1894, an editorial appeared in the AMA's publication JAMA stating that Coley's Toxins was useless in cancer treatment. By the spring of 1896, however, Coley had treated 160 cancer patients with his toxins. Nearly half of these 160 patients had shown a degree of benefit; for a few of them, the results had been nothing short of remarkable. In 1897, Coley took the post of head of the Sarcoma Ward at Memorial Hospital in New York City. Meanwhile, the Mayo Brothers had come out as strong advocates for Coley's Toxins in treating cancer.

One of Dr. Coley's colleagues was Dr. James Ewing, a pathologist who came to Memorial Hospital about the same time as Coley. In time he was known to the news media as Mr. Cancer, and he developed for Coley and his toxins the most bitter animosity. He thought that the newly discovered radium and the X-ray machine was the Utopian cure for cancer.

Ewing attracted the interest of James Douglas, CEO of the Phelps-Dodge Corp. Douglas had a daughter with breast cancer. Ewing, Douglas, and his daughter went to England where she could be treated with radium. The treatment failed, and she died of breast cancer, this after the first breast cancer patient cure by Coley's Toxins as has been reported. In a letter to Ewing, however, Douglas was not swayed from Ewing's methods by the
death of his daughter. He formed a firm for the mining of radium and made a gift of several hundred thousand dollars worth of radium to Memorial Hospital.

In return for the gift, Ewing was made Medical Director of Memorial Hospital. Ewing became Coley's boss and his worst enemy. As a result, for many years, Coley could not treat sarcoma patients with Coley's Toxins; he was only permitted to treat cancer patients using radium – with poor results.

Meanwhile, not far from Memorial Hospital, one of the most dramatic cures of cancer by Coley's Toxins took place. The patient was an officer in the Merchant Marine. The time was 1926. The patient had reticulum cell sarcoma. His leg had been amputated at the hip. Three months later, a metastasis appeared above the umbilicus. One month later, a fist-sized tumor had developed on the amputated stump. And one month after that, the amputated stump was increasing in size, and another orange size tumor had appeared on the stump.

Coley's Toxins were injected into the stump. There were signs of regression, but the reactions were severe, and the patient asked for a respite. During the respite, the cancer spread at an alarming rate. The stump increased in size to 30 inches in circumference, and the end of the stump had broken down to a great ulcer from which a foul-smelling discharge emanated. Several more tumors appeared, these in the scalp, the vertebrae, and the cranial bones.

Injections were begun again in the stump. A large dose of Coley's Toxins was injected every day. The patient suffered severe reactions, but after 28 days, the ulcer in the stump healed, and the stump had returned to its normal size. All his other tumors had either vanished or were now very small in size. His doctors wanted to continue with the treatment, but the patient said that he had had enough. Sixty days later, he showed no sign of cancer. The patient lived free of cancer until 1959, when he died of a heart attack.

In 1935, Coley gave a lecture at the University of Glasgow in which he told of treating several hundred cancer patient with sarcoma. Of them, about one third had remissions that left them free of cancer at five years. For a long time, Dr. Ernest Codman of the Harvard Medical School had sided with Ewing in saying that Coley's Toxins were useless in the treatment of cancer, but in 1935, one year before the death of Coley, he changed his position and said that the use of Coley's Toxins had produced from time to time miracles in cancer treatment. His observation did no good. Coley died the next year, and, for a time, Coley's Toxins died with him.

Coley's daughter Helen Coley Nauts founded the Cancer Research Institute in 1953, and it has grown large and prestigious. In 1956, she had Coley's Toxins made at the Memorial Sloan Kettering Cancer Center, Coley's old hospital, and she offered it to doctors for cancer treatment. Helen Coley Nauts found good records of just less than 1,000 cancer patients who had been treated with Coley's Toxins. Of them, about half had remissions that left them free from cancer at five years.

The American Cancer Society, founded in 1913, has been a bitter enemy of Coley's Toxins. In June 1962, an amendment to the Pure Food and Drug act was passed, giving great power to the FDA. At this time, the American Cancer Society had a list of unproven treatments of cancer, and Coley's Toxins was on that list. The American Cancer Society held that Coley's Toxins had never helped a cancer patient. The act was called the Kefauver-Harris Amendment and contained a grandfather clause that made legal any drug or vaccine that had a record of success before 1962. Aspirin was at once made legal, but with the American Cancer Society designation of Coley's Toxins as ineffective with a cancer patient, Coley's Toxins was declared illegal.

Ironically, that designation appeared even as Coley's Toxins continued to find success with patients. In February 1961, for instance, a retired contractor was dying at Baptist Hospital in Oklahoma City. The patient had had surgery for colon cancer. There followed a massive reoccurrence. The liver was enlarged and there were metastases in the peritoneum and lungs. His doctor was lapping and removing two quarts of bloody fluid from the abdomen each day and one quart of fluid from the lungs every second day. The fluid from both the lungs and abdomen had cancer cells. Death was expected in a week or so.
In 1990, I had a call from Don Carrow, MD in Tampa, Florida. Dr. Carrow wanted to know how to make Coley’s Toxins. I sent him the above information. Rather than using beef broth, he used as a broth Difco AOAC, a product of Difco Laboratories in Detroit. In 1000 cc of water, he added 15 grams of Difco AOAC, 10 grams of Bacto peptone – another Difco product – five grams of sodium chloride and 100 grams of glucose. He got the ph from 7.1 to 7.2. Dr. Carrow then added a few cc of live streptococcus solution and let it stand at 36°C for ten days. He got the 1,000 cc to 25°C and seeded it with live Serratia marcescens and let it grow for another ten days. At that point, the vaccine was heated to 65°C for two hours to get a killed vaccine, and Carrow added 0.03 cc per cc of benzyl alcohol. The vaccine was stored at 2°C to 4°C. The 1,000 cc was then filtered through a seven micron filter with care taken not to remove the dead bacteria.

He had a cancer patient ready to treat with his Coley’s Toxins. A 50-year-old nurse with non-Hodgkin’s lymphoma, this patient had a tumor under one arm that was the size of a football. He injected his Coley’s Toxins into the center of that big tumor with a three inch long needle. Injections were done each day. These produced first shaking chills, then a fever of 104°F. I do not know how many injections were given, but the tumor was reduced to a flabby bag that was removed by surgery. The bag contained no cancer cells. Dr. Carrow reported in 2002, shortly before his own death, that the patient remained cancer-free.

Other doctors also have had recent success with Coley’s Toxins. One doctor in Ohio shared with me his procedure for making Coley’s Toxins. He reported this vaccine has effected two complete remissions of cancer. This doctor got the live Streptococcus pyogenes, ATCC #19615, and the live Serratia marcescens, ATCC #13880, from Microbiologics (www.microbiologics.com) in the form of Kwik-Stics. For a broth, he used the Todd-Hewitt broth. It was obtained as a powder and is used as a three-percent solution. He used 500 cc of water. To it was added 15 grams of the Todd-Hewitt powder and 50 grams of glucose. The flask was plugged with a plastic foam stopper and autoclaved for 15 minutes at 121°C. The broth was allowed to cool and was stored at 4°C for three weeks. The broth was then seeded with the live streptococcus and allowed to grow at 36°C for seven days. The culture was then gotten to 25°C and was seeded with the live Serratia marcescens and allowed to grow for seven more days. The culture then was killed by heating to 65°C for two hours. Then 7.5 cc of benzyl alcohol was added. The 500 cc of the killed vaccine was then filtered with a 15 micron filter. It was stored at 4°C, ready for use.

Another doctor, whom I’ll call Doctor Y, has added a new dimension to the treatment of cancer with Coley’s Toxins. He sets up an IV of Coley’s Toxins in his office for his patients. He then shows the patients how to do the injections at home as self-medication and sends them home with a 20 cc bottle of Coley’s Toxins. He instructs the patient to have rectal suppositories of Tylenol on hand, since rectal suppositories will terminate a reaction to Coley’s Toxins quickly. The patient is to do an injection at about 8:00 AM. For an hour, he cautions, the patient will feel cold and may shake. Then the fever will come on and the pulse will increase to about 125. The patient is told to check temperature and pulse every hour. If the fever exceeds 104°F, or if the pulse exceeds 135, the patient should terminate the reaction with Tylenol. This will not happen often. The fever should end by 6:00 PM.

We should be able to do better than Coley did. He did not have Tylenol. He knew that an overdose of Coley’s Toxins could cause death, so he had to use lower doses than he would have preferred. Having Tylenol on hand permits the use of higher doses. In Coley’s time, too, a hard-and-fast rule preferred. Having Tylenol on hand, the patient could cause death, so he had to use lower doses than he would have preferred. Having Tylenol on hand permits the use of higher doses. In Coley’s time, too, a hard-and-fast rule declared that nothing must be put in a vein. Now we understand that injections of Coley’s Toxins in the vein give greater reactions. The injections can be done every day or every second day. The injections are done for 30 days, halted for a week, then resumed.

All these instructions are given to the patient. Sometimes the treatment needs be done for two or three months. By doing the injections at home, the patient can get two months of treatment that could not be had otherwise. and the cost is kept down. Dr. Y has had two complete remissions of cancer and two failures.

Helen Coley Nauts has told me that doctors at the Cancer Research Institute feel that the main anticancer effect of Coley’s Toxins lies in the anticancer effects of fever and interferon and the tumor necrosis factor, all of which are increased during the reaction. Professor Leo Zacharski, MD, Dartmouth Medical School says that Coley’s Toxins contains some streptokinase. In a recent communication, he said he knew of a woman with endometrial cancer with metastases. She had a heart attack and was treated with an infusion of streptokinase. The streptokinase terminated the heart attack, and the patient’s tumors showed a marked regression which has persisted for several months. He was hoping to see a trial on treating cancer with an infusion of streptokinase, but meanwhile he suggested that streptokinase in Coley’s Toxins was part of its anticancer effect. I also made contact with Dr. S. Moncath, Medical Director of Wellcome Research Laboratories. He said that, in the fever reaction to Coley’s Toxins or to an infection of erysipelas, the arginine-to-nitric-oxide pathway is activated for the production of nitric oxide, which provides a strong anticancer effect.

I hope that, offering this history of Coley’s Toxins, along with examples of doctors who have had recent success treating cancer with Coley’s Toxins, I will encourage other doctors to make Coley’s Toxins and use it to treat cancer patients.

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