A prominent cancer researcher has published a trenchant critique of conventional oncology. Guy B. Faguet, MD, Professor, Department of Medicine, Section of Hematology and Oncology, Medical College of Georgia, has written The War on Cancer: An Anatomy of Failure, A Blueprint for the Future.

After receiving his MD degree, Dr. Faguet did postgraduate work at the University of Texas and at Ohio State University. He then conducted cancer research in Augusta, Georgia, for 28 years, funded mainly by the National Cancer Institute (NCI) and the Department of Veterans Affairs. His output has included 140 peer-reviewed articles, seven book chapters, and two previous scientific books on cancer. He is an expert on chronic lymphocytic leukemia (CLL).

Starting about fifteen years ago, the doctor told me in a telephone interview, he began to develop serious questions about the lack of progress in the war on cancer. At the urging of departmental colleagues, he began writing The War on Cancer about five years ago, and it was finally published by the German medical publisher Springer in late 2005.

In his book, Faguet also takes on the misleading nature of five-year survival statistics. Improvements in five-year survival are frequently cited as proof that cancer treatment is increasingly effective. But, as Faguet shows, this is a gross oversimplification. “While improvements in five-year survival are frequently presented to the public and to policymakers as evidence of success in the War on Cancer, they should not be,” he asserts. “This is because, while survival is a valid measure of treatment outcome within a...
clinical trial, it is misleading when applied over long periods of time. Indeed, factors other than therapy affect survival favorably. They include improvements in supportive medical care and better screening and diagnostic tools.

An additional reason for observing improved cancer survival over the years is that, as cancer detection tools improve, cancer is diagnosed in incrementally earlier stages, leading to a phenomenon called “lead time bias.” Simply stated, the earlier the diagnosis, the longer patients will live with their disease, giving the false impression of increased survival that can and has often been attributed to newer treatments.

Faguet also shows that cancer incidence and death rates present a very mixed picture, but in general are not falling, as we have been led to believe. In fact, if the age and size of the US (and world) population continue to increase at current rates, so too will the overall number of cancer patients. Cancer is primarily a disease of aging populations (the average age of diagnosis for adults is 67 years), and so the graying of the baby boomers will in all probability herald a spike in cancer incidence and mortality statistics.

Faguet ascribes the general failure of the war on cancer to the application of the “cancer cell kill paradigm,” which was fostered by the adoption of the microbial model to cancer treatment. The cell kill paradigm holds that these “foreign” cancer cells must be eradicated like swarming microbes before they overwhelm the host. For various technical reasons, this aggressive approach has worked sufficiently well in the case of Hodgkin’s disease, where a combination of drugs was curative in many cases. However, as Faguet points out, “this early success was seldom replicated despite a myriad of subsequent clinical trials launched to test a variety of intermittent combination chemotherapy regimens in many types of cancer over the ensuing four decades.”

As both Faguet (2005) and the Australian researchers Graeme Morgan, et al. (2004) have shown, chemotherapy is responsible for curing approximately two percent of those who receive it for advanced cancer. Faguet is also critical of immunotherapy, which dominated cancer research in the 1970s and part of the 1980s. Few now remember the initial hype that greeted the emergence of interferon, interleukin, and the other so-called biological response modifiers (BRMs).
Faguet's approach is not unlike an analysis of the so-called industrial military complex, a complex consisting of the federal government, pharmaceutical drug companies, and academia—all have a part of the pie and therefore a reason for maintaining the status quo. Insurance companies, regulatory agencies, and patients themselves add further layers of complexity. Faguet walks through all of these areas in a critical but unemotional manner,... His book should be of interest to policymakers, cancer-care workers, and the public at large.

Faguet saves his most trenchant criticism, however, for cytotoxic chemotherapy, especially high-dose treatment. His background as a researcher into these very treatments makes this part of his analysis truly compelling. He writes here with a sure hand that will certainly have the effect of increasing the ranks of those who are doubtful about chemotherapy's effects.

The essential fallacy of chemotherapy, says Faguet, is "that while most patients achieve some degree of tumor response, few survive longer as a result.... Three decades later," says Faguet, "the process of anti-cancer drug development remains mostly anchored on this century old, conceptually antiquated, technically inefficient, labor intensive, costly, and low-yield 'hit and miss' (mostly miss) screening approach engineered and sponsored by the National Cancer Institute (NCI)."

Faguet's book is the first full-length critique by an American scientist of the problems and failures of the war on cancer. For that reason, one hopes that it will receive a wider audience in American academia than do works that originate outside the field.

Dr. John Bailar III, MD, former editor of the Journal of the National Cancer Institute, has enthusiastically endorsed the work. He wrote to Faguet: "I think your book will be a valuable corrective to much of the hype that has been splashed around in greater and greater quantities by the cancer establishment as it tries to stifle the message that it has failed to make much of an impact."

Similarly, Gerald E. Marti, MD, PhD, who is Chief, Flow and Image Cytometry Section, Laboratory of Stem Cell Biology, National Institutes of Health, has said the following:

Faguet's approach is not unlike an analysis of the so-called industrial military complex, a complex consisting of the federal government, pharmaceutical drug companies, and academia—all have a part of the pie and therefore a reason for maintaining the status quo. Insurance companies, regulatory agencies, and patients themselves add further layers of complexity. Faguet walks through all of these areas in a critical but unemotional manner.... His book should be of interest to policymakers, cancer-care workers, and the public at large.

Faguet's book is highly recommended to anyone with a serious interest in understanding why and how chemotherapy has failed to win the War on Cancer as well as what strategies might realistically be implemented to regain the upper hand in that faltering campaign.

© 2006 Ralph W. Moss, PhD