Foreword by George Yu, M.D. for When Hope Never Dies January 2010

Marlene Marcello McKenna's Melanoma

In March 1986, Dr. A. Benedict Cosimi, a cancer and transplant surgeon at Massachusetts General Hospital, performed the exploratory laparotomy for Marlene Marcello McKenna for severe gastrointestinal bleeding with a low blood count with a hematocrit of 20% (normal 35 to 40%). 38 centimeters of small bowel in 3 separate segments were removed containing 6 separate melanoma lesions with 2 of 15 lymph nodes positive for metastatic melanoma. The mesentery attached to the small bowel had "significant residual gross disease left behind" as it could not be resected safely.

On gross examination at the operating table, there was neither liver metastasis nor periaortic lymph node involvement. Though we cannot be sure that Marlene was rendered disease free by this surgical "debulking" treatment, it is highly unlikely that she could be cured by just surgery with such aggressive melanoma left behind. She refused all chemotherapy and immunotherapy and embraced a foreign approach to her problem-**Macrobiotics**.

February 25, 2002

Were it not for the persistence and thoroughness of Christine Akbar, the research director for the Kushi Institute, the *Best Case Series of Macrobiotic Survivors* (BCS) under the National Institute of Health (N.I.H.), and National Cancer Institute (N.C.I.) would have categorized Marlene's case as a "surgically-induced disease free status". She made a desperate attempt to contact Dr. Cosimi on February 22 only 3 days away from the formal presentation-her tenaciousness paid off! The case was unanimously accepted as a cure using nutritional intervention by an expert panel of 15 scientists.

We Meet Again in 2010

Marlene is alive and free of disease 24 years later to write her second edition of her book *When Hope Never Dies* and she asked all of us to support her mission in life: to promote nutrition as prevention and intervention against disease. She needed legitimacy and credibility!

Coincidentally, Dr. Paul Duray, the original pathologist who first reviewed her case in 1986, happened to examine her case for the second time in 2005 at NCI as a specialist in Melanoma. Dr. Steve Rosenberg, Chief of the Surgical Branch of National Cancer Institute, concurred with Paul that melanoma involving bowel and mesentery carried a poor prognosis and highly unlikely to have a spontaneous remission.

Paul and I had good intentions to write this case report for a medical Journal, but pressing priorities left this task undone. So again this year 2010, Marlene again approached all three of us to finish the job left undone by writing the foreword to her new book. I corresponded with Marlene's surgeon Dr. Benedict Cosimi at Massachusetts General

Hospital-Harvard for the second time just to refresh medical documents to ascertain his impression of the surgical exploration.

How It All Started

I met with Michio Kushi, founder of the Kushi Institute, Phyia Kushi, his son, and Christine Akbar in 1999. We reviewed the case reports documented by Dr. Larry Kushi, an epidemiologist and Michio's other son. After reviewing those medical records, I interviewed some of the surviving patients and felt we could use some of Larry's original research with additional cases to present to the N.IH. If I had not interviewed these individuals face to face, I probably could never have accepted these incredible results.

Since 2002, I have been auditing and reviewing cases for other nutritional centers such as Hippocrates Institute, Optimal Health Institute etc. and have seen sufficient cases to become a believer both intellectually and emotionally. Each institute has unique and had different philosophies but there were common denominators:

- Their diets are simple and easy to digest
- The food is abundant with nutrition.
- Participants loose about 10% of their weight. This weight loss differs from cachexia of terminal cancer patients as these individuals' serum insulin and cortisol levels are not elevated (Ann Intern Med. 2000; 133: 622-634)
- Dr. Peter Choike, radiologist for N.C.I., noted that CAT scans of patients on nutritional interventions all lose visceral fat simultaneously with cancer shrinkage and necrosis about 3 to 6 months into the program.
- There are 20% cures and the rest will have partial remissions requiring adjuvant combination treatments.
- The total calories consumed each day per person are between 1500 to 1800 calories.

CR, Caloric Restriction, The Common Denominator

A fortunate accidental meeting with the late Dr. David Kritchevsky of University of Pennsylvania and a publication by Dr. Stephen Spindler (PNAS Sept. 11, 2001, Vol. 98, No.19, 10631-) made me piece the puzzle together- Why do all these institutes with differing nutritional programs all produce the same results despite different philosophies?

Dr. Kritchevsky noted that calorie restriction (energy content of food, sodas are pure calories with no nutrition) arrested all induced or spontaneous animal cancer growths.

Stephen Spindler, a protégé of Dr. Roy Walford of Biosphere 2, showed that CR could reverse genetic expressions of cell replication, cell death, and cell detoxification back to a "healthier and younger" state even in a short time frame of 3 to 6 months. So gene expressions are dynamic and ever changing depending on the environment!

Oddly enough, the 3 to 6 months is the same time interval that clinically, we see cancer and visceral fat shrinkage on CAT scans of patients using nutritional intervention! This could be a "phenomenon looking for a reason". With advances in research in genetic

expressions using the most sophisticated reproducible tools such as the Parallel Sequencing Assays, we are now exploring the genetic reasons of the "whys" of nutritional interventions.

What I have written is not necessarily the opinion of Benedict Cosimi or Paul Duray, but we all stand together in support of Marlene's incredible story. Even though we cannot explain the "Hows and the Whys", Benedict, Paul and I all agree that Marlene's case was a cure, and it is our hope that future scientists and doctors will build the "Science" upon what we witnessed.

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