

'Adjuvant Therapy' At Time of Cancer Surgery Tested

By DELOS SMITH
UPI Science Editor
Excelsior Springs, Mo.—UPI—The surgeon about to operate on a cancer patient tears open a sealed envelope and inside is a slip of paper which says whether this patient is going to get an anti-cancer drug along with an operation. Or, perhaps, a flip of a coin decides.

That is the basis of scientific experiments going on all over the country. It is for the purpose of deciding whether this chemical "adjuvant therapy" will improve surgery's already respectable record for saving or prolonging the lives of the victims of certain cancers caught in an early stage. In Chicago it has been going on for three years and two months. In that time, 40 women with breast cancer got the drug "adjuvant" to surgery and 40 got the surgery only. Recurrences and deaths

both have been twice as high among the surgery only group. Still Non-committal

Sounds good, but Dr. Warren Cole, of the University of Illinois, Chicago, who revealed these experimental results, refused to say "adjuvant" therapy was the best and refused to recommend it to other surgeons. And so did Dr. I. S. Ravdin, of the University of Pennsylvania, Philadelphia, who took part in the surgery on both President Eisenhower and Secretary of State Dulles, and is president of the American Surgical Society.

The number of patients so far is much too small to tell anything, they both said.

There are other things to consider besides statistical numbers, they added. The "adjuvant" to surgery in these cases was nitrogen mustard which is a poisonous drug.

It can be used against cancer because it is more lethal

against cancer cells than it is against normal cells. As an "adjuvant," it is used to wipe out any cancer cells which the surgery left behind. But using it requires the highest of high medical and surgical skills.

Must Have Comparisons

There is no means of telling positively how any given patient will react. Use of the drug must be stopped the instant there is the slightest sign that too many normal cells are being killed. In Chicago one dose was given at the time of surgery, by injection into the blood. Another was given every four months up to a total of five or six doses. Cole also revealed that this "adjuvant" nitrogen mustard hadn't done nearly as well in other cancers sites and had done poorly in rectal cancer, which are other reasons why these questions are so hard to answer.

Auxiliary Treatment

This and other drugs must be tried as auxiliary treatment in surgery in large numbers of cancer patients to get at the facts of whether the possible good justifies the

risks that would ensue in less than the most skilled hands. Second, you have to withhold it from as many as you give it to; otherwise there could be no comparisons and so no meanings. Third, you have to select the patients who do and don't get it completely at random, hence the pre-sealed envelopes or the flips of coins. In that way, the surgeon can't select or exclude on the basis of his own hunches or guesses. Most important, the doctor has to wait a long time to be sure of results. The only real test is how long the patient lives after treatment.

Man Arrested by Deputy Marshals

Deputy U.S. marshals assisted by Medford police arrested George Vranizen, 203 D st., Jacksonville, Tuesday in connection with the theft and forgery of a U.S. government check.

Vranizen was lodged in Jackson county jail. Police said the incident in question occurred about two years ago.

SIGN TRADE PACT

Cairo—UPI—The United Arab Republic and Communist Hungary signed a three-year trade agreement and one-year protocol payment pact Thursday.

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