



**Mistletoe**  
CANCER THERAPY

Consent for:  
**Intratumoral  
Mistletoe  
Administration**  
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## **Introduction**

Traditional mistletoe prescribing aims to improve and maintain quality of life, and improve the outcome of cancer treatments. Tumor remissions have been reported and seem to depend on dosage and way of administration (for example, intratumoral and intravenous). Using high doses of mistletoe, from the very beginning of treatment, may improve immune responses and impact on the illness.

Intratumoral administration aims to a more specific immune response to the cancer. This type of treatment is routinely used in consultant led centers in Germany, but is not licensed in the United States and no systematic trials have been carried out. In our experience the technique is safe and does not lead to spreading the cancer and does not promote cancer growth. The local and general effects are similar to the effects of high dose Mistletoe Therapy.

## **In summary, I understand that:**

- 1.** The aim of intratumoral administration is to increase the benefits of Mistletoe Therapy
- 2.** Intratumoral mistletoe administration is well tolerated and safe (see caution), and does not promote cancer growth at the injection sites.
- 3.** There is anecdotal evidence and documented experience there is no trial evidence to prove the additional benefits of intratumoral Mistletoe Therapy and this type of treatment is still experimental.
- 4.** Intratumoral administration of mistletoe will produce symptoms of marked immune stimulation; with flu-like symptoms, chills and fever, and marked dose-dependent local inflammation and swelling. These are symptoms of immune stimulation and not of cancer growth, and usually settles within a day or two and don't require treatment.

## **Caution, for patients already receiving Mistletoe Therapy:**

- 5.** Patients who have been pre-treated with Mistletoe Therapy and start with intra-tumoral administration, may develop symptoms of hypersensitivity (allergy).
- 6.** Symptoms of hypersensitivity range from minor skin rashes (hives / nettle rash / itchiness) to more extensive rashes. These symptoms typically settle quickly and if they persist



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and are troublesome, will respond to simple antihistamines. Occasionally symptoms progress to: swelling of lips, eyelids and joints, light-headedness and un-wellness; simple measures and antihistamines are usually enough to address this.

7. Very rarely, symptoms of severe allergy (anaphylaxis) develop: with marked un-wellness, shortness of breath and lowering of blood pressure. Drug-induced anaphylaxis is an immediate, generalized and serious allergic reaction and is a medical emergency. However, mistletoe associated anaphylaxis is very rare (less than 0.01%); the medical staff at the Martin Clinic is trained and equipped to treat such an emergency.

**I have understood the principles, aims and effects of intra-tumoral administration and I am satisfied with the information that I was given.**

\_\_\_\_\_  
Patient Name

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Doctor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date