



CANCER RESEARCH AND TREATMENT CENTER
THE UNIVERSITY OF NEW MEXICO ■ ALBUQUERQUE, NEW MEXICO 87131
900 CAMINO DE SALUD NE ■ TELEPHONE 505 277-2151

MORTON M. KLIGERMAN, M.D., Director

January 24, 1978

Mr. Jack Stahl
c/o 200 Lomas, N.W.
Suite 200
Albuquerque, New Mexico 87102

MES-200

Dear Mr. Stahl:

Attached is the statement which Dr. Kligerman wrote for you before leaving for California. I hope it is suitable for your requirements. Please let us know if you need anything more.

Again, thank you for your assistance. We were delighted you and Mrs. Stahl could visit us last week.

Sincerely,

Stephany Wilson
Associate Administrator for
Research and Communications

SW:vdj
attachment
cc: L. Salazar, Office of Rep. Manuel Lujan
Dr. M.M. Kligerman
Dr. H.M. Agnew

U
C
L
A
N
L
R
C

REPOSITORY LANL/RC
COLLECTION Dir Off Files
BOX No. B-11, D-167
FOLDER MES 200 1/78-3/78

FILE BARCODE

00132904

COPIED FOR
HSPT

What are the results of pion treatment so far? First, it is much too early by 3-5 years, for a final statement. However, a major landmark will be evidence that there is increased local control at the end of one year. To cure a patient of cancer requires that the disease is cured in the place where it began; that is, local control. In addition, the disease must not have spread to other parts of the body; that is, there are no metastases.

Our tests are restricted to patients with advanced disease. In such a group of patients, the chances for metastasis (spread away from the place where the tumor began) are relatively higher. This would be the cause of a large number of the patients failing to live five years. However, approximately 60,000 people a year die of cancer in the United States because the disease is not controlled locally. This is because sufficient treatment (surgery, radiation, or drugs) cannot be given at the site of origin without compromising the recovery of normal surrounding tissue. If the disease remains cured locally for one year, there is a very good to excellent chance that it will not recur locally. At the present time we have 27 patients alive, who were treated as recently as two months ago and as long as 19 months ago. The majority were treated 6 to 7 months ago. We will be treating another 60-70 patients this year. Therefore, about 12 to 18 months from now we will begin to get an indication of results.

What can we say now? We can be enthusiastic to continue the project. Though we are still working on refining normal tissue tolerance, we believe we are within 5 to 10 percent of the maximum dose for certain parts of the body. Using these doses, all of our professional observers are convinced that for relatively rapid disappearance of the tumors, there is relatively less reaction of the normal tissues. As an example, patients being treated in the pelvic region for such things as cancer of the rectum, bladder or prostate do not have irritation of the rectum leading to diarrhea. The rectum is the tissue most sensitive to ordinary radiation. Almost all patients get diarrhea when ordinary radiations are used.

**COPIED FOR
HSPT**

00132904.002

1088085

00190497

Greater effect on tumor vs. lesser effect on normal tissue is called a "therapeutic gain." A therapeutic gain for pions becomes more evident as we continue treatment. If this therapeutic gain persists and no unexpected, untoward changes occur after 12-24 months, we will be able to say that pions are a success.

0042 0433

**COPIED FOR
HSPT**

00132904.003

1088086