

Searching for an Old New Cure, Part II

Accidental Blow Up in Medicine using Old Medications: Levamisole, Niclosamide and Suramin

By Simon Yu, MD

Use old medications for a new cure? There is an emerging renaissance with renewed interest in using forgotten or ignored older medications when the latest, often expensive therapies and medications fail. Several years ago I wrote, "[Searching for an Old New Cure: Ivermectin Deficiency Syndrome?](#)" This is a follow-up on the parasite medications Levamisole, Niclosamide and Suramin.

In 2017, my 10th International Integrative Medical Conference, Curing the Incurable: Parasites, Fungal and Dental Conundrum, was held in St. Louis. An FDA agent attended the conference, and asked me after my talk why I had used levamisole on some cancer patients. It had been banned because of its "off-label" use by bad guys in cutting street drugs. I had been prescribing levamisole, which was available for over 50 years, as a part of my parasite remedies for complicated patients (especially cancer patients) with great success. It was unusual for an FDA agent to attend the conference, and I thought there might be hope that FDA would be more open to using antiparasitics for off-label medical indications. Levamisole has also been used for Crohn's disease, autoimmune diseases, leprosy, idiopathic nephrotic syndrome, collagen vascular disease, inflammatory disease, lichen planus, recurrent herpes labialis (cold sores), chronic bronchitis, etc.

One year later, some local compound pharmacists told me that an FDA agent warned them that levamisole was no longer commercially available for human use and not to dispense it. It was apparently banned because of its illegal use by bad guys and reported side effects when used with cocaine; you can read more on Google. It does not make sense to ban legitimate medical uses because of criminal activity by drug-pushers. Levamisole also has anti-cancer properties for colon cancer, and related GI cancers.

Recently, one of the compound pharmacists shared that that they now have a hard time getting Ivermectin, and recommended using different parasite medications. Ivermectin also has very strong anti-cancer properties, which I wrote about in my previous article, "Ivermectin Deficiency Syndrome." At high doses, Ivermectin can inactivate the protein kinase PAK-1, and block the PAK-1 dependent growth of human ovarian cancer and neurofibromatosis type 2 (NF2) tumors. PAK-1 kinase is required for the growth of more than 70% of human cancers such as pancreatic, colon, breast prostate, and NF2 cancers.

When I was at Medicine Week 2018 in Germany, I gave a talk on Parasite Medications for Targeting Cancer. Dr. Helmut Retzek, MD of Austria told me about using Niclosamide with great success on a pancreatic cancer patient at Dr. med. Friedrich Douwes' St. George Clinic in Bad Aibling, Germany. He shared an article from the *Chinese Journal of Cancer*, "[Niclosamide, an old anthelmintic agent, demonstrating antitumor activity by blocking multiple signaling pathways of cancer stem cells.](#)" (CJC 2012 Apr, 31(4): 178-184).

The activity of Niclosamide against parasites (tapeworm and schistosomiasis) is believed to be mediated by inhibition of mitochondrial oxidative phosphorylation and anaerobic ATP production. Niclosamide targets multiple signaling pathways (NF-kB, Wnt/B-catenin, Notch, ROS, mTOR1 and Stat3), most of which are closely involved with cancer stem cells. Niclosamide has shown anti-proliferative activity in a broad spectrum of cancer cells, such as acute myeloid leukemia, colon, breast and prostate cancer. This medication has been available for the last 50 years and is virtually unknown to oncologists.

Suramin was introduced in Germany in 1920, nearly a century ago, for treatment of the protozoal parasite *Trypanosoma*, which causes African sleeping sickness. Suramin is also used against retroviruses by inhibiting retroviral reverse transcriptase and blocking the binding of various growth factors, such as insulin-like growth factor (IGF-1), epidermal growth factor (EGF), platelet-derived growth factor (PDGF), tumor growth factor-beta (TGF-beta), vascular endothelial growth factor (VEGF), and basic fibroblast growth factor (bFGF). It induces angiogenesis with apparent anti-cancer effects. Suramin can only be given intravenously and I have not yet tried it. In the United States, Suramin is available only from the CDC Drug Service; one cannot get it from compounding pharmacies. Suramin has been reported to be used with success with some autistic children. I wrote about connections on parasites and autism in, "[Medical Acupuncture on Gallbladder Meridian: Therapeutic Illusion on IBS and Autism.](#)"

These older medications that kill parasites in the body also have anticancer properties, unknown to most physicians. Interestingly, cancer behaves as if cancer is a metabolic parasite. You may wonder what else we are missing and why we are blinded from this important medical information, hidden and buried right in front of our eyes. Any medications can be used off-label; are they not utilized because of our ignorance, or because there is no money to be made in using older medications for other indications? Albendazole and mebendazole, developed in the 1970s for pinworms, are on WHO's Essential Medicines list. Albendazole costs pennies in low-income countries, a few dollars in nations like the UK; in the U.S., [up to \\$400 per dose](#) (two pills).

If this information becomes more widely accepted by physicians, oncologists, hospitals, and academic medical schools, there will be a major shock wave at the core of our medical education system and medicine itself. Parasites are also embedded in the brain as well as in our teeth/jaw/root canals and parasites might be the driving force, at the top of the food chain in the Evolution of Life. Perhaps, we are deliberately misled and ignore this information because, as I like to say, "Big pharma became the dominant parasite - metaphorically." How can we counter attack and break the cycle of the parasites?

The crux of the problem is that there are no reliable ways to detect deeply embedded parasites. I wrote many articles on this, and in my book, *Accidental Cure*. Acupuncture Meridian Assessment (AMA) can measure the deep subtle energy disturbances of parasite movements; we can treat accordingly based on differentiation by unmasking the imbalanced meridians. New AMA training sessions will be offered in April and August for physicians, dentists and prescribing professionals. My next book, *Accidental Blow Up in Medicine: Cancer, Post-Lyme and Chronic Disease - A Battle Plan for Your Life*, will be released in 2019. Join us! You can be a part of the force multiplier for the Accidental Blow Up in Medicine.

Dr. Simon Yu, M.D. is a Board Certified Internist. He practices Internal Medicine with an emphasis on Integrative Medicine to use the best each has to offer. For more articles and information about integrative medicine, patient success stories, and Dr. Yu's health book, [Accidental Cure: Extraordinary Medicine for Extraordinary Patients](#), visit his website at www.PreventionAndHealing.com or call Prevention and Healing, Inc., 314-432-7802. You can also attend a free monthly presentation and discussion by Dr. Yu on Integrative Medicine at his office on the second Tuesday each month at 6:30 pm. Call to verify the date. Seating is limited, arrive early.



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