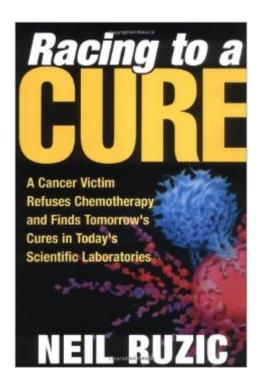
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Racing To A Cure: A Cancer Victim Refuses Chemotherapy And Finds Tomorrow's Cures In Today's Scientific Laboratories





Synopsis

"Racing to a Cure" is not a cancer memoir. It is a cancer cure memoir. In 1998, Neil Ruzic was diagnosed with mantle-cell lymphoma, the deadliest cancer of the lymph system, whose spread is reaching epidemic levels in the U.S. and Europe. Instead of following recommended courses of chemotherapy and radiation, he took control of his treatment by investigating cures being developed in the nation's cancer-research laboratories. Although chemotherapy harms the immune system and is increasingly demonstrated to be an ineffective long-term cure for the vast majority of cancers, it remains the standard treatment for most cancer patients. Ruzic, a former scientific magazine publisher and originator of a science center, refused to accept this status quo, and instead plunged into the world of cutting-edge treatments, exploring the frontiers of cancer science with revolutionary results. Ruzic went on the offensive: visiting scores of laboratories, gathering information, talking to researchers, and effectively becoming his own patient-care advocate. This book presents his findings. A scathing critique of the chemotherapy culture as well as unscientific "alternative" therapies, the book endorses state-of-the-art molecularly based technologies, making it an illuminating and necessary read for anyone interested in cancer research, especially patients and their families, and physicians. Neil Ruzic was expected to die within two years of his initial diagnosis. Five years later he has been declared cancer-free and considers himself cured.

Book Information

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Research

Customer Reviews

I loved this book. Read it!! It really should have been publicized much more; far lesser books end up

on the NYT bestsellers list. It is a true adventure story about a man diagnosed with mantle cell lymphoma (one of the worst cancers) who refuses to be just another sheep within America's "chemo culture". Instead, he crisscrosses the country in his own airplane, meeting and talking to scientists (the true cancer doctors) within their own laboratories, at the cutting edge of knowledge, in order to try to find a cure for his disease. This book was truly eye-opening, and it is even worth a second-read. It was written with the painstaking efforts of a great science writer who can effectively communicate to the layman and hold the interest of scientists at the same time, something that's very hard to do. I applaud Mr. Ruzic's achievements and his selfless efforts to help others who haven't been blessed with his intellect and financial advantages in life. We need people like him in government. Things really need to be shaken up in the FDA. Ironically, the slow progress in the development of effective new clinical treatments for cancer continues at a time when the scientific understanding of cancer and its molecular bases has grown by leaps and bounds in the past 8 years. One problem appears to be that oncologists have their hands tied by the FDA, and as a result, they often neglect to keep up with the latest developments. This is why we continue to lose so many people to cancer, and so many cancers remain completely incurable (e.g. pancreatic cancer). For instance, even with new cancer vaccines and monoclonal antibodies under development, virtually all clinical trials today require the patient to first take massive doses of highly toxic chemotherapeutic agents.

Having had lymphoma for five years now, I was eager to read Ruzic's book. I learned quite a bit -- or at least terms to use in my never-ending research into indolent lymphoma. Four years ago, I had been so sick that I could hardly walk across a room; I coughed incessantly, and if I ate anything, it came up the next time I coughed. I had just about every test anyone could imagine, but the malignancy never surfaced as the cause for my horrible night sweats, constant weight loss, endless coughing. My doctor thought I had lymphoma, but even after two weeks in the hospital, no one could find anything to blame the symptoms on. In desperation, my husband got me an appointment with an oncologist at UAB in Birmingham, AL (250 miles from home); my doctor there did the usual biopsies, which continued to be Inconclusive. However, he had a DNA study done, and eventually, he found my aggressive Type B Lymphoma. I received CHOP and Rituxan for 8 treatments--my husband drove me to Birmingham for each treatment--I still go to Birmingham for my CT scans and treatments. After the first treatment, I began to feel much better than before. I have not experienced the terrible side effects Ruzic describes of chemo. The staff at UAB was very well trained in ways to avoid nausea and pain. I was also on Nulasta to build white cells. After two years, I was declared

"cured" because aggressive lymphoma almost always resurfaces if it is going to within two years. However, after three years, I discovered swollen lymph nodes again. When I had a biopsy again in Birmingham, the diagnosis was malignancy, but for indolent lymphoma, non-curable.

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