



Updates in RBOI's Groundbreaking Melanoma Treatment

PAID PROMOTIONAL FEATURE

More than 20 years ago, Dr. Norman Anderson at the Robert Boissonneault Oncology Institute successfully treated a man whose metastatic melanoma had produced 23 brain lesions. Anderson performed whole brain radiation, administering low doses twice a day. His discovery led to a study with 19 patients, whose melanomas together had metastasized to the brain, other areas of the head, neck, lung, abdomen, liver, pelvis, and extremities, along with lymph nodes. They had all exhausted their other treatment options.

In a recent presentation, Dr. Anderson reports that 108 patients whose melanomas involved 171 areas in the body have completed treatment. Eighty percent of people whose melanoma was metastatic at the outset are alive three years after radiation treatment,

and the occurrence of further disease elsewhere over time has been "markedly diminished if not eliminated, increasing the potential for a cure." Other patients have remained disease-free for up to a decade and longer.

Dr. Anderson's radiation protocol, often used without the addition of surgery or pharmaceuticals, eliminated melanomas that had been resistant to other procedures, or that had returned following surgery, chemotherapy, and immunotherapy.

Dr. Anderson points out that timing is key, and there is a big difference between once-daily radiation (the current standard of care) and smaller doses of twice-daily radiation. More frequent radiation has eliminated tumors even in untreated areas, a historically rare phenomenon called the abscopal effect. Such tumor

reduction beyond the treatment area may be due to an immune response resulting from the repeated lower radiation doses.

Twice-daily radiation can eliminate all signs of the disease, reduce side effects significantly, and extend patient survival, for a small fraction of the cost of other treatments. According to the medical literature, treating advanced melanoma in which surgery is not an option can cost around \$1.6 million to add a single year of progression-free survival. "This places overwhelming and undue pressure upon our medical oncology colleagues to deliver both optimal care but with little or no ability to control its financial burden," Dr. Anderson says. "Treatment with twice daily radiation as an alternative appears to offer optimum results while markedly decreasing overall cost to a few percent."



Annual melanoma deaths in the US total 8,000 and rising. Twice-daily radiation may help reverse that trend. Patented in the US and Australia, with 34 patents pending in Europe, Dr. Anderson's treatment protocol is poised to serve "an essential therapeutic role for melanoma."

Call RBOI to learn more.

by the numbers

97,610

Estimated melanoma cases diagnosed in the U.S. in 2023.

2.2%

Lifetime risk of developing melanoma of the skin.

1,413,976

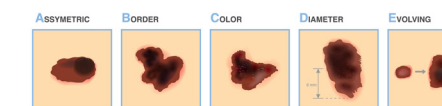
Estimated number of people living with melanoma of the skin in the U.S.

5%

Percent of all new cancer cases that are melanoma of the skin.

Moles: Benign, or Melanoma?

When examining moles, use the ABCDE rule:



A=Asymmetry: One half of a mole or birthmark does not match the other.

B=Border: Edges are irregular, ragged, notched, or blurred.

C=Color: Color is not the same all over and may include different shades of brown or black, or may have patches of pink, red, white, or blue.

D=Diameter: Spot is larger than 6 millimeters across (about pencil eraser width).

E=Evolving: The mole's size, shape, or color changes.

Also check to see if a spot looks different from all the other spots on your skin. If you see something that doesn't look right or that causes you concern, tell your doctor.



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