

ISCADOR®

Integrative Oncology



Recommendations

for treatment for professionals

ISCADOR  AG



with ISCADOR®

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This brochure is intended for
medical professionals only.
Please do not pass it on to patients.

The recommendations in this brochure
are based on the product information
submitted to the German Health
Authorities.



About ISCADOR®

Active substance

ISCADOR contains as the active ingredient a fermented aqueous extract of the fresh mistletoe plant (*Viscum album* L.) from various host trees; in some cases with the addition of a metal salt.

Excipients

Aqua ad injectabilia, Natrii chloridum.

Galenic form

Ampoules containing 1 ml for subcutaneous injection (s.c.).

Special precautions for storage

Store in a refrigerator at temperatures between + 2°C and + 8°C or 36°F and 46°F.

Host trees

Apple tree (*Malus*, M), oak (*Quercus*, Qu), pine (*Pinus*, P), elm (*Ulmus*, U).

Metal additions

Silver carbonate (Arg.), copper carbonate (Cu), mercury sulphate (Hg); whereas in the respective highest concentration of 20 mg/ml Iscador 2 x 10⁻⁵ parts of a D4 metal salt potency are added, i.e. less than 0.05% of the maximum tolerable daily dose of the respective chemical compound as defined by ICH Q3D.



Indication & Characteristics

Indication

According to the anthroposophic knowledge of the human being and nature.
This includes in adults:

Stimulation of the structuring and integrative forces for the purpose of elimination and reintegration of growth processes which have become independent, e.g.*:

- in malignant tumours, also with accompanying impairment of the hematopoietic organs
- in benign tumours
- in defined precancerous disorders
- with the aim to reduce the risk of tumour recurrence after surgery

* Authorised indications may differ depending on the registration in each country.



Characteristics

Clinical efficacy

In clinical studies, where it was used as a supportive treatment in addition to conventional oncological therapies, ISCADOR showed:

- improved quality of life, e.g. normalization of appetite, body weight, sleep and thermoregulation; elevation of mood and improvement of initiative 2, 7, 8, 12, 13, 22, 27, 29, 39, 42
- reduction of adverse reactions to conventional oncological therapies such as chemo- and radiotherapy 2, 12, 22, 29, 39, 40
- reduction of disease- or therapy-related symptoms such as nausea, vomiting, diarrhoea and immunodepression 2, 12, 29, 32, 39, 40, 47
- mitigation of cancer-related fatigue (CRF) 2, 12, 29, 32, 39, 40, 47
- relief of cancer-related pains 39, 42
- reduction of hospitalization time 12, 29
- improvement of immunological parameters including a reduced susceptibility to infections 5, 17, 19, 20, 21, 26, 30, 35
- prevention of relapses and metastases 1, 12, 14, 15, 16
- prolongation of survival 1, 2, 12, 13, 14, 29, 31, 41, 48

Mode of action/pharmacodynamics

- Inhibition of tumour growth *in vitro* and *in vivo* 10, 34, 36
- Improved immune function (immunomodulation) *in vitro* and *in vivo* 3
- Enhanced DNA repair in healthy cells with protective effects against cytostatics- and radiation-induced DNA damage in healthy tissues *in vitro* and *in vivo* 4, 6, 23, 24, 25

Practical use

Type of application

Subcutaneous (s.c.), preferably in the morning ^{18, 33, 43}. It is recommended to briefly warm up the cooled ampoule in the hand before use, and to rest for about 30 minutes after the injection. At least the 1st injection should be administered under medical supervision.

Injection site

If possible, near the tumour or metastasis, otherwise to alternating injection sites (e.g. abdomen or thigh and – except with mamma carcinoma – possibly upper arm). Injections into inflamed or irradiated skin should always be avoided.

ISCADOR® treatment

Treatment is divided into two phases. It begins with the initial phase of dose finding and then moves on to maintenance therapy. The initial phase can be divided into three steps:

- 1) Choice of ISCADOR preparation (see p. 8)
- 2) Start with ISCADOR Series 0 (see p. 10)
- 3) Gradual dose increase until the optimal response (see p. 12)

Once the patient displays an optimal dose response, the individual response dose has been determined and treatment moves into the phase of maintenance therapy. Maintenance therapy can either follow a rhythmically changing dosage regimen or use a single constant dosage (see p. 14).

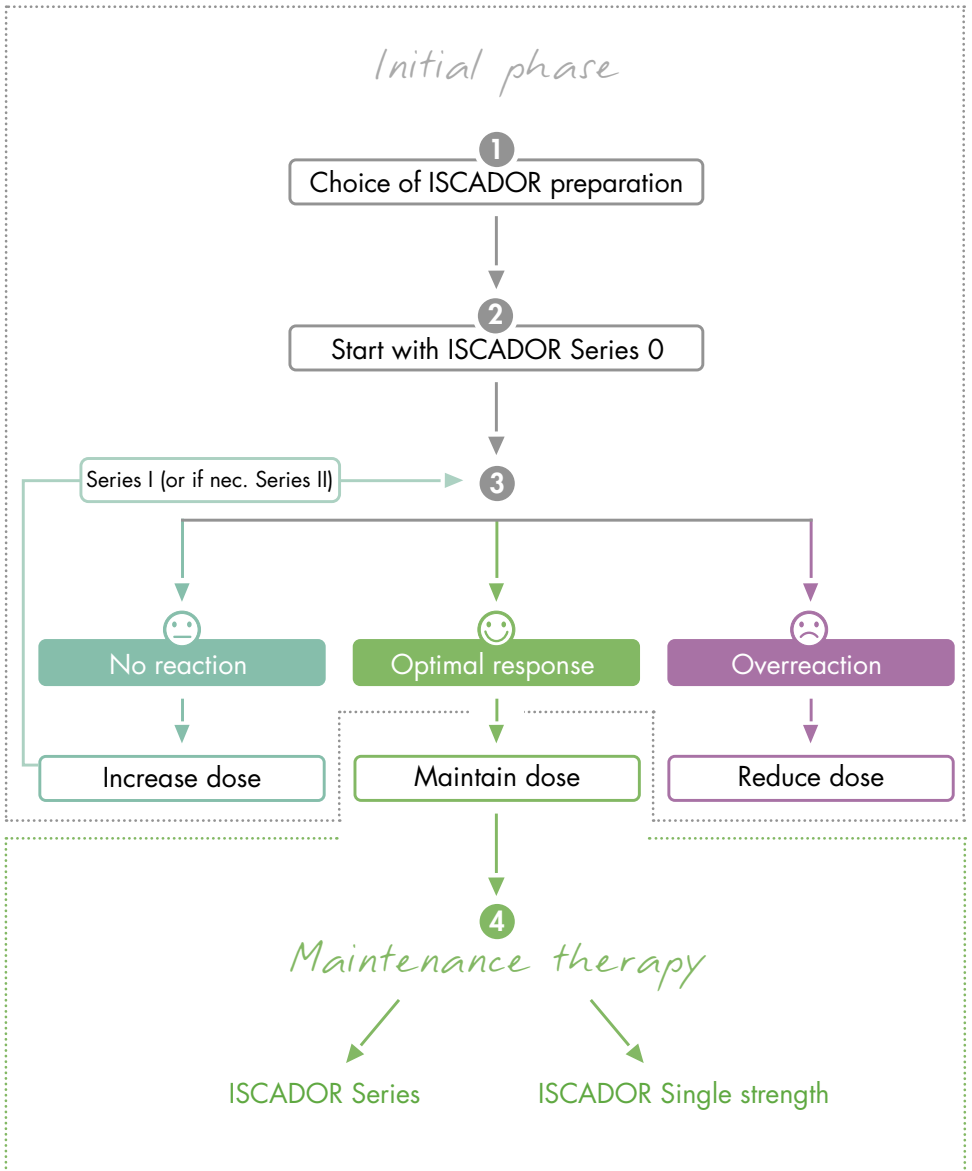
Self-injection tutorial



Our video tutorial supports patients with their self-injections at home:
www.iscador.com/application

ISCADOR® treatment regimen

Initial phase up to the optimal individual response dose and moving on to maintenance therapy



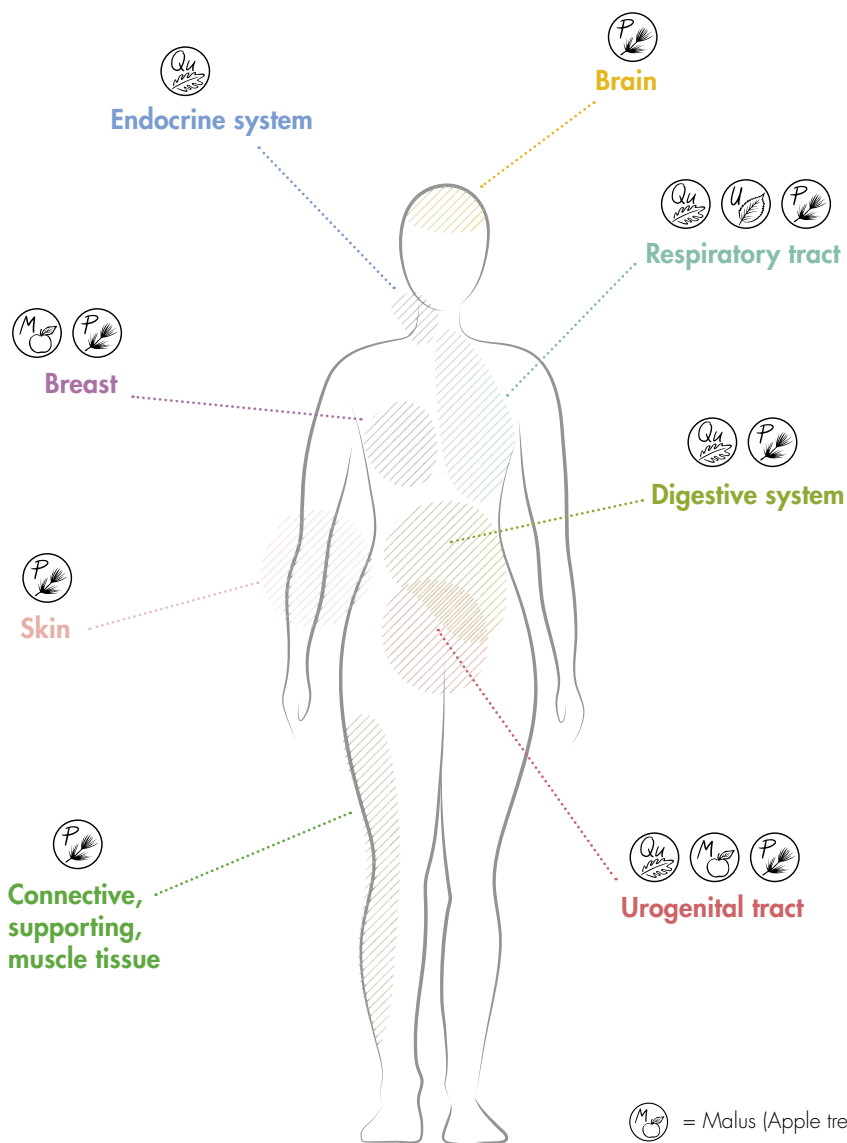
1 Choice of ISCADOR preparation

Based on clinical experience, different preparations are recommended depending on the location of the primary tumour. Packs of Series 0 are only available without metal salt addition, except ISCADOR U c. Hg.





Location of the primary tumour	Recommendation	Alternative In case of a suboptimal dose response (s. p. 12)
Digestive system		
Tongue, oral cavity, oesophagus	Qu	M
Stomach, liver, gall bladder, pancreas	Qu c. Cu	M c. Cu
Small intestine, large intestine, rectum	Qu c. Hg	M c. Hg
Anus	P	Qu
Urogenital tract		
Kidney	Qu c. Cu	M c. Cu
Bladder	Qu c. Arg.	M c. Arg.
Prostate, testes	Qu c. Arg.	M c. Arg.
Penis	P	Qu
Uterus, ovary	M c. Arg.	Qu c. Arg.
Vulva, vagina	M c. Arg.	P c. Hg
Cervix	M	Qu
Breast		
Pre-menopausal	M c. Arg.	P c. Hg
Peri-menopausal	M c. Hg	P c. Hg
Post-menopausal (also artificially induced)	P c. Hg	Qu c. Hg
Respiratory tract		
Nose, pharynx	P	P c. Hg
Larynx	Qu	P
Pleura	P	P c. Hg
Bronchia	U c. Hg*	Qu c. Hg
Endocrine system (thyroid)		
	Qu	P
Skin		
	P	P c. Hg
Connective, supporting, muscle tissue (sarcomas)		
	P	P c. Hg
Brain**		
	P	P c. Hg

* ISCADOR U is only available with metal addition (U c. Hg).

** Only according to strict indication and under close clinical control.



Recommendation for the choice of ISCADOR preparation. Alternative in case of not optimal reaction see table on the left.

-  = Malus (Apple tree)
-  = Pinus (Pine)
-  = Quercus (Oak)
-  = Ulmus (Elm)

2 Start with ISCADOR Series 0

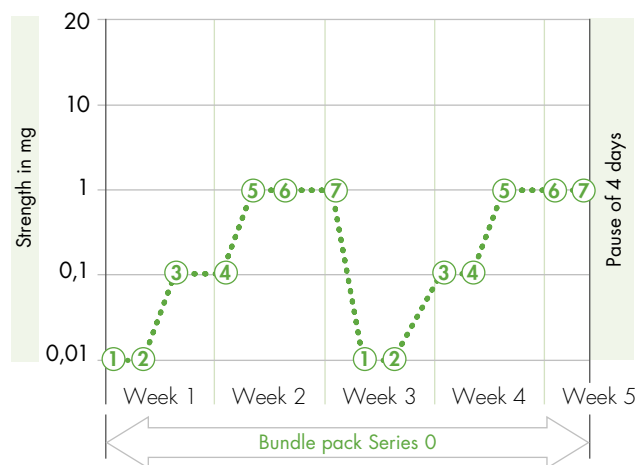
After choosing the ISCADOR preparation, treatment is started with a bundle pack of ISCADOR Series 0 (2 x 7 ampoules; see also right page).

The gradually increasing dosage can prevent overreactions. 1 ml ISCADOR is injected subcutaneously 2 to 3 times a week with increasing strength according to the composition of the Series.

The response to the last three ampoules of the serial pack determines the further procedure.

Rhythmical dosage

Example: Three injections per week with a bundle pack Series 0



	1 st pack							2 nd pack							
Ampoule No.	1	2	3	4	5	6	7	1	2	3	4	5	6	7	-
Weekday (for example)	Mo	We	Fr	Mo	We	Fr	Mo	We	Fr	Mo	We	Fr	Mo	We	-
Week	Week 1			Week 2				Week 3			Week 4			Week 5	

Pauses: Pause of 4 days after a bundle pack.

ISCADOR® Series pack

One Series pack contains 7 ampoules in increasing dose strength.

The numbers inside the box indicate the order in which the ampoules have to be injected.

The Series packs are also available as so-called bundle packs containing 2 Series packs of 7 ampoules each.



Series 0	
Ampoule No.	Strength
1	0,01 mg
2	0,01 mg
3	0,1 mg
4	0,1 mg
5	1 mg
6	1 mg
7	1 mg

Series I	
Ampoule No.	Strength
1	0,1 mg
2	0,1 mg
3	1 mg
4	1 mg
5	10 mg
6	10 mg
7	10 mg

Series II	
Ampoule No.	Strength
1	1 mg
2	1 mg
3	10 mg
4	10 mg
5	20 mg
6	20 mg
7	20 mg

3 Gradual dose increase until the optimal response

No reaction

None of the reactions described in the following section «Optimal response» occurs

→ **Increase dose:** Change to next higher Series

No reaction until ampoule 7 of Series II:

Check the section «Optimal response» below for further signs of successful dose finding, as not every patient develops a local reaction. Complete absence of any reaction mentioned below may warrant a change in host tree preparation.



Our Infoline for medical professionals will be happy to provide you with information.



Optimal response

Signs of optimal response (individually or in combination):

Improvement of the subjective state of health like increase in appetite, sleep quality, sensation of warmth, performance, mental state and reduction of pain

Increase of body temperature within about 5 hours after injection (< 38 °C)

Local inflammatory reaction at the injection site with a maximum diameter of 5 cm (2 inches), including induration, itching, swelling and/or local hyperthermia, which generally disappears spontaneously after one or two days. The absence of a local reaction is not a sign of reduced efficacy.



Typical local reaction

→ **Maintain dose:** Continue with maintenance therapy (see p. 14)

Fatigue, shivering, general indisposition, headache or temporary dizziness occurring on the day of injection are not necessarily signs of intolerance but may indicate that the last administered dose was too high and must be adjusted.



Overreaction

Febrile, inflammatory states with body temperatures over 38 °C (100.4 °F)

Local inflammatory reactions at the injection site > 5 cm or 2 inch Ø

Lassitude, shivering, general feeling of unwellness, headaches and dizziness that occur on the day of the injection and exceed a tolerable level or that have not subsided by the following day

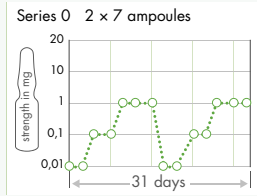
→ **Reduce dose:** Pause treatment until symptoms have resolved, then switch to the next lower Series.



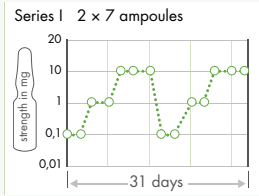
In case of an overreaction with Series 0, please contact our Infoline (see p. 15).

☹ Example no reaction*

Change to the next higher Series:
Series 0 → change to Series I

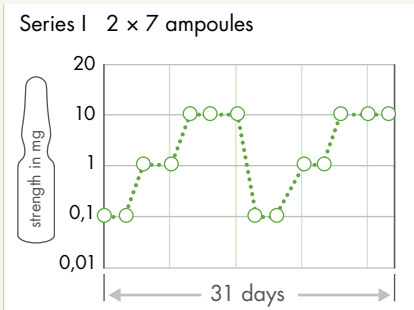


Pause

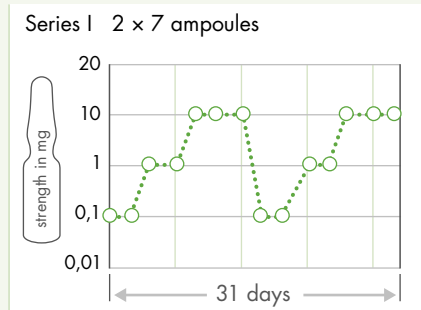


😊 Example optimal response*

Series maintained:
Series I → maintain Series I



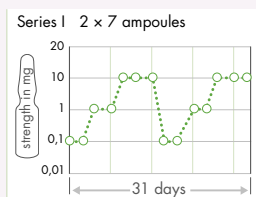
Pause



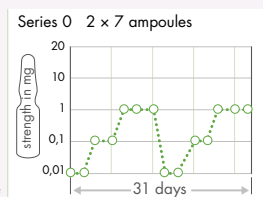
Maintenance therapy

☹ Example overreaction*

Change to next lower Series:
Series I → change to Series 0



Pause



○ = ampoule

* to the last three ampoules of the Series pack

4 Maintenance therapy

If the patient shows an optimal reaction to the last three ampoules of a Series, the correct dose has been determined and maintenance therapy can be started. This means that the determined dose is now applied until the patient no longer shows an optimal reaction or the therapy is terminated.

The dosage should be reviewed every 3 – 6 months based on patient response and clinical development. Since it is to be expected that the local reaction weakens over the course of therapy or disappears altogether, a change to an ISCADOR preparation of a different host tree can be considered in such a case. Our Infoline for medical professionals can support you in this process.

A maintenance therapy can be carried out with rhythmical changing or constant dosage:

Rhythmical dosage with ISCADOR Series

Continue with the Series that is able to elicit an optimal reaction.

Due to the different strengths within the Series pack, lower concentrations alternate with the maximum tolerated dose. Clinical experience has shown that the rhythmical dosage regimen can stimulate the body's auto-regulation and prevent habituation.

Series packs are mainly used in a curative setting and are suitable as a supportive treatment in phases of recurrence prophylaxis.



Constant dosage regimen with ISCADOR Single strength packs

Within a Single strength pack, all ampoules contain the same dosage. The number in mg indicates the amount of fresh plant material contained in the extract inside the ampoule. The Single strength pack is chosen to match the patient's optimal individual dose response. If, for example, the patient responds to the last three ampoules of Series I, the Single strength pack of 10 mg is selected for maintenance therapy. Treatment with a single strength regimen can help strengthen weakened patients and is mainly used in a palliative situation, e.g. with an inoperable or incompletely removed tumour or advanced metastasis). It may also be used in the rare case of the highest dose in a Series eliciting an overreaction, while the next lower Series is considered insufficient. Example: at an overreaction at 10 mg in Series I, change to a constant regimen with ISCADOR 5 mg special).

Treatment pauses

In case of a favourable course of treatment, pauses of 1–2 weeks may be introduced after each course of 14 ampoules. From the third treatment year onwards, pauses may be extended to 2–3 weeks at a time.

As mentioned above, a therapy with constant doses should primarily be used in a palliative setting. Here it is recommended to continuously maintain the therapy without breaks.

Duration of treatment

Principally, duration of treatment is not limited. It depends on the respective risk of relapse and the patient's individual condition, prognosis and preference. In most cases, this means a continuation of the therapy for approx. 5 years or possibly longer from the time of diagnosis or from the beginning of the curative primary therapy^{2, 12}.

We are at your service!



Our Infoline for medical professionals

Phone (* free of charge)

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* DE: 0800 706 7000

* AT, FR, IT, NZ, SE, UK: 00800 706 70000

All other countries: +49 7621 162 26 00

E-mail: infoline@iscador.com





Restrictions on use

Contraindications

- Known allergy to preparations of European mistletoe (*Viscum album* L.)
- Acute inflammatory conditions accompanied by high fever with temperatures > 38°C. Treatment should be paused until the signs of acute inflammation have subsided.
- Chronic granulomatous disorders, florid autoimmune disorders and conditions under immunosuppressive therapy.
- Hyperthyroidism with tachycardia

Undesirable effects

Activation of preexisting inflammatory conditions is possible. In such cases, treatment should be paused until the inflammation subsides. Localized or systemic allergic reactions up to anaphylaxis have been reported, usually in the form of generalised itching, urticaria or exanthema, sometimes with angioedema, shivering attacks, shortage of breath and bronchospasms, sporadically with shock or as erythema exsudativum multiforme), requiring discontinuation of the preparation and initiation of emergency medical treatment.

Interactions

Due to the fast evolution of oncological treatments, knowledge about interactions of ISCADOR with other pharmaceuticals is limited. In vitro examinations^{9, 11, 28, 44, 45, 46} as well as clinical studies^{37, 38, 40} have found no evidence for potential interactions. Long-term clinical experiences confirm this.

The approved drug information has been published on www.pharmnet.bund.de.

ISCADOR® Product range

Host tree	ISCADOR	Series										
		Bundle pack (2 x 7 ampoules, Series 0 also 1 x 7 ampoules)		Single strength packs Pack (1 x 7 ampoules)								
		Series 0	Series I	Series II	0,0001mg	0,001mg	0,01mg	0,1mg	1mg	5mg	10mg	20mg
Hosi tree	M											
	M c. Arg. ¹											
	M c. Cu ²											
	M c. Hg ³											
	M spez. ⁴											
Malus Apple tree	Qu											
	Qu c. Arg. ¹											
	Qu c. Cu ²											
	Qu c. Hg ³											
	Qu spez. ⁴											
Quercus Oak	P											
	P c. Hg ³											
	U											
	U c. Hg ³											
	U spez. ⁴											
Pinus Pine	U											
	U c. Hg ³											
	U spez. ⁴											
	U c. Hg ³											
	U spez. ⁴											
Ulmus Elm	U											
	U c. Hg ³											
	U spez. ⁴											
	U c. Hg ³											
	U spez. ⁴											

¹ as silver carbonate ² as copper carbonate ³ as mercury sulphate (Metal salt addition of 2 x 10⁻⁵ parts of a D4 potency in 20 mg/ml)

⁴ spez. = spezial: with constant quantity of substances typically found in mistletoe, also available as pack with 2 x 7 ampoules



Our Services

We are at your service

Infoline for medical professionals

We are at your disposal for professional advice on the use of ISCADOR in integrative cancer treatment and for medical and scientific consultation:

Phone (free of charge)

CH, FL: 0800 706 700

DE: 0800 706 7000

AT, FR, IT, NZ, SE, UK: 00800 706 70000

All other countries:

Phone +49 7621 162 26 00

E-mail: infoline@iscador.com

Online-services on www.iscador.com

Browse through our website for more information on integrative cancer treatment, our company and much more.

Additional scientific information and documents are available in the professionals section on our website: www.iscador.com/professionals



References

1. Augustin M, Bock PR, Hanisch J, et al. Safety and efficacy of the long-term adjuvant treatment of primary intermediate to high-risk malignant melanoma (UICC/AJCC stage II and III) with a standardized fermented European mistletoe (*Viscum album* L.) extract. Results from a multi-center, comparative, epidemiological cohort study in Germany and Switzerland. *Arzneim-Forsch/ Drug Res.* 2005; 55: 38–49.
2. Bock PR, Friedel WE, Hanisch J, et al. Wirksamkeit und Sicherheit der komplementären Langzeitbehandlung mit einem standardisierten Extrakt aus Europäischer Mistel (*Viscum album* L.) zusätzlich zur konventionellen adjuvanten onkologischen Therapie bei primärem, nicht metastasierendem Mammakarzinom. *Arzneim-Forsch/ Drug Res.* 2004; 54 (8): 456–466.
3. Braedel-Ruoff S. Immunomodulatory effects of *Viscum album* extracts on natural killer cells: review of clinical trials. *Forsch Komplementmed.* 2010;17: 63–73.
4. Büssing A. *Viscum album* L. extracts reduce sister chromatid exchanges in cultured peripheral blood mono-nuclear cells. *Eur J Cancer.* 1994; 30A: 1836–1841.
5. Büssing A, Bischof M, Hatzmann W, et al. Prevention of surgery-induced suppression of granulocyte function by intravenous application of a fermented extract from *Viscum album* L. in breast cancer patients. *Aniticancer Res.* 2005; 25: 4753–4758.
6. Büssing A, Brückner U, Enser U, et al. Modulation of chemotherapy associated immunosuppression by intravenous application of *Viscum album* L. extract (Iscador): a randomised phase II study. *Eur J Integr Med.* 2008; 1: 44–45.
7. Büssing A, Raak C, Ostermann T. Quality of life and related dimensions in cancer patients treated with mistletoe extract (Iscador): A Meta-Analysis. *Ev-Based Compl Altern Med.* 2012, Article ID 219402, 8 pages. DOI:10.1155/2012/219402
8. Carlsson M, Arman M, Backman M. A five-year follow-up of quality of life in women with breast cancer in anthroposophic and conventional care. *eCAM Evidence-based Complementary and Alternative Medicine.* 2006; 3 (4): 523–531.
9. Doehmer J, Eisenbraun J. Assessment of extracts from mistletoe (*Viscum album*) for herb-drug interaction by inhibition and induction of cytochrome P450 activities. *Phytother Res.* 2012; 26: 11–17.
10. Elluru S, Huyen van JPD, Delignat S, et al. Tumor regressive effects of *Viscum album* preparations – Exploration of immunomodulatory mechanisms. *Medicina.* 2007; 67 (Suppl. III): 85–89.
11. Endgal S, Nilsen OG. *In vitro* inhibition of CYP3A4 by herbal remedies frequently used by cancer patients. *Phytother Res.* 2009; 23 (7): 906–912.
12. Friedel WE, Matthes H, Bock PR, Zänker KS. Systematic evaluation of the clinical effects of supportive mistletoe treatment within chemo- and/ or radiotherapy protocols and long-term mistletoe application in nonmetastatic colorectal carcinoma: multicenter, controlled, observational cohort study. *J Soc Integrat Oncol.* 2009; 7 (4): 137–145.
13. Grossarth-Maticek R, Kiene H, Baumgartner SM, Ziegler R. Use of Iscador, an extract of European mistletoe (*Viscum album*), in cancer treatment: prospective nonrandomized and randomized matched-pair studies nested within a cohort study. *Altern Ther Health Med.* 2001; 7: 57–78.
14. Grossarth-Maticek R, Ziegler R. Prospective controlled cohort studies on long-term therapy of breast cancer patients with a mistletoe preparation (Iscador). *Forsch Komplementärmed.* 2006; 13: 285–292.
15. Grossarth-Maticek R, Ziegler R. Wirksamkeit und Unbedenklichkeit einer Langzeitbehandlung von Melanompatienten mit einem Mistelpräparat (Iscador). *Schweiz Z GanzheitsMed.* 2007; 19: 325–332.
16. Grossarth-Maticek R, Ziegler R. Randomized and non-randomized prospective controlled cohort studies in matched pair design for the long-term therapy of corpus uteri cancer patients with a mistletoe preparation (Iscador). *Eur J Med Res.* 2008; 13: 107–120.
17. Hajto T. Immunomodulatory effects of Iscador: a *Viscum album* preparation. *Oncology.* 1986; 43 Suppl1: 51–65.

18. Henn W. Verlauf der Körperkerntemperatur und der Zahl peripherer Blutzellen unter Berücksichtigung ihrer Zirkadianrhythmik bei Mammakarzinom-Patientinnen vor und während der Therapie mit einem Mistelpräparat – Eine explorative Studie. Dissertation Freie Universität. Berlin 1995.
19. Huber R, Klein R, Lüdtko R, Werner M. Häufigkeit grippaler Infekte bei Gesunden unter Gabe eines lektinreichen und eines lektinarmen Mistelpräparats im Rahmen einer randomisierten, doppelblinden, placebokontrollierten Studie. *Forsch Komplementärmed.* 2001; 8: 354–358.
20. Huber R, Rostock M, Goeld R, et al. Mistletoe treatment induces GM-CSF- and IL-5 production by PBMC and increases blood granulocyte and eosinophil counts: a placebo controlled randomized study in healthy subjects, *Eur J Med Res.* 2005; 10: 411–418.
21. Huber R, Classen K, Werner M, Klein R. *In vitro* immunoreactivity towards lectin-rich or viscotoxin-rich mistletoe (*Viscum album* L.) extracts Iscador applied to healthy individuals. *Arzneim-Forsch/ Drug Res.* 2006; 56 (6a): 447–456.
22. Kienle GS, Kiene H. Influence of *Viscum album* L. (European mistletoe) extracts on quality of life in cancer patients: a systematic review of controlled clinical studies. *Integr Cancer Ther.* 2010; 9: 142–157.
23. Kovacs E, Kuehn JJ, Werner M, Hoffmann J. Effect of Iscador on DNA-repair after radiation or cyclophosphamide. Correlation with IFN- γ production. *Onkologie.* 1995; 18: 651.
24. Kovacs E, Kuehn JJ, Werner M, Hoffmann J. Die Wirkung einer Behandlung mit *Viscum album* (IsCADOR) auf die DNA-Reparatur der Lymphozyten bei Karzinompatienten. *Forsch Komplementärmed* 1996; 3 Suppl 1, 18, 97.
25. Kovacs E. The *in vitro* effect of *Viscum album* (VA) extract on DNA repair of peripheral blood mononuclear cells (PBMC) in cancer patients. *Phytother Res.* 2002; 16: 143–147.
26. Kuehn JJ. *Viscum album* L. Pini in der Behandlung des Non-Hodgkin-Lymphoms – Wirksamkeit und Risikoeinschätzung einer subkutanen Mistletoetherapie im Rahmen einer retrospektiven Fallkontrollstudie. [Efficacy and risk estimation of subcutaneous mistletoe treatment (*Viscum album* L. Pini) in patients with non-Hodgkin's Lymphoma, a retrospective controlled case study]. In Scheer R, et al. (Hrsg.): Die Mistel in der Tumorthherapie 2. KVC Verlag, Essen 2009: 353–373.
27. Loef M, Walach H. Quality of life in cancer patients treated with mistletoe: a systematic review and meta-analysis. *BMC Complementary Medicine and Therapies*, 2020; 20: 227.
28. Matthes B, et al. Fremdstoff-metabolische Charakterisierung von Mistelpräparaten an der Leberzelle (HepG2). In Scheer R, et al. (Hrsg.): Fortschritte in der Misteltherapie. KVC Verlag, Essen 2005: 99–107.
29. Matthes H, Friedel WVE, Bock PR, Zänker KS. Molecular mistletoe therapy: friend or foe in established anti-tumor protocols? A multicenter, controlled, retrospective pharmaco epidemiological study in pancreas cancer. *Current Molecular Medicine.* 2010; 10: 430–439.
30. Oei S., A. Thronicke A, Schad F. Mistletoe and immunomodulation: Insights and implications for anticancer therapies. *Evidence-Based Complementary and Alternative Medicine.* 2019; 6. DOI: 10.1155/2019/5893017
31. Ostermann T, et al. A systematic review and meta-analysis on the survival of cancer patients treated with a fermented *Viscum album* L. extract (IsCADOR®): An update of findings. *Complement Med Res.* 2020; DOI: 10.1159/000505202
32. Pelzer F, et al. Cancer-related fatigue in patients treated with mistletoe extracts: a systematic review and meta-analysis. *Support Care Cancer.* 2022; Mar 3. DOI: 10.1007/s00520-022-06921-x.
33. Saller R, Reichling J, Melzer J. Misteltherapie – Erwünschte und unerwünschte Wirkungen in der wissenschaftlichen Diskussion, Teil 2. *Praxismagazin.* 2005: 2, 6–17.

34. Schink M, Borowsky M. Zytotoxische Effekte von Mistellektinen und einem Mistelpräparat auf menschliche natürliche Killerzellen *in vitro*. [Cytotoxic effects of mistletoe lectins and a mistletoe preparation on human natural killer cells *in vitro*]. In Scheer, et al. (Hrsg.): Die Mistel in der Tumortherapie. KCV Verlag, Essen 2001: 163–176.
35. Schink M, Tröger W, Dabidian A, et al. Mistletoe extracts reduces the surgical suppression of natural killer cell activity in cancer patients. A randomized phase III trial. *Forsch Komplementärmed.* 2007; 14: 9–17.
36. Simoes-Wüst P, Balthazar von L, Werner M, et al. Die Empfindlichkeit von Primärkulturen von Brustkrebszellen auf verschiedene Iscador-Präparate. [Sensitivity of primary cultures of breast cancer cells of different Iscador preparations]. In Scheer, et al. (Hrsg.): Die Mistel in der Tumortherapie 3. KCV Verlag, Essen 2013: 137–146.
37. Thronicke A, Oei S L, Merkle A et al. Clinical safety of combined targeted and *Viscum album* L. therapy in oncological patients. *Medicines* 2018; 6;5(3):100. DOI: 10.3390/medicines5030100
38. Thronicke A, Steele M L, Grah C, et al. Clinical safety of combined therapy of immune checkpoint inhibitors and *Viscum album* L. therapy in patients with advanced or metastatic cancer. *BMC Complement Altern Med*, 2017; 17:534. DOI: 10.1186/s12906-017-2045-0
39. Tröger W, Jezdić S, Zdrale Z, et al. Quality of life and neutropenia in patients with early stage breast cancer: A randomized pilot study comparing additional treatment with mistletoe extract to chemotherapy alone. *Breast Cancer - Basic and Clinical Research.* 2009; 3: 35–45.
40. Tröger W, Zdrale Z, Stanković N, et al. Five-year follow-up of patients with early stage breast cancer after a randomized study comparing additional treatment with *Viscum album* (L.) extract to chemotherapy alone. *Breast Cancer: Basic and Clinical Research.* 2012; 1: 173–180.
41. Tröger W, Galun D, Reif M, et al. *Viscum album* [L.] extract therapy in patients with locally advanced or metastatic pancreatic cancer: A randomised clinical trial on overall survival, *Eur J Cancer.* 2013; 13: 10. DOI: 10.1016/j.ejca.2013.06.043
42. Tröger W, Galun D, Reif M, et al. Quality of life of patients with advanced pancreatic cancer during treatment with mistletoe — a randomized controlled trial. *Dtsch Arztebl Int.* 2014; 111: 493–502. DOI: 10.3238/arztebl.2014.0493
43. Weckenmann M. Wie kann die Temperaturanstiegshöhe durch *Viscum album*-Injektionen bei Malignompatientinnen optimiert werden? (Teil IV). *Mercurstab.* 1999; 52 (3): 154–161.
44. Weissenstein U, Kunz M, Urech K, Baumgartner S. Interaction of standardized mistletoe (*Viscum album*) extracts with chemotherapeutic drugs regarding cytostatic and cytotoxic effects *in vitro*. *BMC Complementary and Alternative Medicine.* 2014; 14: 6.
45. Weissenstein U, Kunz M, Urech K, et al. Interaction of a standardized mistletoe (*Viscum album*) preparation with anti-tumor effects of Trastuzumab *in vitro*. *BMC Complementary and Alternative Medicine.* 2016; 16: 271.
46. Weissenstein U, Kunz M, Oufir M, et al. Absence of herb-drug interactions of mistletoe with the tamoxifen metabolite [E/Z]-endoxifen and cytochrome P450 3A4/5 and 2D6 *in vitro*. *BMC Complementary and Alternative Medicine.* 2019; 19: 23.
47. Wode K, Schneider T, Lundberg I, Kienle GS. Mistletoe treatment in cancer-related fatigue: a case report. *Cases Journal.* 2009; 2: 77. DOI:10.1186/1757-1626-2-77
48. Ziegler R, Grossarth-Maticek R. Individual patient data meta-analysis of survival and psychosomatic self-regulation from published prospective controlled cohort studies for long-term therapy of breast cancer patients with a mistletoe preparation (Iscador). *eCAM.* 2008: 1–10.

ISCADOR® solution for injections

Active ingredient: fermented, aqueous mistletoe extract.

Composition: fermented, aqueous extract from *Viscum album* from various host trees.

Other ingredients: sodium chloride and water for injection.

Indications: according to the anthroposophic understanding of human being and nature. This includes in adults: in malignant tumours, also with accompanying impairment of haematopoietic organs; in benign tumours; in defined precancerous disorders; for prevention of tumour recurrence after surgery.

Contraindications: known allergy to preparations of European mistletoe (*Viscum album* L.). Disorders accompanied by acute inflammation or high fever. Chronic granulomatous diseases, florid autoimmune diseases, and diseases treated with immunosuppressive drugs. Hyperthyroidism with tachycardia.

Side effects: locally restricted inflammatory reactions around the subcutaneous injection site, fever, flu-like symptoms, swellings of regional lymph nodes as well as activation of inflammations/allergic reactions. The occurrence of chronic granulomatous inflammation, autoimmune diseases and symptoms of an increase in brain pressure in brain tumors/metastases during mistletoe therapy have also been reported.

Pharmaceutical forms and packs: solution for injection in Series packs:

2 x 7 ampoules cont. 1 ml (bundle pack), Series 0 also 1 x 7 ampoules cont.

1 ml. Solution for injection in Single strength packs: 1 x 7 ampoules cont. 1ml, Iscador special also 2 x 7 ampoules cont. 1ml (bundle pack).

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Publication details

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For better readability, the masculine form is used throughout.



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