

## Table 2: Controlled clinical trials\* of mistletoe in cancer

(\*trials published after the systematic reviews in table 1)

Source: Mirjam Wüsthof, CAM-Cancer Consortium. Mistletoe (Viscum album) [online document]. January 2015.

| First author<br>year [ref] | Study design    | Participants<br>(number,<br>diagnosis)                   | Interventions<br>(experimental<br>treatments,<br>control) | Main outcome<br>measures                    | Main results   | Comments   |
|----------------------------|-----------------|--|---|---|--|--|
| Bar-Sela<br>2013 [28]      | RCT<br>phase II | 72 patients<br>Control: 39<br>Iscador®: 33               | Carboplatin/<br>gemcitabine or<br>carboplatin/            | Chemotherapy-<br>related adverse<br>effects | Iscador® group: Fewer chemo-   | No definite conclusion of a possible effect of Iscador® on quality of life and total adverse                           |
|                            |                 | NSCLC, advanced  | pemetrexed  | Quality of life                             | therapy dose reduction (p=0.005)   | events could be drawn  |
|                            |                 |  | +/- Iscador®  | EORTC QLQ-C30<br>questionnaire              | Less grade 3-4 non-hematologic side effects (p=0.043) Less hospitalisation   | Chemotherapy dose reductions, severe non-hematologic side effects were less frequent in patients treated with Iscador® |
|                            |                 |  |   |   | (p=0.016)  Less peripheral   | Weaknesses:<br>moderate methodology, JADAD<br>score 3/5 (no blinding)  |
|                            |                 |  |   |   | neuropathy (p=0.03)  | Small study group  |
|                            |                 |  |   |   | No statistically significant difference in any questionnaire item, but trends of improvement were seen in most items |  |
| Kim                        | RCT<br>pilot    | Patients: n=32   | Doxifluridine (5-<br>FU prodrug)                          | Chemotherapy related side effects           | Less diarrhoea (p=0.014)   | Additional treatment with mistletoe extract was  |
| 2012 [29]                  |                 |  | +/-<br>abnobaViscum®                                      | Quality of life                             | Improvement of global health status (p=0.0098), no statistically difference in other items                           | associated with improved<br>quality of life in gastric cancer<br>patients during adjuvant                              |
|                            |                 | Gastric cancer,<br>stage Ib or II,<br>(adjuvant setting) | Q (aVQ)   | Safety EORTC QLQ-C30                        | No safety concerns for abnobaViscum® Q   | chemotherapy  Moderate methodology, Jadad  |
|                            |                 | (aujuvant setting)                                       |   | and QLQ-STO22<br>questionnaire              |  | score 3/5 (no blinding) Small study group  |

## CAM Cancer Complementary and Alternative Medicine for Cancer

| Troeger<br>2013 [30] | RCT<br>Phase III | Patients: n= 220 Pancreatic cancer, advanced | Iscador® Qu<br>vs<br>best supportive<br>care | Survival (primary end<br>point: 12 months<br>overall survival) | Median overall survival was 4.8 months (Iscador® Qu) and 2.7 months (control), (p< 0.0001) | Study findings suggest mistletoe extract may be a non- toxic and effective last-line therapy that offers a prolongation of overall survival as well as fewer disease- |
|----------------------|------------------|--|--|--|--|---|
|                      |                  |  |  |  |  | related symptoms for patients with locally advanced or metastatic pancreatic cancer   |
|                      |                  |  |  |  |  | Information about implementation of best supportive care (control) is weak  |

RCT = randomised controlled trial