

EDTA CHELATION THERAPY BLOOD TYPE AND CANCER

Cancer is number two of the big three killers. Is there a connection between EDTA chelation therapy, blood type and cancer? The data below from Weissberg² is already a decade old, but there is no reason to believe the statistics have changed for the better. It may even be much worse.

Blood Types

Blood typing for the basic A, B, AB and O tissue groups is a system of detecting two specific glycoproteins that may or may not be on the surface of every cell of the body. Whole blood, naturally, is the easiest place to check for blood type as it represents all body tissues. You will notice that blood type O is really blood type zero which means antibodies against neither type A nor type B are present. These antibodies actually react with plant lectin antigens, type A and type B and form the antigen-antibody agglutination reaction. People with type O blood do not have these antibodies to plant lectin antigens. Interestingly, as a general rule blood type A actually fair better with eating plants and tend to shun meats because of their lack of pepsin and stomach acid while type B tend to fair better with dairy products. Type O are generally meat eaters while blood type AB are mixed type A and type B eaters.

As mentioned above, the classification of "blood" type is actually whole body type not limited to just the blood itself. In other words, a patient with type A blood (antibodies to lectin A) will have type A skin cells, liver cells, immune cells, brain cells - all cells will be type A. The same goes for type B and type AB. The type O people will not have any type A or type B antibodies in their whole body.

Who Has What Type Blood?

Blood type O is common to the Americas. People with blood type O are said to be "universal donors" because their blood is compatible with all ABO blood types. It is also the most common blood type in populations around the world, including the USA and Western Europe. Among indigenous populations of Central and South America, the frequency of blood type O is extremely high, approaching 100%. It is also high among Australian aborigines.

Blood type A is common in Central and Eastern Europe. In countries such as Austria, Denmark, Norway, and Switzerland, about 45-50% of the population have this blood type, whereas about 40% of Poles and Ukrainians do so. The highest frequencies are found in small, unrelated populations. For example, about 80% of the Blackfoot Indians of Montana have blood type A.

Blood type B is relatively common in Asia being present in up to 25% of the Chinese and Indian population. It is less common in European countries and Americans of European origin, being found in about 10% of these populations.

Blood type AB is the least common type and individuals are known as "universal receivers" because they can receive blood from any ABO type. It is also the rarest of the blood groups. It is most common in Japan, regions of China, and in Koreans, being present in about 10% of these populations.

As to the races of man, there were probably two progenitors: Cro-Magnon and Neanderthal. Although somewhat controversial as some sources disagree, it seems that the Cro-Magnon race were predominately blood type O. Neanderthals, were predominately blood type A with some type B and reportedly some O.

Twenty-eight separate studies of apes showed that Chimpanzees have the blood types A and minimal O, but never B. Eight studies showed that Gorillas have the blood types B and minimal O, but never A. There is NO blood type AB in either of the apes.¹

This chart from Weissburg, 1999², illustrates the relative risk of cancer based upon blood type.

<p>Type A Blood: Age 00 - 39: 08% Risk Age 40 - 49: 18% Risk Age 50 - 59: 29% Risk Age 60 - 69: 43% Risk Age 70 - 79: 52% Risk Age 80 - 89: 53% Risk</p>	<p>Type AB Blood: Age 00 - 39: 00% Risk Age 40 - 49: 16% Risk Age 50 - 59: 21% Risk Age 60 - 69: 40% Risk Age 70 - 79: 48% Risk</p>
<p>Type B Blood: Age 00 - 39: 04% Risk Age 40 - 49: 06% Risk Age 50 - 59: 08% Risk Age 60 - 69: 14% Risk Age 70 - 79: 22% Risk Age 80 - 89: 26% Risk Age 90 - 99: 28% Risk</p>	<p>Type O Blood: Age 00 - 39: 00% Risk Age 40 - 49: 01% Risk Age 50 - 59: 03% Risk Age 60 - 69: 04% Risk Age 70 - 79: 09% Risk Age 80 - 89: 19% Risk Age 90 - 99: 20% Risk</p>

As you can see, type A blood runs the highest risk of cancer. This is also reflected by my 30 years of practice so it comes as no surprise to me. But it should shock you. The reason that Type A people are at such high risk for cancer is that cancer cells produce cell wall glycoprotein that is identical to the glycoprotein present on Type A blood. This means that the immune system of Type A blood people cannot recognize the difference between self and cancer. Indeed, Type A blood people get cancer earlier in life and it is far more aggressive and harder to get under control.

EDTA Chelation Therapy

Blumer and Cranton³ published a comprehensive study on the use of Calcium EDTA and it's effect on cancer in 1989. The study was done in Switzerland which has 45-50% type A blood people. In their study they reported up to a ninety percent reduction in cancer mortality after 15 chelation treatments with EDTA!

EDTA is a universally proven safe and effective chelator since it was discovered in the 1930's. It is called a chelator because it binds to toxic heavy metals and eliminates them from the body through the kidneys.

Someone on the Internet tied the Weissburg study on blood type and cancer to the 90% reduction of cancer from the Blumer and Cranton EDTA study together and derived the following chart that purports to show the decrease in risk if the different blood types have at least fifteen chelation therapy treatments.

CANCER RISK REDUCTION BY BLOOD TYPE

TYPE A BLOOD:		TYPE B BLOOD:	
Age 00 - 39: 08%	Risk reduced to 1%	Age 00 - 39: 04%	Risk reduced to 1%
Age 40 - 49: 18%	Risk reduced to 2%	Age 40 - 49: 06%	Risk reduced to 1%
Age 50 - 59: 29%	Risk reduced to 4%	Age 50 - 59: 08%	Risk reduced to 2%
Age 60 - 69: 43%	Risk reduced to 5%	Age 60 - 69: 14%	Risk reduced to 2%
Age 70 - 79: 52%	Risk reduced to 7%	Age 70 - 79: 22%	Risk reduced to 3%
Age 80 - 89: 53%	Risk reduced to 8%	Age 80 - 89: 26%	Risk reduced to 3%
		Age 90 - 99: 28%	Risk reduced to 4%
TYPE AB BLOOD:		TYPE O BLOOD:	
Age 00 - 39: 00%	Risk reduced to 0%	Age 00 - 39: 00%	Risk reduced to 0%
Age 40 - 49: 16%	Risk reduced to 2%	Age 40 - 49: 01%	Risk reduced to 1%
Age 50 - 59: 21%	Risk reduced to 4%	Age 50 - 59: 03%	Risk reduced to 1%
Age 60 - 69: 40%	Risk reduced to 5%	Age 60 - 69: 04%	Risk reduced to 1%
Age 70 - 79: 48%	Risk reduced to 6%	Age 70 - 79: 09%	Risk reduced to 2%
		Age 80 - 89: 19%	Risk reduced to 3%
		Age 90 - 99: 20%	Risk reduced to 3%

This data makes for an absurd assumption that cannot be applied across the board for all blood types simply because the patients in the EDTA study were statistically 45-50% blood type A, and we really do not know the frequency of the other blood types. But, there is a correct assumption we can make that was also made in the EDTA study:

Mortality from cancer was reduced 90% during an 18-year follow-up of 59 patients treated with Calcium-EDTA. Only one of 59 treated patients (1.7%) died of cancer while 30 of 172 non treated control subjects (17.6%) died of cancer (P=0.002). Death from atherosclerosis was also reduced. Treated patients had no evidence of cancer at the time of entry into this study. Observations relate only to long-term prevention of death from malignant disease, if chelation therapy is begun before clinical evidence of cancer occurs.

And this, dear folks, is good news.

REFERENCE:

1. Jakob Schmitt, Immunbiologische Untersuchungen bei Primaten; S. Karger, New York and Basel, 1968).
2. Blood type cancer rates taken from "The answer is in your blood type". S. Weissberg M.D. 1999 p. 78
3. Ninety percent reduction in cancer mortality after chelation therapy with EDTA. W. Blumer M.D., Elmer Cranton, M.D., Journal of Advancement of Medicine, Vol 2, 1989 numbers 1/2 pg. 183.