

# A Cure for Cancer? Can We Eradicate Most Cancer Using Commonly Used Drugs and Antibiotics that are Already Available and in Use Worldwide

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**Abstract:** *Throughout Australia, In Europe, the UK, and quite probably the USA and Asia, certainly many of the younger physicians and GP's in private practice and in hospitals use Prednisolone 25mg, off label, together with antibiotics such as Amoxicillin/Clavulanic acid with Roxithromycin and other antibiotics successfully, for treating severe pneumonia and bronchial infections. What is being achieved in these treatments in reality is the breaking down a dual walled, Gram-negative bio-film. So that these antibiotics are then able to eliminate infection. Their experience is by word of mouth and practice. Prednisolone can and does break down the protective bio-film, and allows antibiotics to clear these infections.*

**Keywords:** Cancer, Covid 19, Bio-film, Prednisolone, Vancomycin

**To understand**, what a cancer is in general terms is necessary, to understand the function of Gram-negative biofilm within our body.

**Most cancer** exists because modern medicine has failed to understand that Gram negative Bio-film protects cancer and all internal infections from all current antibiotics just as it protects a Covid 19 infection on our lungs.

**Bio-film**, is an active part of our immune and defence system, and it is a grouping of prokaryotes which are single cell organisms, they are very small cells, similar in construction to mitochondria. They start life as planktonic prokaryotes. And when instructed by the brain can intelligently bring together a complex structure of fungi, algae, free (extra cellular) DNA, RNA and yeasts of the candida strains to create a polysaccharide film.

Ref 1. An Introduction to Bacterial Biofilms and Their Proteases, and Their Roles in Host Infection and Immune Evasion. Ref 2. Three faces of bio-films: a microbial lifestyle, a nascent multicellular organism, and an incubator for diversity.

**This film**, develops and becomes an inter-organised network which has its own inter-communication system and is able to travel, protect, contain and isolate tumorous and inflamed areas with its developed gram negative, polysaccharide layer. So efficiently that all material, hormones, drugs and antibiotics are denied access to the protected tissue.

**Bio-film**, is a two way protective system and protects adjacent tissue and cells from the affected tissue and cells.

**Bio-film**, is an integral and functioning part of our natural inbuilt defence system and is activated by our brain via our prokaryotic cells which, when called upon by the endocrine, is able to form a complex, gram negative dual walled organism with an impervious polysaccharide layer over internal inflammations and lesions. It is Bio-film, which has so far denied the medical profession of a viable treatment and cure of cancerous lesions and many other conditions such as covid infections. As its function and the function of the

prokaryotes have not been properly or fully studied by medicine nor understood.

**It is however**, Bio-film that protects these infections whether they are a cancerous or a covid 19 infection on the lungs and as no antibiotics currently available are able to penetrate their impervious dual wall structure dual walled structure. The infection continues.

**The Gram negative**, (double walled) film can be and is broken down by the prednisolone so that a strong, gram positive antibiotic such as vancomycin can then be effective in treating internal lesions and lung conditions. There are no existing Gram negative antibiotics.

**The combination** of prednisolone orally with iv vancomycin or vancomycin together with prednisolone intravenously is reasonably well tolerated. The prednisolone works well breaking down the bio-film so that vancomycin can treat and heal the lesion. Dosage of the prednisolone must be continuously sufficient to break down the biofilm so that the vancomycin can be effective.

**Although** in real terms, cancer and covid require the strength of vancomycin as an antibiotic, remembering also that the re-establishment of the bio-film is very quick once the available prednisolone availability declines.

**However**, the half-life of prednisolone must be seen to be between 2 and 4 hours maximin in my experience and using it together with Vancomycin. There must be sufficient prednisolone in the blood stream continuously for the vancomycin to achieve its goal efficiently. I have trialled this action personally on three separate occasions in hospitals.

**Progesterone** should be taken during treatment and subsequent to the above treatment to avoid re-infection (see ref 3)

## Declaration

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