tumor shrinking and long-term survival in patients with advanced cancer, which is encouraging. However, larger studies are needed to confirm these findings. Cancers that have been studied in clinical trials include brain cancers, head and neck cancers, lung cancer, multiple myeloma, and mixed advanced cancers. Case reports have been published for leukemia, non-Hodgkin's lymphoma, colon cancer, stomach cancer, melanoma, angiosarcoma, neuroendocrine pancreatic cancer, kidney cancer, and thyroid cancer.

Only a handful of small studies and case reports have looked at DCA as a treatment for cancer. Some clinical trials reported reduction or stability in tumour size with the use of DCA, but not all patients responded to the treatment. The only randomized controlled trial was in patients with advanced head and neck cancer. This study found that although more people treated with DCA responded well to their cancer treatment (I.e., tumors shrunk), there was no difference in how long people lived compared to people who did not receive DCA. Several case reports demonstrated

inhibiting an enzyme called pyruvate dehydrogenase kinase. In doing this, DCA may promote cancer cell death.

Is DCA safe?

DCA is generally safe, but there are times when DCA should not be used. It should not be used in