

# Literature search and selection criteria for identification of clinical studies on anthroposophic mistletoe therapy

## Search strategy

We used a systematic process to search the following databases for clinical trials: AMED, Biosis Previews, Cinahl, Cochrane Library (Cochrane Database of Systematic Reviews, Cochrane Controlled Trials Register, The NHS Economic Evaluation Database, Health Technology Assessment Database), Embase, Medline/Premedline, NLM Gateway, Science Citation Index, National Centre for Complementary and Alternative Medicine, private databases; from inception of these databases to September 2005 using the terms (ANTHROPOS? OR MISTLETOE OR VISCUM? OR MISTEL? OR ISCADOR? OR ISCAR OR HELIXOR OR ABNOBA? OR ISCUCIN OR ISOREL OR VISOREL OR ?SOREL OR WELEDA OR WALA) AND (STUDY? OR STUDIE? OR TRIAL OR EVALUAT? OR RANDOM? OR INVESTIG? OR COHORT? OR KOHORT? OR OUTCOME? OR REVIEW OR UEBERSICHT OR METANALYS? OR META(W)ANALYS?) The reference list from each potentially eligible study, relevant review article and textbook was checked, and experts in the field and manufacturers of mistletoe preparations were contacted for additional reports.

## Selection criteria for clinical studies

- **Study design:** Prospective comparative, retrospective comparative, single-arm cohort studies and case series.
- **Population:** study population with cancer, including cervical intra-epithelial neoplasm (CIN) and anal condyloma.
- **Intervention:** intervention group treated with anthroposophic mistletoe preparation (Iscador, Iscar, Helixor, Abnobaviscum, Isorel, Iscucin).
- **Comparison:** all control groups with the same diagnosis, i.e. patients receiving placebo, conventional treatment, other complementary therapies, or no treatment.
- **Result:** clinically relevant outcome (i.e. survival, disease-free interval, remission, relapse, QoL, or reduction of side effects or immune suppression during cytoreductive therapy); studies only investigating immunomodulation of safety of mistletoe therapy were excluded.
- **Study status:** the study had to have been completed, or an evaluable interim report had to exist.
- **Publication:** the study did not have to be published, but detailed data had to be available that could also be made available to third parties and external parties on request.
- **Publication language:** no restriction

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