Table 2: RCTs of garlic (Allium sativum) for cancer prevention

Source: Pilkington K, Ernst E, CAM-Cancer Consortium. Garlic (Allium sativum) [online document]. November 2018.

| First author, year (ref) | Study design | Patients | Experimental treatment (duration) | Control intervention | Main outcome measures | Main results |
|--------------------------------|---|---|---|---|--|---|
| Tanaka 2004 (49) | 2 parallel groups, double-blind | 51 patients with colorectal adenomas | Aged garlic extract, daily dose – 2.4ml extract (6 capsules) (12 months) | Normal garlic extract, daily dose = 0.16ml extract (as an indistinguishable placebo) | Number of adenomas after 12 month therapy | RR of having at least one new adenoma was 0.71 favouring the experimental treatment |
| Li 2004 (16) | 2 parallel groups, double-blind | 5033 volunteers at high risk of gastric cancer | 200mg synthetic allitridum/day + 100μg selenium every 2 nd day for 1 month each year during 1989- 1991 | Placebo | Risk of gastric cancer during 10 year follow-up | Significant risk-reduction in experimental vs control group |
| Ishikawa 2006 (56) | 2 parallel groups, double-blind | 50 patients with inoperable colorectal, liver or pancreatic cancer | Aged garlic extract (4 capsules/day) (6 months) | Placebo | Quality of life | No inter-group difference |
| You 2006 (18) | Double-blind, factorial design with 12 parallel groups | 3411 volunteers after testing for H.pylori | 400mg aged garlic* extract and 2g garlic oil twice daily 7.3 years) | Placebo | Prevalence of precancerous gastric lesions | No inter-group difference |

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|--------------------------------|---|--|---|-------------------------|--|--|
| Ma 2012 (51) | As above (14.7 year follow-up of above trial) | 3365 (as above) | As above | As above | Gastric cancer incidence and mortality | Non-statistically significant reduction |
| Gatt 2014 (52) | 2 parallel groups, double-blind | 95 patients with confirmed diagnosis of hematologic malignancies requiring chemotherapy (either newly diagnosed or previously treated). | 900 mg a day in 2 divided doses of 450 mg active compound (allin 9.9 mg, allicin 4.5 mg) purchased from a commercial herbal manufacturer | Placebo | Patients with haematological malignancies at risk of chemotherapy-related febrile neutropenia (FN) | Garlic extract was safe and did not reduce FN risk in the entire cohort, but yet appeared to exert a protective effect in the lower-risk subgroup |

* factorial design also included vitamin C+E supplements and antibiotic