

Humlegaarden



Advanced Prostate Cancer

A 60 year old Norwegian male, T.E., was hospitalised on the 25th August, 2002, with symptoms of spinal cord compression with slight paralysis of both legs and reduced skin sensitivity from the breastbone to both knees.

An advanced prostate cancer was found with multiple metastases in the upper thoracic spine and the left pelvis, with a danger of a fracture there. The cancer considerably affected the marrow of the thoracic vertebra No. 2 with the resulting spinal cord compression. On the 29th August both testicles were removed and the patient had radiation on the upper part of the thoracic spine and the left pelvic region.

He left the hospital on the 11th September with a walking aid and started physiotherapy.

The patient came to Humlegården on the 25th November 2002 and stayed for 3 weeks. He started on the mistletoe brand Helixor A and our various other therapies and was able to do without the walking aid during his stay. He continued with the Helixor injections after his return to Norway and we know from our last contact with the patient on 31st August 2003 that he still takes Helixor A injections, 50mg twice a week. He now enjoys full muscle power in both legs and has normal skin sensitivity.

PSA was 7,6 in August, 2002 and is now 0,03. The non-specific tumour marker ferritin with a normal range up to 660 was 1325 during his stay at Humlegården and this is now down to 309.

Conclusion: An advanced prostate cancer patient with spinal cord compression and a threatening fracture of the pelvic region, goes into complete remission during a combination of traditional and complementary treatments.