



Brain tumor of a young girl

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The patient K.A.A was born in June 1970. In May 1984 as a 14-year-old, she got problems managing right hand and foot. A CT scan shows a large deeply situated brain tumor, emanating from the left side of the brain stem and pushes one of the brain cavity to the right. Operation or biopsy is not possible, and the patient receives radiation 25 times from 21 June to 27th July 1984. The patient feels well until late October 1984, when she experiences headache, dizziness, nausea and vomiting. The patient is hospitalized on 3 November 1984, and she has now developed a paralysis of the right-sided facial muscle in addition to paralysis of right arm and leg. A CT scan shows a fluid-filled cavity at the former tumor area, and it depletes the fluid, and check scanning, 12 November 1984 shows that the intracerebral cyst has shrunk considerably. Patients should, however, readmissions, 29 November 1984 because of increased intracranial pressure and acute CT scan shows now restored cyst and also shows that the tumor has now grown into the brain stem and brain cavity is expanded. Mon timber cyst on admission of sinks and drains fluid from the brain cavity of a valve. A so-called ventriculo - peritoneal shunt, which leads the fluid into the abdominal cavity. There are still ingrowth of the tumor deep in the brain stem, and this one can not do anything about. Parents are told that there are additional therapeutic options, and at this time was the fluid in the cavity come again, and there was diplopia. The patient is then on the 11th Humlegaarden January 1985. We begin our treatment with mistletoe Helixor A, like our usual homeopathic treatment of brain tumors with injections and drops. She followed this treatment for longer.

Pt. have had numerous donations of cyst fluid from the brain until 1996, when the moment. was operated at neurosurgical department in Odense, and here it was found that all tumor had disappeared. The reason for surgery was a new cyst formation within the brain and the cyst was removed, and there has since been no cyst formation, but some cases of malfunction of the valve, which meant that this was changed in 1998 so that the liquid went down the right ventricle, called a ventriculo-atrial

shunt. In 2007, this valve may be again moved back into the abdominal cavity.

We have finally seen the patient on the fifth Humlegaarden December 1998, where she was visiting. She lives in an apartment in Odense and is a happy girl. She has seizures occasionally and get this anti-epileptic medication. We've had a conversation with his father about pt. d. 6 / 5 2008: She has the usual right-sided paralysis, as she has had since 1984 but is a happy girl. Her seizures have been reduced to 2-3 mild seizures per month with some contractions that she can handle. We often see in cancer patients with long survival, they have a hobby that gives them good quality of life. Pt. collect key chains, and it was with great pride that she during the visit to Humlegaarden in 1998, said she had a collection of 2100 keychains.