

Humlegaarden



Malignant Tumour

Beginning in February 1985 Pt. T.C., (24 years old) felt tired and had lost weight (about 14 kg). He also had meal related vomiting, although nothing abnormal was found in his stomach. Gradually, he developed a thirst, followed by abundant urination and eventually there ensued a supposition about general hormonal insufficiency.

During hospitalization at the Rigshospitalet from September 9, 1985 to October 3, 1985 a CT-scan showed a tumour-like growth in the corpus pineal which was spreading along the walls of the lateral ventricles and down to 3 ventricle. A biopsy was taken from three places that showed a malignant cancer tumour (a scirrhus). A substitute treatment was started with Cortisone 25 mg daily, Eltroxin 0.1 mg, ADH as nose-powder, and testosterone injections every three weeks.

His tumour was inoperable and he was given radiation 29 times totalling 50 Gy. It was terminated on December 5, 1985. The tumour disappeared after 14 days of radiation.

Mr T.C. stayed at Humlegaarden in October 1985 and started mistletoe treatment with Helixor A s.c., plus treatment with Formica D 20, Arnica radix D 20, Epifysis D 3 and D 2, Kefalodor tbl. 5% and Agaricus muscarius D 6 dil, adding Chelidonium comp. and Vitis comp. tbl. The Helixor A dose was soon increased to 50 mg daily except on Sundays. Pt. was fine during radiation except for an Abboticin-treated pneumonia.

Helixordosis was reduced to 50 mg x 3 from October 1987 and the other injections 3 x weekly, but from October 1987 twice a week.

From September 1989 we arranged 14-day treatment breaks, and from January 1992 four-week breaks.

Our last contact with Mr. T.C. was on January 1999, and he is still going strong. He has been married to the same girl throughout the course of the treatment and they have a 6 years old son who is doing fine. Mr. T.C. is regularly going for check-ups at the hospital and CT-scanning has shown no sign of tumors. He now gets 50 ampules Helixor A of each 50 mg a year.