

Humlegaarden



NON-HODGKIN LYMFOMA AND RECTAL CARCINOMA

A Danish man, 64 years old, was diagnosed with rectal cancer (adenocarcinoma) in October 2005 and treated with resection. The following CT scan in December 2005 revealed enlarged spleen, big retroperitoneal lymph gland conglomerates, enlarged mesenterial lymph glands and enlarged lymph glands in the groins. Biopsy from one of the lymph glands in the groin showed follicular lymphoma grade I-II, later changed to grade IV b.

The patient stayed at Humlegaarden in three weeks in January 2006 and was started on injections with the mistletoe-compound Helixor P and our usual schedule for lymphomas with injections of Colchicum, Capsicum, Astragalus and Icelandic moss (*Cetraria islandica*). Also with LDN (low dose naltrexone) and the angiogenesis inhibitor Celebrex. A few weeks after the departure we changed him to the mistletoe-compound Iscador P, which he better tolerated.

After two bloodtransfusions he started chemotherapy with CVP and the antibody Rituximab on the 2nd march 2006, and a CT scan in the beginning of May showed a mixed response with slight reduction of the retroperitoneal lymph nodes, but also new lymph nodes in the armpit and groins. The spleen was also bigger.

The patient now was treated with 6 R-CHOP treatments, the last time 27th July 2006. CT scan showed reduction in the tumorload in June and August 2006 and Rituximab was continued as maintenance therapy every 3rd month until February 2007.

There is a well-known tumormarker for lymphomas, called beta-2-microglobuline, with normal range in the patient's hospital of 84-180. In the beginning of January 2006 this marker was 455, and in the middle of February before start of chemotherapy it was 852. In the middle of March it was reduced to 666, but one week later it was 1035, which can be due to the phenomena called surge or flare up (see under tumormarkers). Since then it has been gradually falling, and the last measurement on 16th September 2008 showed 211 (almost normal). CT-scan 26th August 2008 showed no abnormalities.

Apart from a depression in July 2006 which quickly was resolved the patient has enjoyed a perfect health during the whole period and was very fine at our latest contact with him 23rd September 2008. He has been continuing all the above treatments on which he started in Humlegaarden January 2006.