



Ovarian cancer responds well to complementary treatment

16-02-11

A Danish woman born 1954 is diagnosed with ovarian cancer in August 2007. She has a CA-125 of 6000 and a 10 x 15 cm big tumor in the right ovary. She is operated on the 18th September with removal of uterus, ovaries, the fallopian tubes and omentum. Histology showed serous adenocarcinoma, stage 1C. Then experimental treatment with Avastin and Carboplatin, x 6 from 17.10.07 to 30.01.08. Then she continued with Avastin alone x 10 until the end of April 08, but had to stop because of complaints from muscles and joints.

During the autumn of 2008, the CA-125 started to rise, and 26.11 it was 45. The small intestine now has carcinosis appearance and during laparoscopic biopsy 10.12 tumor cells are found in the peritoneal fluid (ascites) and metastasis in a process near the liver. CA-125 rises to 60 and the patient is now given 5 series of Taxol/carboplatin until 3.4.2009, where the CA-125 has fallen to 13. The chemotherapy now was stopped, and the patient was told that she has a chronic disease. Since then the patient has not been given any conventional chemotherapy.

In the beginning of September 2009, the patient arrives in Humlegaarden, because she did not want to sit passively at home waiting for the CA-125 to rise again. We start treatment with the mistletoe compound Helixor M in increasing dosage together with LDN 4,5 mg daily (low dose naltrexone), but as the marker CA-125 is found to be 31 in the beginning of October, we add low dose chemotherapy with cyclophosphamide 50 mg daily to the treatment. In the middle of March 2010 we stop the cyclophosphamide treatment because everything was fine. However, the CA-125 goes to 36 in June (without our knowledge) and to 73 in the beginning of November 2010.

A CT scan now shows a retroperitoneal process, which has grown to 36 mm from 16 mm in March, and two more processes are suspected in the abdomen. The patient is coming in the consultation 18.11.10, and we resume the cyclophosphamide treatment with 50 mg daily and supplement with the diabetes remedy Metformin 500 mg two times daily (working well in cancer), and with the angiogenesis inhibitor Celebrex 200 mg 2 x daily. We also increase Helixor dosage to 200 mg every other day.

Already on 21.12.10 a PET-CT scan shows that the tumor is reduced to 23 mm – otherwise normal findings except for a very small gland in the left groin.

At our latest contact with the patient on 16.2.2011 she feels very fine. She attends a fitness center 4 times per week, and the CA-125 on the 7.2.2011 is

20 and therefore again in the normal areas.

At the oncology department they call her sometimes a mystery and sometimes a miracle.