



Ovarian cancer – Liver metastases disappear

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A Danish woman born in 1943 was diagnosed with ovarian cancer in February 2006 with a CA-125 at 13.351 !! Normal range < 35.

The patient was operated on the 13th March 2006 with hysterectomy and removal of ovaries, omentum and lymph nodes. The primary tumors were in tuba uterinae: 20 x 20 x 25 cm in the right tuba and 5 x 6 x 6 cm in the left tuba, which were also removed. Carcinosis elements on the liver and a 3 x 4 x 1 cm big tumor at the right lobe of liver were not removed.

Histology showed adenocarcinoma stage I C gr. 2.

After the operation the patient was treated with 8 series of Taxol and Carboplatin, and in September 2006 the CA-125 was reduced to 30. After this treatment the patient was feeling fit and the CA-125 was further reduced to 11.

In October 2008 the CA-125 rose to 21 and in January 2009 to 72. PET-CT shows 1- 2 foci in the liver, although the biopsy could not confirm this. The patient was then treated with Vorinostat 400 mg daily for 14 days and also with Taxol and Carboplatin. After 2 series the patient stopped with Vorinostat and Taxol because of allergic reactions, but two treatments more were given with Carboplatin, the last time on 2.6.2009. Mid-April CA-125 was 44, and primo June 12. The patient was now given a treatment pause, but decides to come to Humlegaarden on a 3-week stay from the 22nd June 2009.

She was treated with the mistletoe compound Helixor M in increasing dosage and low dose metronomic chemotherapy Cyclophosphamide 50 mg daily and later with 50 mg x 2 daily. Also with DCA 11 mg per kilo body weight daily. She had local hyperthermia every other day with the Oncotherm machine and Rehatron daily.

Since then the patient has been in a fine general condition.

Swimming and using the fitness centre.

In September 2009 the liver-process was unchanged 2,4 x 2,7 x 2,2 cm and CA-125 18.

During the spring 2010 the CA-125 first rises to 99, and then to 115 and on the 21.6.2010 to 159 and we now add, the anti-hormone Tamoxifen 20 mg daily and Metformin 500 mg x 2 (diabetes agent which has shown to have some very interesting effects on cancer) to the treatment plan. We increase the Celebrex-dose to 200 mg x 2 and Helixor-dose to 400 mg every other day. On this treatment

plan the CA-125 is reduced to 26 mid-September 2010 and an ultrasound shows that the liver is normal.

At our latest contact with the patient 27.1.2011 she is doing exceptionally well. She is going to the gym 3-4 times a week. The CA-125 is now 18.

Conclusion: This patient, who is always very happy and very positive (she was declared Patient of the Year in 2009), exercise very much. She is today cancer free with normal tumor markers. The combination of high doses of mistletoe (Helixor), metronomic chemotherapy with Cyclophosphamide, Metformin, the anti-hormone Tamoxifen, the angiogenesis-inhibitor Celebrex, and the mitochondrial agent DCA documents the importance of combination-treatment.