

# Humlegaarden



## Ovarian Cancer

### – Controlled by Exercise, High Dose Viscum Album, Vitamin C and Melatonin

A Danish nurse, 57-year old, was operated in May 1995 for stadium III ovarian cancer with hysterectomy, and the removal of ovaries, appendix and omentum. Serous cystadenocarcinoma. Big metastases were found in the omentum and close to the ascending colon with metastases also at peritoneum. 5 liters of ascites were removed before and during the operation. Residual tumour tissue was left in the abdomen.

Six series of chemotherapy with Taxol and Carboplatin were given from June til October 1995, and in November a second-look operation was performed and no tumour tissue could be seen.

The tumormarker CA-125 starts to rise from November 1996 and in February 1998 a recurrence is found, 2 x 2 x 3 cm in the abdominal area close to rib No. 12. CA-125 was 183. From March 1998 she was treated with Taxol, Cisplatin and Gemcitabine, and this treatment was stopped in July 1998 after seven series.

In April 1999 the tumour marker CA-125 began to rise and in October 1999 a biopsy found there was a recurrence in the abdomen, and an explorative laparotomy by the end of October showed many more smaller tumors in the retroperitoneum, in the ileum and in the omentum.

Besides, there was a 2 x 3 cm big node close to the colon. The patient was started with Carboplatin treatment in mid-November 1999, but by mid-February 2000, new processes were found on the right side, while the CA-125 was decreasing. Six series of Carboplatin were given in all, the last on 4.4.2000. In mid-April the treatment was changed to Treosulfan capsules because of Carboplatin.

The patient received Treosulfan until June 2000. In July 2000 she went to Hammelburg, Germany, where she received regional chemotherapy with various chemo-substances, but she stopped with that in May 2001 because of rising tumor markers, and since May 2001 the patient has not received any chemotherapy. Since then the patient was treated with 25-50 gr. Vitamin C solution i.v., two times a week with palliative radiotherapy in February 2002 against a well-defined tumour process over the upper part of the vagina.

The patient came to Humlegaarden in May 2002 and began treatment with viscum album (the mistletoe preparation Helixor Mali), local hyperthermia and our other treatments. We also prescribed for her the anti-hormone Tamoxifen from August/September 2002, but changed that to the anti-hormone Femar 2,5 mg daily in mid November 2002.

She also started running 3-4 km every day in half an hour.

At our latest contact with the patient on the 21st November 2006 she was in a very fine general condition. Because of a slight artrosis in the left hip, she has

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shifted from running to biking and she is now biking long distances every week.

Her tumour marker, which was 3800 when she started complementary treatment is now 39, and her present medication is: Helixor Mali 600 mg. every other day, Melatonin 21 mg. daily, the antihormone Aromasin 25 mg. daily, and vitamin C – infusions three times per week.

She has also used sporadic local hyperthermias.

**Conclusion:** This case story not only illustrates the big importance of exercise in modern cancer treatment, but also the often awesome effect of combining different complementary treatments and, in this case, also with anti-hormones. Today she is 68 years old and has been an ovarian cancer survivor for almost 12 years.

The patient has not received any chemotherapy for more than 5 ½ years.