

Humlegaarden



Big Mediastinal Sarcoma

A 47 year old Danish woman contracted an irritating cough in the spring of 2000, and during the autumn she developed bronchitis and lung inflammation and was treated with antibiotics. She was hospitalized in November 2000 because her heart was enlarged with fluid in the pericardium (the heart sac), which was punctured, releasing 1½ liters of fluid.

At the same time a large tumor of 9 x 9 cm was found in the mediastinum (the space behind the breastbone and between the lungs). Also a 4 cm lesion along the right side of the heart was found, which had grown into the pericardium, and round infiltrations in both lungs. A biopsy showed a sarcoma (malignant fibrous histiocytoma). An operation was not possible, and neither was radiation considered a viable option.

Chemotherapy was started on the 5th January 2001 with doxorubicine, and the patient received 6 treatments until the 20th April. The patient had many side-effects and especially mucositis during the chemotherapy, and an evaluation in mid-May showed that the tumor size was unchanged. The pericardial fluid seemed to increase and the patient was punctured seven times until mid-May. The patient was offered no further therapy, so she chose our therapies and stayed at Humlegaarden from the 18th June until 9th July. We started her on injections with the mistletoe preparation Helixor and with Cetraria icelandica, which had an especially beneficial effect on sarcomas.

One liter of fluid was removed from the pericardial cavity in mid-July and in the beginning of October 2001, but later in October a window was made surgically in the pericardial wall so the fluid could be drained. Since then there has been no pericardial effusions, but the patient has been punctured two times for pleural effusions (in November 2001 and October 2003).

In January 2003 it was found that the metastases in the lungs were increasing in size, and this progression came after the patient stopped the mistletoe injections because she thought she was allergic. She returned then to Humlegaarden and had three whole body hyperthermias during the spring of 2003 and resumed her injections with mistletoe. Since then she has been following our program until January 2004, where she felt so well that she stopped her treatments. At our latest contact with the patient in July 2004, she told us she now is living a completely normal life.

This case story again demonstrates mistletoe's fantastic ability to arrest serious cancer tumour growth – in this case combined with the patients own braveness and creativity. We have several of her paintings hanging in Humlegaarden.

We were later informed that the patient died in May 2006.