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# **Adjunctive Treatment of Tumours by Milieu Cleansing, Isopathic Therapy and Stimulation of the Immune System**

**A Case Example**

**by Heinz-Dieter Bartels, Naturopath**

The patient, a lady of 52, attended my practice on 23<sup>rd</sup> January, 2002, following surgery for removal of a tumour at the splenic flexure of the transverse colon on 22<sup>nd</sup> August, 2001. Following a course of chemotherapy, computer tomography had revealed the presence of metastases in the liver (portal area and right lobe). Chemotherapy was then discontinued. The blood test showed absolute lymphocytopenia.

After consultation with the attending doctor, the adjunctive treatment was begun right away.

The patient's subjective state showed an improvement very quickly. In September of the previous year, the tumour marker, CAE, gave a reading of 3.5 mg/ml, rose to 6.8 on 15<sup>th</sup> January, 2002, and on 15<sup>th</sup> February had come down to 2.8. Sonography on 21<sup>st</sup> February, 2002 showed that the tumours had not increased in size, nor had they multiplied.

When treatment commenced, the blood and liver test results were far from normal. However, within the space of six weeks, they had normalised, the levels of erythrocytes and alkaline phosphatase being borderline.

### **Causes of the illness and its treatment**

The causes of the illness are primarily:

- toxic overload from the metabolism
- derailment of the milieu
- weakness of the immune system
- nutritional errors with a long history of intestinal disorders

The actual treatment had three phases:

- correction of lifestyle and milieu
- regulation of the basic functions and guidance of the symbiosis (intestines and blood) using isopathic treatment
- stimulation of the immune system with bacterial preparations and spleen peptides.

To relieve the metabolic overload, and also particularly the pressure on the hepatic function, a low-protein diet was begun, to last for at least six weeks. The patient kept strictly to this.

The fluid balance, and with it the fluid transport and exchange in the context of basic regulation, was substantially normalised by increasing the daily fluid intake to 2.5 – 3 litres predominantly of pure drinking water.

If required, enemas at body temperature were administered with an irrigator.

In order to normalise the acid-alkaline balance, ALKALAT and ALKALAN were given.

To correct mineral deficiencies of trace elements and vitamins, the patient was given high doses of supplements, particularly of Vitamin C. Brisk walks daily, lasting at least 2 hours, were prescribed, along with respiratory training.

Intestines, blood and liver were strengthened and activated using isopathic preparations which also restore symbiosis: MUCOKEHL, NIGERSAN, FORTAKEHL, SANKOMBI, EXMYKEHL and

PINIKEHL.

The immuno-biological stimulation was achieved by means of the bacterial preparations UTILIN 'S', UTILIN, LATENSIN, RECARCIN, and the spleen peptides Polyerga (Injectable, dragées). Alternatively, the preparation called REBAS could be used; this is a homeopathic preparation of Peyer's patches from the pig.

As already mentioned, the patient's mood and confidence very quickly improved. The credit for this should go to the recently discovered haemorphins in the spleen extract Polyerga, for their action is similar to that of endorphins, causing the patient to brighten up. This action is particularly beneficial in patients with tumours. As well as this, the haemorphins are said to be anti-inflammatory, pain-reducing, and inhibiting to metastases.

In my opinion, the decisive factor in the encouraging progress made by this patient was the combination of the above-mentioned measures and preparations, particularly the isopathic and immuno-stimulant ones along with the spleen peptides.

The pronounced exhaustion syndrome died down quickly; the body weight and lymphocyte count stabilised.

### Lifestyle adjustment and milieu structuring

1. Low-protein diet for at least 6 weeks to relieve pressure on metabolism.
2. Pure drinking water and green tea in place of usual beverages.
3. Sea salt and vitality-enhancing



substances: Vitacor Plus, Immunocell, Pro Lysin C, Vitamin C retard, with 3 tablets of each daily.

4. Movement in the form of two brisk walks daily, each lasting 1 hour.
5. Wholefoods, with no microwave cooking.
6. Alkalisiation with ALKALA T for 10 days, with 2 tablets twice a day in large quantities of hot water; subsequently, ALKALA N powder, one tsp. once a day.

#### Medication

1. UTILIN „S“ 6X capsules, one capsule once a month.

2. LATENSIN „low strength“ capsules, one capsule once a week.
3. SANKOMBI 5X drops, 5 drops once a day to be massaged in at the umbilicus or sniffed up the nose.
4. EXMYKEHL 3X suppositories and MUCOKEHL 3X suppositories in the evening on alternating days, for 3 weeks.
5. FORTAKEHL 4X capsules, PINKIKEHL 4X capsules and NIGERSAN 4X capsules in daily rotation, 1 capsule in the mornings.
6. Polyerga, 1 ampoule to be injected i.m. 3 times a week.

7. Polyerga dragées, one dragée 3 times a day on days when no injection was given.

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