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Intratumoral injections of viscum album mistletoe in malignant left inguinal large sarcoma

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Introduction: 40 year old male chinese patient presented with refractory LEFT inguinal large malignant sarcoma despite 3 times major resections surgeries with flaps repair but the tumour grew from 3cm to 7cm to 9cm to 13cm over 2 years of conventional treatment method, eventually ran out of options for recovery. Chemotherapy & Radiations Therapy was rejected by patient and there is tremendous amount of pain with venous return compromization (severe edema) of the left lower leg. At the verge of a complete below hip left leg amputations due to vascular emergency, a trial of Subcutaneous injection of viscum album started, with later IV and Intratumoral injections of helixor P was commenced.

Method: patient was started with subcutaneous helixor P injections 3 times per week. Ketogenic diet was advised & patient adopted lifestyle changes with modified gerson therapy at home as well. At end of second week, IV helixor was given at 50mg, 100mg, 200mg, 300mg, 400mg scheduled once per week tolerated well by patient. During the 4th week intratumoral injections was attempted with ultrasound guided spinal PENCAN 27G needle injection into left inguinal tumour regions. A total of 5 injections attempted over 30 days. Helixor P 100mg, 300mg, 400mg, 500mg, 500mg diluted to 10% volume per total tumor estimated volume (ultrasound scan estimation)

Result: Subcutaneous injections of helixor P at 50mg was enough to induce and maintain the clinical improvement of general well being of the patient. IV 400mg helixor P infusions escalating dose weekly, are tolerated well and patient began to have slight febrile reactions. Intratumoral injections of helixor P succesfully reduced the left inguinal tumour from 13cm gradually to a size of 5cm, which had never happened to patient tumor management past 2 years prior to Viscum Album Therapy. The tumour shrinkage occurs progressively over 6 months even after the last injection. The patient returns to his work and family members are happy that he need not need to go through left hip amputations.

Conclusion: Musculoskeletal tumour such as malignant sarcomas are usually poorly responsive to many conventional method of surgeries, radiation and chemotherapy. These usual method would cause severe surgical disfigurement even risking complete amputation of limbs at times. Repeating surgeries disrupt the vascularity, causing injuries to healthy flap donation area of the body, and destructions of the lymphatic network of limb circulations therefore worsening the post op recovery. A much more gentle therapy would be "herbal chemo" Viscum Album Helixor Mistletoe Therapy. The tumour reductions seems to be dose and duration/frequency of therapy dependant. In this special case, salutogenesis measurement were optimized with patient cooperation together with Viscum Album subcutaneous injections schedule. Tumour reduction & apoptosis acheived via combination of escalating dosage of intravenous infusions & intra tumoral injections of HELIXOR P is often very effective in large malignant tumours compromising vascularity of limbs hence preventing unnecessary amputations.

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