

Case Study

48 year old Caucasian female with LUMP IN HER LEFT BREAST
Secondary diagnosis – Class 3 MVP and Hypothyroidism



This patient is asymptomatic and had a normal class 2 mammogram three months prior to this discovery. There was a normal breast exam performed by her Gynecologist at that time as well. A repeated mammogram revealed a class 5 for probably malignancy. A biopsy indicated infiltrating ductal carcinoma. Tumor size was 1.5x1.0x1.0cm. In Situ Ductal Carcinoma (Comedo and non-Comedo types) comprised approximately 10% of the total tumor mass. Clean margins were not obtained thus a segmental mastectomy/axillary dissection/and sentinel lymph node biopsy was performed. Two of three lymph nodes were positive for microscopic metastasis. Medications – Synthroid and Calan. Drug allergies – Sulfonamides and Flagyl.

Patient proceeded with four courses of Adriamycin Cytoxan, but had an anaphylactic reaction to Taxol. Chemotherapy was discontinued and standard radiation therapy was completed. Follow up with Tamoxifen is non-productive in negative receptor cancers, which was the case for this patient. Failing to complete any courses of Taxol also complicated the situation for recurrence. **Her results from SpectraCell's micronutrient testing indicated deficiencies after Chemotherapy and Radiation:**

- | | |
|------------------------|-------------------------------------|
| 1) Vitamin B1 | 7) Total Antioxidant Function = 51% |
| 2) Vitamin B6 | 8) Vitamin B2 |
| 3) Magnesium | 9) Biotin |
| 4) Glutamine | 10) Choline |
| 5) Glutathione | 11) Asparagine |
| 6) Glucose-Interaction | 12) Calcium |

Based upon her deficiencies found, she was prescribed:

- 1) All of the above individual supplements
- 2) A good food grade Multi-Vitamin
- 3) B complex
- 4) Shaklee Protein controlled the Glucose-Interaction
- 5) Other antioxidants suggested were
 - a. Vitamin C as tolerated
 - b. Resveratrol
 - c. Vitamin E
 - d. CoQ10
 - e. Taurine
 - f. Green Tea
 - g. Serrapeptase
 - h. Ip6
- 6) Bio-identical compounded hormones were very beneficial in reducing sudden menopausal symptoms

In addition to the above treatments, nutritional and lifestyle modifications were recommended: walking 30-40 minutes 4 times a week, horse back riding when time permits, drink purified water and monitor diet for high fats and sugars.

Clinical Outcome:

The patient returned to work full time one month after cancer therapy. She is active and has remained well until present (2009). Her yearly micronutrient tests improved dramatically. Her most recent test, performed in January 2009, was normal.

Conclusion:

This is just one presentation of a serious illness that has been corrected with a standard of care and alternative therapy. Her physician does not believe that this patient would be cancer-free today if she had not been compliant with her follow up supplements, change in her diet, exercise regimen and stress reduction. SpectraCell's micronutrient testing was crucial in tailoring her supplemental regimen. Her physician considers this particular test a "cornerstone" in the arsenal of laboratory tests available to help my patients overcome acute and chronic diseases.



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