Issels Immuno-Oncology

Advanced Progressive Osteoclastoma of the Sacrum

Complete Long Term Remission of an Advanced Progressive
Osteoclastoma of the Sacrum through the Immunobiological Issels
Treatment without further Standard Treatment.

P. N. -F., Born 1935, File 125/67

4 years survival, tumor not palpable, well being, no recurrence, patient working as a sociologist and author.

TREATMENT HISTORY First Diagnosis | Standard Treatment | Issels Treatment | First Diagnosis

April 1957

Diagnosis: Sacral tumor. Histology: Giant cell tumor (osteoclastoma) Grade

II. Westminster Hospital London/England.

Treatment: Megavolt radiation therapy.

Result: Considerable improvement.

Standard / Conventional Treatment

February 1961

Local and Abdominal First Recurrence.

Treatment: Chemotherapy.

No remission.

<u>June 1961</u>

Progression of tumor growth.

Treatment: Other combination of chemotherapy.

Partial remission. Stop of growth.

April 1964.

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<u>April 1964</u>

Renewed progressive growth of residual disease.

Findings: Enormous hard, rock-like mass extending from sacrum forward, filling the pelvis, bilateral hydro-ureters, fecal incontinence, paralysis of sacral nerve roots. (Westminster Hospital, London/England) Partial resection. Patient refuses removal of sacrum.

Histology: Osteoclastoma Grade II.

January 1967

Renewed bilateral urethral obstruction by the tumor, bilateral obstruction of kidneys, danger of uraemia.

No Standard Treatment. Patient refuses removal of sacrum.

Issels Treatment

February 1967

Admission exam: 10 cm wide tumor with two knots in the left hypogastrium (lower abdomen) adherent to the posterior pelvic wall. Urea significantly increased.

February to June 1967

Issels Treatment: 18 weeks of immunobiological in-patient treatment with 6 months of outpatient follow-up treatment.

Discharge exam: Tumor has decreased in size, freedom of pain, urea normal, well-being.

Follow-up until 1971

4 years survival, tumor not palpable, well being, no recurrence, patient working as a sociologist and author.

DISCLAIMER: No claim is made that patients with similar diagnosis and/or treatment(s) will respond to the same extent as the patients shown. All testimonials have been provided voluntarily to share a patient's experience with the Issels Treatment and their state of health at the time. Some patients may have passed away due to age or disease. None of these patients received compensation or are related to the Issels Treatment Centers.