# **Breast Cancer**

This patient's first tumor marker was 185.7 revealing already metastasized cancer cells and a lumpectomy found three cancerous lymph nodes.

# In just 4 weeks-

- ✓ Tumor Marker Dropped 106.9 points!!!
- ✓ Patient Is Elated!!

- ✓ Refused Chemo & Radiation Treatment Due To Outstanding Results
- ✓ Blood Pressure Consistently Improving

# **Initial Symptoms-**

- ✓ Breast Cancer-Ductal Carcinoma ✓ High Blood Pressure taking
  - √ High Blood Pressure taking
    Norvasc and Hydrochlorothiazide

✓ Hot Flashes

✓ On Fosamax for Osteoporosis

"Between May 4th and August 17<sup>th</sup> of 2007, the cancer marker dropped a total of 156 points! The results speak for themselves – you do not have to pollute your body with radiation and chemotherapy treatments to reduce cancer cells."

-Dr. Van D. Merkle

### \*\*\*PATIENT UPDATE!!!\*\*\*

11-02-09 - With her continued hard work we have seen a new tumor marker low with her CA27.29 reaching 16.30! She has done a fantastic job at reaching optimal health and I wish her all the happiness in the world! She deserves it!!

**05-04-07** - Diagnosed with breast cancer just 2 months ago at 48-years

#### **Patient Profile:**

old, this patient faced a very tough decision. Doctors said she had ductal carcinoma, a very common type of breast cancer in women where the cancer cells develop within the milk ducts of the breast then slowly spread into surrounding tissue. They recommended surgery/biopsy and placed her on the schedule for late May. Looking for another option, the patient came to Back To Health Center. At the time of her initial visit, she weighed 123 lbs at 5'6" and her blood pressure was 120/76. The patient took the Hormone Replacement Therapy drug Premarin for nine years after having a partial hysterectomy but

immediately stopped after the cancer diagnosis. She used to be a regular smoker, but quit within the last 5 years. Right now it takes two medications (Norvasc and Hydrochlorothiazide) to control her high blood pressure and the patient is also on

Fosamax for Osteoporosis. She was using a few basic vitamins, but during our first meeting I made several recommendations to aid her body in fighting cancer and then immediately sent her to the lab for a tumor marker to see how far her cancer had progressed. In addition to breast cancer and high blood pressure this patient also suffers from hot flashes and night sweats.

### Patient's tests results:

**05-05-07** - Obviously the breast cancer tumor marker CA 27.29 is too high at 185.70. Several other areas also need improvement such as Glucose and Hemoglobin A1C. The low T7 indicates a low functioning thyroid which can slow digestion, reduce energy and lower the immune system. We can see signs of anemia in the low red blood count, hemoglobin and hematocrit. A low white blood count and high Platelets may be due to an infection and are additional signs of a decreased immune system. Finally the Creatine Kinase, LDH and C-Reactive protein are all a little high indicating chronic tissue injury or inflammation.

#### **Results of Initial Blood Test:**

		Current Result	Current Rating	Prior Result							
Test Description	Date:	05/04/2007	Kathiy	Result	Delta	ш	ealt	hv	CI	inic	al
	Date.	100.00			Denta	80.00	cuit	95.00	65.00		99.00
Glucose		5.80	HI			4.60	-	5.40	4.80		5.90
Hemoglobin A1C (Gly-Hgh)		4.40	hi			4.00	-	6.00	2.40		8.20
Uric Acid		11.00	Opt			13.00	-	18.00			26.00
BUN (Blood Urea Nitrogen) Creatine Kinase		146.00	lo hi			64.00	-	133.00		-	204.00
LDH		180.00	hi			120.00	-	160.00		-	250.00
SGOT (AST) (AST)		27.00	hi			15.00	-	26.00	6.00		40.00
SGPT (ALT) (ALT)		18.00	Opt			15.00	-	26.00			55.00
GGT		35.00	Opt			22.00	-	39.00	6.00		65.00
Total Cholesterol		238.00	Орі			140.00	-	170.00		-	199.00
Trialyceride		83.00	Opt			80.00	_	115.00	10.00		149.00
HDL Cholesterol		102.00	HI			50.00	_	55.00			59.00
VLDL Cholesterol		17.00	Opt			5.00	_	20.00	4.00		40.00
LDL Cholesterol		119.00	ΗI			50.00	_	75.00			99.00
Total Cholesterol / HDL Ratio		2.30	Opt			0.00	_	4.00	0.00		5.00
Triglyceride/HDL Ratio		0.81	lo lo			1.00	_	2.20	0.50		4.00
T4 Thyroxine		8.40	Opt			7.10	_	9.00	4.50		12.00
T3 Uptake		30.00	Opt			29.00	_	35.00	24.00	_	39.00
T7 Free Thyroxine Index (FTI)		2.50	lo lo			2.61	_	3.60	1.20	_	4.90
White Blood Count		4.90	lo			5.00	_	8.00	4.00	_	10.50
Red Blood Count		4.47	lo			4.50	_	5.50	4.10	_	5.60
Hemoglobin		12.90	lo			13.30	_	15.20	11.50	_	17.00
Hematocrit		37.70	lo			39.50	_	47.00	34.00	_	50.00
MCV		84.00	lo			85.00	_	97.00	80.00	-	98.00
MCH		28.80	Opt			28.10	_	32.00	27.00	_	34.00
MCHC		34.10	hi			33.00	-	34.00	32.00	-	36.00
Platelets		297.00	hi		[	175.00	-	250.00		-	415.00
CRP C-Reactive Protein		4.30	hi			0.00	-	1.50	0.00	-	4.90
CA 27.29		185.70	HI			0.00	-	0.00	0.00	-	38.60

Blue = clinically very high or clinically very low

 $Red = clinically \ high \ or \ clinically \ low$ 

Yellow = a little high or a little low; this can be considered a warning sign that the value is not optimal.

We wanted to see what toxins and heavy metals may be binding up processes in the body, so the patient did a chelating test using the agent DMSA. The column labeled "Pre-Chall" shows the amount the body is able to eliminate on its own. The column labeled "DMSA" is the level of toxic metals excreted with the help of a chelating agent. Both Lead and Mercury increased significantly with this test.

#### **Results of Chelation:**

Results of Cheration.							
	Current	Current	Prior				
	Result	Rating	Result				
Test Description Date:	05/18/2007		05/12/2007	Delta	Healthy	Clinical	
Agent	DMSA		Pre-Chall				
Dose	1000 mg						
Interval	6		6				
Toxic Elements							
Aluminum (UA)	0.00	Opt	53.00	0	0- 12.00	12.01- 2	25.00
Antimony (UA)	0.00	Opt	0.20		0- 0.50	0.51-	1.00
Arsenic (UA)	34.00	Opt	42.00		0- 70.00	70.01- 13	30.00
Lead (UA)	62.00	HI	1.10	8	0- 4.00	4.01-	5.00
Mercury (UA)	9.70	HI	1.80	8	0- 3.00	3.01-	4.00
Nickel (UA)	1.00	Opt	7.70	☺	0- 6.00	6.01- 1	12.00

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## **Doctor analysis:**

**05-18-07** - Cancer feeds on sugar, so reducing sugars and carbs in the diet will not only keep this patient out of the diabetic range but potentially slow cancer cell growth. There are several markers in the blood that show a lowered immune system (low thyroid, low white blood count and high Platelets) which we need to boost to allow the patient to efficiently ward off cancerous cells. Interestingly, most cancers are seen in people with a low thyroid function because the thyroid controls the basal metabolic rate, which is the speed at which the body heals and repairs itself. Another result we will be watching is the LDH which currently shows a high level of cell destruction likely due to cancer. We also need to reduce the anemia because it interferes with the body's ability to transport oxygen and nutrients. Our goal is to correct the multiple small problems in the body so the immune system can focus exclusively on fighting back cancerous cells.

Another thing we must consider is the high level of toxic elements Lead and Mercury. In the chelation test the patient's Lead value jumped from 1.1 to 62 showing the body cannot easily eliminate this toxic metal on its own and over time this allowed Lead to slowly build to a very high level. This load needs to be reduced because Lead is stored in the bone and causes calcium and selenium depletion. The patient is taking

Fosamax for Osteoporosis and a prescription women's vitamin called Encora which contains high doses of Calcium and Vitamin D. These drugs were prescribed to help strengthen her bones, but neither will correct the cause of calcium depletion which appears to be a heavy Lead load. By eliminating this toxic element, her need for Fosamax and Encora should diminish.

Mercury climbed from 1.8 to 9.7 once again showing the body's inability to eliminate heavy metals. This toxin depletes selenium (a major anti-oxidant), zinc (boosts immune system) and copper (a cofactor for superoxide dismutase, an important antioxidant). It's important to eliminate as much of these two toxic elements as possible because they take vital nutrients out, binding up healing processes in the body which gives cancerous cells a better chance at thriving.

About a week after her first blood test, the patient had a second tumor marker done. The number dropped <u>45.7 points</u> without ANY medical intervention – no surgery/biopsy, chemo, radiation or hormone therapy! Just by taking the vitamins I recommended during the initial consultation she was able to improve. I updated her vitamin regimen based on the complete blood test, placed her on a chelation schedule to eliminate heavy metals and ordered a retest of the CA 27.29 in two weeks.

#### **Results of 2nd Tumor Marker:**

	Current	Current	Prior					
	Result	Rating	Result					
Test Description Date:	05/11/2007		05/04/2007	Delta	Healthy		Clinical	
CA 27.29	140.00	HI	185.70	0	0.00	- 0.00	0.00 -	38.60

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O5-24-07 - The patient received the results from her lumpectomy and three out of three lymph nodes returned as positive. Daily radiation treatments were recommended for six weeks to be followed by rounds of chemo. Then doctors recited the news, "Based on these results, if you complete the cycles of radiation and chemo you probably have 8-10 years to live." The oncologist thought this was a fairly good prognosis but at 48-years old, the patient justifiably disagreed! She declined their recommendations and continued with supplemental treatment.

### **Patient assessment:**

**06-07-07** – After just <u>four weeks</u> under our care, the patient's CA 27.29 plunged a total of 106.9 points! This is incredible progress and shows that the patient is sticking to the diet and consistently taking all the recommended supplements. When battling

diseases such as this, there is no room for cheating. Patients must make the lifestyle changes necessary to keep them alive, because with cancer it is absolutely a matter of life or death.

#### **Results of 3rd Tumor Marker:**

Test Description	Date:	Current Result 06/07/2007	Current Rating	Prior Result 05/11/2007	Delta	Healthy		Clinic	al
CA 27.29		78.80	HI	140.00	0	0.00 - 0.	00	0.00 -	38.60

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O6-29-07 - Moving out of the blue zone, a recheck of the CA 27.29 three weeks later showed continued improvement with the marker coming down an additional 33 points! The patient could not be happier and is thankful she did not follow the drug protocol recommended by doctors. We kept the vitamin list the same as it was clearly working and continued with weekly chelation treatments.

#### **Results of 4th Tumor Marker:**

Test Description	Date:	Current Result 06/29/2007	Current Rating	Prior Result 06/07/2007	Delta	Healthy	,	Clinic	al
_		45.80		78.80	©	0.00 -	0.00	0.00 -	38.60

Blue = clinically very high or clinically very low

Red = clinically high or clinically low

Yellow = a little high or a little low; this can be considered a warning sign that the value is not optimal.

**07-16-07** –Two weeks later, the CA 27.29 moved from red to yellow showing that while the tumor marker is still a little high, it is no longer above the clinical range.

#### **Results of 5th Tumor Marker:**

	Test Description Da	Currer Resul e: 07/16/20	t	Current Rating	Prior Result 06/29/2007	Delta	Н	ealthy	,	Clinic	cal
ı	CA 27.29	35.50	)	hi	45.80	0	0.00	_	0.00	0.00 -	38.60

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Yellow = a little high or a little low; this can be considered a warning sign that the value is not optimal.

08-17-07 - We retested the tumor marker earlier this month on 8-06 and it showed consistent improvement dropping to 30.7. In addition, the patient is now off both Fosamax and Hydrochlorothiazide and has reduced her dosage of Norvasc to just one pill per day. We checked her Blood Pressure and it is better now at 118/74 than it was in May with the help of two prescriptions!

The patient saw her oncologist this month who took a tissue biopsy to determine if the cancer would be likely to return. The tissue results returned as "normal" but doctors want to do an

MRI next month. She also had a CAT scan with dye last week on her head, chest and abdomen which I advised may cause the CA 27.29 to increase slightly. Doctors saw a small dot on the lungs and will retest this in three months. I decided to run a second full blood panel to check the CA 27.29 and other areas of concern such as the low thyroid. Since a dot appeared on the CAT scan, I also ordered another tumor marker called CA 19-9 to determine if the cancerous cells may have spread into other areas of the body.

### **Results of 2nd Complete Blood Test:**

	Current	Current	Prior							
	Result	Rating	Result							
Test Description Date	te: 08/17/2007		05/04/2007	Delta	He	ealt	hy	Cli	inic	al
Glucose	94.00	Opt	100.00	0	80.00	-	95.00	65.00		99.00
Hemoglobin A1C (Gly-Hgh)	5.80	hi	5.80	⊜	4.60	-	5.40	4.80		5.90
Uric Acid	5.10	Opt	4.40		4.10	-	6.00	2.40		8.20
BUN (Blood Urea Nitrogen)	12.00	lo	11.00	0	13.00	-	18.00			26.00
Creatine Kinase	90.00	Opt	146.00	0	64.00	-	133.00		-	204.00
LDH	179.00	hi	180.00	0	120.00	-	160.00		-	250.00
SGOT (AST) (AST)	26.00	Opt	27.00	0	15.00	-	26.00		-	40.00
SGPT (ALT) (ALT)	19.00	Opt	18.00		15.00	-	26.00		-	55.00
GGT	27.00	Opt	35.00		22.00	-	39.00		-	65.00
Total Cholesterol	223.00	HI	238.00	0	140.00	-	170.00		-	199.00
Triglyceride	125.00	hi	83.00	8	80.00	-	115.00	10.00		149.00
HDL Cholesterol	88.00	HI	102.00	©	50.00	-	55.00	40.00	-	59.00
VLDL Cholesterol	25.00	hi	17.00	8	5.00	-	20.00	4.00	-	40.00
LDL Cholesterol	110.00	HI	119.00	☺	50.00	-	75.00	6.00	-	99.00
Total Cholesterol / HDL Ratio	2.50	Opt	2.30		0.00	-	4.00	0.00	-	5.00
Triglyceride/HDL Ratio	1.42	Opt	0.81	0	1.00	-	2.20	0.50	-	4.00
T4 Thyroxine	5.70	lo	8.40	8	7.10	-	9.00	4.50	-	12.00
T3 Uptake	33.00	Opt	30.00		29.00	-	35.00	24.00	-	39.00
T7 Free Thyroxine Index (FTI)	1.90	lo	2.50	8	2.61	-	3.60	1.20	-	4.90
White Blood Count	5.80	Opt	4.90	©	5.00	-	8.00	4.00	-	10.50
Red Blood Count	4.56	Opt	4.47	©	4.50	-	5.50	4.10	-	5.60
Hemoglobin	13.30	lo	12.90	©	13.30	-	15.20	11.50	-	17.00
Hematocrit	39.00	lo	37.70	©	39.50	-	47.00	34.00	-	50.00
MCV	86.00	Opt	84.00	©	85.00	_	97.00	80.00	_	98.00
MCH	29.10	Opt	28.80		28.10	_	32.00	27.00	_	34.00
MCHC	34.00	Opt	34.10		33.00	_	34.00	32.00	_	36.00
RDW	15.10	HI			13.50	-	14.50	13.00	-	15.00
Platelets	330.00	hi	297.00	8	175.00	_	250.00	140.00	_	415.00
CRP C-Reactive Protein	3.80	hi	4.30	©	0.00	-	1.50	0.00	-	4.90
CA 19-9	11.00	hi			0.00	-	0.00	0.00	-	37.00
CA 27.29	29.70	hi	185.70	©	0.00	-	0.00	0.00	-	38.60

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In spite of the dyes and medical scans, the CA 27.29 came down once again to 29.70. The CA 19.9 is also good at 11 showing the cancerous cells are not spreading. Her Glucose is within the optimal range and the Creatine Kinase which measures tissue injury and inflammation dropped 56 points! The Red Blood Count, Hemoglobin and Hematocrit all improved allowing oxygen and minerals to be transported more efficiently through the body.

A few things became worse such as the calcium, phosphorus and low thyroid which may be associated with the chelation treatment where Lead and Mercury are being flushed out of the body. Her total cholesterol came down several points but the Triglycerides went up and this is something that we need to work on. These fats are main constituents of vegetable oil and animal fats, but the high number may be partially caused by a low functioning thyroid.

11-25-08 - We've kept a close eye on this patient, frequently retesting her CA 27.29 and analyzing any fluctuations. I'm happy to report that she is doing better than I could have ever hoped for! The latest CA 27.29 on 11-25-08 was 19.5, finally dropping below 20 which is something we've been working for ever since she came in. She deserves a big "Congratulations!" Check out the results of her latest full blood test compared to tests done just one year before...

#### Results of Blood Test 06-24-08:

Results of blood Test (	Current Result	Current Rating	Prior Result							
Test Description Da		Katiliy	05/04/2007	Delta	Н	ealt	hv	CI	inio	al
Glucose	78.00	lo	100.00	0	80.00	_	95.00	65.00	_	99.00
Hemoglobin A1C (Gly-Hgh)	5.90	hi	5.80	8	4.60	-	5.40	4.80	-	5.90
Uric Acid	4.70	Opt	4.40	0	4.10	-	6.00	2.40		8.20
BUN (Blood Urea Nitrogen)	12.00	lo	11.00	0	13.00	-	18.00	5.00	-	26.00
Creatine Kinase	98.00	Opt	146.00	0	64.00	-	133.00	24.00	-	173.00
LDH	156.00	Opt	180.00	0	120.00	_	160.00	100.00	_	250.00
SGOT (AST) (AST)	23.00	Opt	27.00	0	15.00	_	26.00	6.00	_	40.00
SGPT (ALT) (ALT)	19.00	Opt	18.00		15.00	_	26.00	6.00	_	40.00
GGT	22.00	lo	35.00	8	22.00	_	39.00	6.00	_	65.00
Total Cholesterol	221.00	Ĥ	238.00	0	140.00	-	170.00	100.00	-	199.00
Triglyceride	168.00	HI	83.00	8	80.00	-	115.00	10.00	-	149.00
HDL Cholesterol	80.00	Opt	102.00	©	39.00	-	120.00	36.00	-	140.00
VLDL Cholesterol	34.00	hi	17.00	8	5.00	-	20.00	4.00	-	40.00
LDL Cholesterol	107.00	HI	119.00	©	50.00	-	75.00	6.00	-	99.00
Total Cholesterol / HDL Ratio	2.80	Opt	2.30		0.00	-	4.00	0.00	-	5.00
TSH	0.63	lo	1		1.00	-	2.50	0.35	-	5.50
T4 Thyroxine	5.00	lo	8.40	8	7.10	-	9.00	4.50	-	12.00
T3 Uptake	37.00	hi	30.00	8	29.00	-	35.00	24.00	-	39.00
T7 Free Thyroxine Index (FTI)	1.90	lo	2.50	8	2.61	-	3.60	1.20	-	4.90
CRP C-Reactive Protein	1.80	hi	4.30	☺	0.00	-	1.50	0.00	-	4.90
White Blood Count	5.10	Opt	4.90	0	5.00	-	8.00	4.00	-	10.50
Red Blood Count	4.35	lo	4.47	8	4.50	-	5.50	4.10	-	5.60
Hemoglobin	12.40	lo	12.90	8	13.30	-	15.20	11.50	-	17.00
Hematocrit	36.30	lo	37.70	8	39.50	-	47.00	34.00	-	50.00
MCV	83.00	lo	84.00	8	85.00	-	97.00	80.00	-	98.00
MCH	28.40	Opt	28.80		28.10	-	32.00	27.00	-	34.00
MCHC	34.10	hi	34.10	(4)	33.00	-	34.00	32.00	-	36.00
RDW	14.80	hi			11.10	-	14.50	11.00	-	15.00
Platelets	263.00	hi	297.00	☺	175.00	-	250.00	140.00	-	415.00
CA 27.29	20.60	hi	185.70	☺	0.00	-	5.00	0.00	-	38.60

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There are still some things to fix like the thyroid, mild anemia, and low protein, but the most important number is the tumor marker CA 27.29 which has consistently remained low for a solid year with no chemo or radiation!

Results of Chelation Challenge 06-12-08:

	Current	Current	Prior				
	Result	Rating	Result				
Test Description Date:	06/12/2008		01/06/2008	Delta	Healthy	Clinical	
Agent	DMSA		DMSA				
Dose	1000mg		1000mg				
Interval	6		6				
Toxic Elements							
Aluminum (UA)	0.00	Opt	0.00		0- 13.00	13.01-	35.00
Antimony (UA)	0.80	hi	0.00	8	0- 0.50	0.51-	1.00
Arsenic (UA)	35.00	Opt	22.00		0- 70.00	70.01- 1	130.00
Lead (UA)	38.00	HI	76.00	0	0- 4.00	4.01-	5.00
Mercury (UA)	6.30	H	7.80	0	0- 2.00	2.01-	4.00
Nickel (UA)	1.60	Opt	0.90		0- 6.00	6.01-	12.00

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We rechecked the level of toxic elements in her body and found they had also dramatically improved compared with the last test. This is a huge load off the immune system, but there is still a lot of work to be done and we will keep her on the strong chelator PCA-Rx until those numbers come down further.

#### **Letter From The Patient:**

Dear Dr. Merkle,

My Favorite Doctor!!! I wanted to thank you for all of your help, caring, support and expertise in my battle with breast cancer. I did not have to go through the pain and agony of radiation and hormone treatments, while I watched it deteriorate my body and immune system. I am happy, healthier, strong and cancer free and it's all because of you.

Thank you, Thank you! You are a blessing!

# **Dr. Merkle's Final Thoughts:**

Between May 4<sup>th</sup> and August 17<sup>th</sup>, this patient's cancer marker dropped a total of 156 points! The results speak for themselves – you do not have to pollute your body with radiation and chemotherapy treatments to reduce cancer cells.

Over the course of a lifetime, statistics say one in eight women will be diagnosed with breast cancer. The American Cancer Society estimates there

will be nearly 180,000 new cases of breast cancer in 2007 in the United States alone. That's 180,000 mothers, daughters, and friends facing the same diagnosis as my patient; being told they have "\_\_\_\_ years to live" and constantly battling the side effects of medical treatment. There are better and safer options as can clearly be seen in this patient's test results.

This was an interesting case as my patient stood very much alone in her treatment. Her husband and family members all urged her to follow the recommendations of the oncologist who technically told her she would be dead by 58. Despite this obstacle, she maintained a positive, joyful attitude over the past several months which no doubt aided her recovery.

-Dr. Van D. Merkle

This case report showcases a real patient's results using the Science Based Nutrition™ system of analysis, which takes into account hundreds of numeric data and their roles, combinations and inter-relationships as related to disease diagnosis. This patient is/was under the care of Dr. Van D. Merkle, creator and founder of Science Based Nutrition™, Inc. and is meant to serve as an example of results achieved using the Science Based Nutrition™ report. Contact your local health professional and ask him/her to provide you with the Science Based Nutrition™ report. Results will vary based on patient ability/willingness to follow the recommended nutritional protocols, among many other factors. Any suggested nutritional advice or dietary advice is not intended as a primary treatment and/or therapy for any disease or particular bodily symptom. Nutritional counseling, vitamin recommendations, nutritional advice, and the adjunctive schedule of nutrition is provided solely to upgrade the quality of foods in the patient's diet in order to supply good nutrition supporting the physiological and biomechanical process of the human body.