

57 Radiation Treatments Avoided ,Äì Why Nutrition Was Essential

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One common mistake I see many patients make is that they assume, "I take vitamins, therefore I am healthy." But there is a difference between taking vitamins and taking the right vitamins. One patient came to see me because her medical diagnoses kept getting worse. It started with morbid obesity (5'4" and 270 lbs) followed by high blood pressure, hypothyroidism, type 2 diabetes and osteoarthritis. Then she started having trouble with vaginal bleeding post-menopause. It took her medical doctors months to find the tumor, but eventually she was diagnosed with uterine and cervical cancer (grade 2 endometrioid adenocarcinoma) and had surgery to remove the tumor.

She took medications for the blood pressure and [diabetes](#), and picked out a series of well-marketed herbal blends she felt would help control her glucose levels, reduce the absorption of carbohydrates in food, support the thyroid for faster metabolism, etc. She also claimed to eat healthy foods and exercise.

Yet despite her efforts, none of the aforementioned problems improved and one year later, the cancer returned. Now the oncologist recommended 60 radiation treatments! Herbal blends may work and they may not, but the bottom line in this case was that this patient's health continued to deteriorate.

Without diagnostic testing, taking vitamins and supplements to improve your health is simply guesswork. This patient took medication for diabetes and two herbal supplements designed to help with sugar regulation - yet her glucose and hemoglobin A1C were still out of control. This was especially dangerous for her because [cancer cells](#) thrive in a high-glucose environment.

Several studies have shown that patients with diabetes have a 30-40 percent increased chance of developing breast, endometrial, pancreatic, liver or colorectal cancer.¹⁻² Diabetic patients who develop cancer have also been shown to have higher mortality rates than cancer patients without diabetes, with the increased risk of death sometimes as high as 80 percent.³⁻⁴

Obesity and diabetes often go hand in hand and obesity is a known risk factor for cancer, but a study out of South Korea suggests that even diabetics of a healthy weight have an increased risk. Researchers discovered that patients most likely to develop cancer and die from it were the ones with the highest blood sugar levels.⁵

With my patient already overweight, diabetic and on her second cancer diagnosis, it was imperative to seek out the sources of her problems rather than treat just the symptoms. At the first visit to my office, she was still morbidly obese at 261 lbs and her blood pressure was controlled on medication at 125/80. She suffered from headaches, only slept 3-4 hours per night and I noted +2 edema around both ankles. I immediately put her on a high-protein, low-glycemic vegetable diet, which allows very limited intake of carbohydrates and fruit (designed to help regulate her blood sugar) and sent her out for testing.

A good baseline includes bloodwork (glucose levels, comprehensive metabolic profile, liver panel, lipid panel, thyroid panel, complete blood count, erythrocytes sedimentation rate, c-reactive protein, creatine kinase and 25-hydroxy vitamin D), hair analysis (toxic elements and essential elements), basic urine dipstick and blood occult stool test. These tests allow a glimpse into each area of the body to ensure everything is functioning properly. The results showed a few areas to upon which to improve (Table 1).

TABLE 2: BLOOD ANALYSIS SHOWING IMPROVEMENT IN MANY AREAS FOLLOWING LESS THAN THREE MONTHS OF NUTRITIONAL INTERVENTION

Test Name	Current Blood Test	Current Test Outcome	Initial Blood Test		Healthy Range	Clinical Range
Glucose	116.00	Hi	134.00	☺	80.00 – 95.00	65.00 – 99.00
Hemoglobin A1C	5.4	Opt	7.10	☺	4.60 – 5.40	4.80 – 5.90
Creatine kinase	105.00	Opt	203.00	☺	64.00 – 133.00	24.00 – 173.00
LDH	208.00	Hi	230.00	☺	120.00 – 160.00	100.00 – 250.00
SGOT (AST)	29.00	Hi	34.00	☺	15.00 – 26.00	6.00 – 40.00
SGPT (ALT)	25.00	Opt	37.00	☺	15.00 – 26.00	6.00 – 40.00
Total cholesterol	200.00	Hi	259.00	☺	140.00 – 170.00	100.00 – 199.00
Triglyceride	142.00	Hi	160.00	☺	80.00 – 115.00	10.00 – 149.00
HDL cholesterol	43.00	Lo	42.00	☺	50.00 – 55.00	40.00 – 59.00
VLDL cholesterol	28.00	Hi	32.00	☺	5.00 – 20.00	4.00 – 40.00
LDL cholesterol	129.00	Hi	185.00	☺	50.00 – 75.00	6.00 – 99.00
Total cholesterol/HDL	4.65	Hi	6.20	☺	0.00 – 4.00	0.00 – 5.00
T4-Thyroxine	10.90	Hi	10.20	☹	7.10 – 9.00	4.50 – 12.00
T3 uptake	33.00	Opt	24.00	☺	29.00 – 35.00	24.00 – 39.00
T7 FTI	3.60	Opt	2.40	☺	2.61 – 3.60	1.20 – 4.90
C-reactive protein	0.60	Opt	6.60	☺	0.00 – 1.50	0.00 – 4.90
White blood count	8.40	Hi	9.70	☺	5.00 – 8.00	4.00 – 10.50
ESR	21.00	Hi	26.00	☺	0.00 – 6.00	0.00 – 20.00
Vitamin D 25-hydroxy	26.10	Lo	12.30	☺	50.00 – 90.00	32.00 – 100.00
CA125	15.00	Hi	15.30	☺	0.00 – 5.00	0.00 – 35.00
CEA	2.60	Hi	2.30	☹	0.00 – 2.00	0.00 – 3.00

Opt – Current result is optimal. Hi/Low – Current result is higher/lower than the healthy range, but still within clinical ranges.
 C. Hi/C. Low – Clinically high/low.

Because this patient was facing a recurring cancer diagnosis, she was completely committed to doing whatever was necessary to avoid radiation and prevent the cancer from spreading. This was one of the best turnarounds I have seen, with 25 of her test results improving in just two months. She feels "fantastic," is more active, has lost about 30 lbs and her glucose, which previously jumped anywhere from 130-180, now runs between 100-128, allowing her to cut her diabetes medication to just of what she was taking previously! Check out the blood test results following treatment in the table below (Table 2).

GLYCEMIC GUIDELINES: FRUITS AND VEGGIES BY CARBOHYDRATE PERCENTAGE

Fruits and vegetables can be broken down and ranked by their glycemic indexes. This can be beneficial when working with diabetic patients or patients with cancer. Diabetics should continue to check their glucose regularly as some foods (even the low-glycemic ones) could cause their glucose to rise. Here is the carbohydrate content (by %) of select fruits and vegetables.⁶

0-3%	3-6%	6-15%	15-20+%
Asparagus	Beans, string	Apricots	Artichokes
Bean Sprouts	Beets	Blackberries	Beans, kidney
Broccoli	Brussels sprouts	Cranberries	Beans, lima
Cabbage	Dandelion greens	Grapefruit	Parsnips
Carrots	Eggplant	Guava	Peas, green
Cauliflower	Kale	Lemons	Squash
Celery	Kohlrabi	Limes	Carrots
Swiss chard	Leeks	Oranges	Dried beans
Cucumbers	Okra	Papayas	Apples
Endive	Onions	Peaches	Blueberries
Lettuce	Peppers, any	Plums	Cherries
Mushrooms	Pumpkins	Raspberries	Grapes
Mustard greens	Rutabagas	Tangerines	Kumquats
Radishes	Turnips	Kiwis	Loganberries
Spinach			Mango
Watercress			Mulberries
Cantaloupes			Pears
Rhubarb			Pineapples
Strawberries			Pomegranates
Watermelon			
Melons			
Tomatoes			

Over the next few years, the CEA and CA125 did fluctuate a little bit and her oncologists continued to monitor her tumor using CT and PET scans. Each time they measured the mass, the number of recommended [radiation treatments](#) dropped: June 2008 - 60 treatments recommended; October 2008 - 25 treatments recommended; August 2009 - 12 treatments recommended; November 2009 - three treatments recommended.

The patient did agree to the final recommendation and had three radiation treatments done in November 2009. Scans in January 2010 showed the tumor was completely gone and at every three-month check-up since, oncologists have been unable to find cancer cell growth.

Nutrition is a vital key to achieving optimal health and is an essential component in recovery from cancer. By living a healthier lifestyle, controlling her blood sugar levels by changing her eating and exercising habits, and using diagnostic testing to find out what supplements her body really needed, this patient was able to avoid 57 radiation treatments and is now happily living cancer-free.



References

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