

Advanced Metastatic Prostate Cancer

C. C., Male, Age 58

Prior to us seeing the patient he had been treated with androgen suppression with Lupron. Sagittal and axial scans demonstrate diffuse marrow replacement by patient's prostate cancer. Lytic and blastic metastases are seen throughout the cervical, thoracic, lumbar, and sacral spines, right humerus, left and right humeral heads and left and right femurs. Metastasis has spread to several ribs. Patient had surgery to bladder to remove tumor, however bladder cancer was still active.

Pre Broth the patient was extremely weak, with severe pain in the pelvic area making it difficult to walk and sit, and constant nausea prevents him from eating. He is at times even unable to keep water down. The patient is also chronically losing blood through his urine. At this time he is in the final stages of cancer.

Following the start of the LifeOne Formula patient began to feel much stronger and more alert. Nausea has subsided, and bone pain has greatly decreased. Bladder bleeding is still a problem, but has been significantly reduced. Patient began to work again within 30 days, and began riding his motorcycle to and from work within 60 days.

S. A., Male, Age 74

Patient presented to us with prostate cancer, elevated PSA, fatigue, and substantial amount of bleeding during urination. Baseline Lymphocyte Subset Panel 3 and CBC show a very depressed immune system. Patient is chronically tired and lethargic. Ultrasound finds abnormally enlarged, lobulated and heterogeneous prostate gland associated with bladder base invasion with adjacent lobulated mass within the bladder as described. This appearance is quite suspicious for invasive prostate carcinoma. Following the start of the LifeOne Formula, the patient's symptoms have improved dramatically. His energy level has increased and blood during urination has decreased to an occasional drop. His outlook is excellent.

Bladder ultrasounds taken on 5/2/02 with follow-up ultrasound on 7/23/02 show the following changes: Shrinkage of the prostate cancer tumor and elimination of the tumor in the bladder itself.

K. P., Male, Age 70

Patient presented to us with advanced metastatic prostate cancer, with metastatic changes to ribs, lumbar, sacral and thoracic spine. Patient is experiencing general feelings of his illness and is very weak. He has a substantial amount of bleeding at times during urination. His stomach often gives him problems with nausea.

Prior to beginning the LifeOne Formula patient underwent 2 years of Lupron therapy. Following the start of the Broth patient steadily improved. General illness ceased and energy level increased to the point where the patient started traveling in his motor home, walking and hiking and primarily enjoying life beyond his expectations. Blood during urination ceased.

W. W., Male Age 55

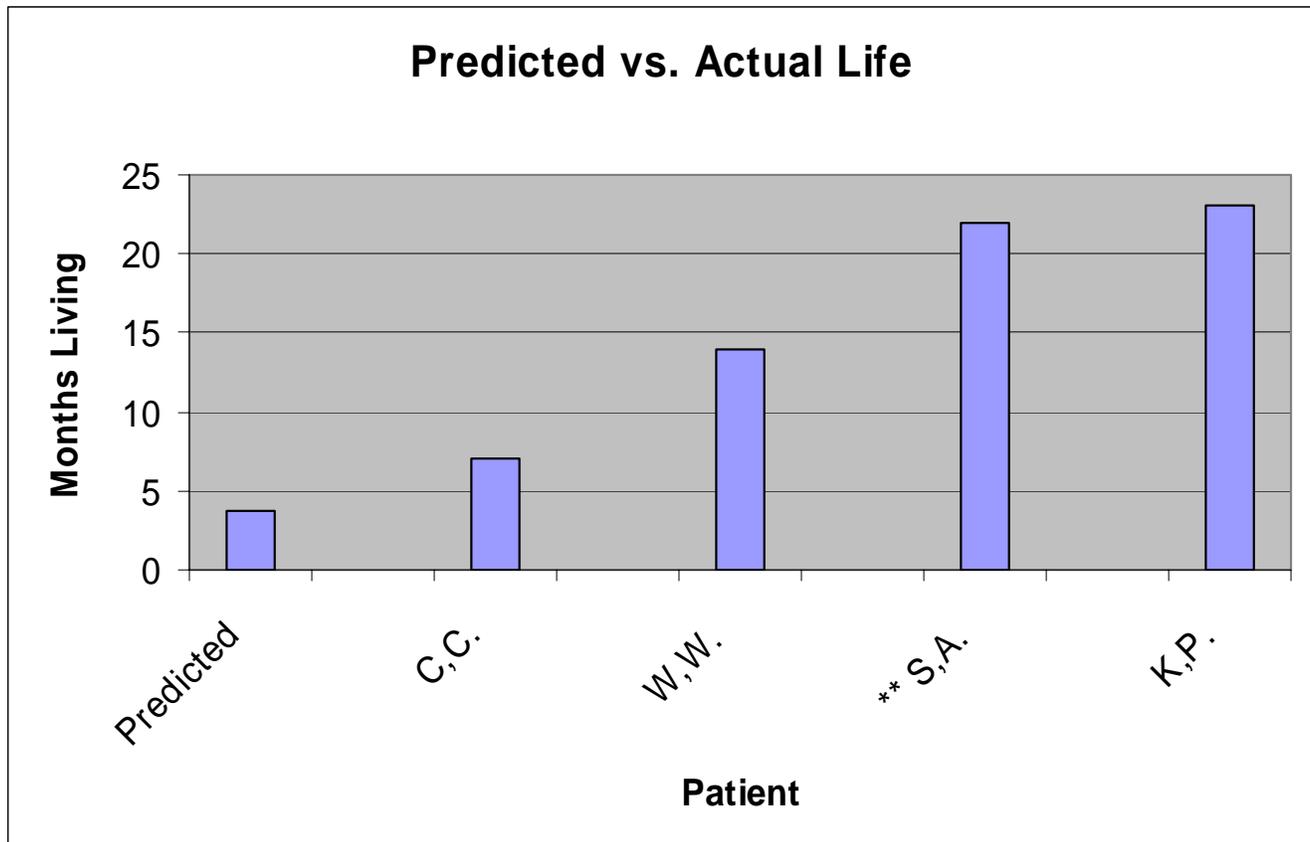
The patient's concerned brother initially contacted us. The patient is under Hospice care under terminal watch in the final stages of prostate cancer in Boston. The patient has been unable to eat or defecate for 10 days prior to our office being contacted. Patient underwent previous treatment including androgen suppression (Lupron) and is seen with a stent in place. Lytic and Blastic metastasis are seen throughout the cervical, thoracic, lumbar, and sacral spines, right humerus, left and right humeral heads and left and right femurs. The patient is currently on morphine and percodan to control pain. He is currently unable to leave his bed.

Within 2 weeks on the LifeOne Formula, the patient is up and walking without pain medication. His strength is greatly improved and he is looking forward to coming to Florida to see my office. within 30

days the patient is well enough to travel, and flies to Florida from Massachusetts. The patient continues to improve and goes back to work within 60 days of starting the Farley Broth. Initial PSA on 4/4/01 of 274 dropped to 71 on subsequent test given on 4/30/01.

The following graph depicts the predicted median life expectancy of advanced prostate cancer patients undergoing second line therapy using vinblastine plus estramustine phosphate for metastatic hormone refractory prostate cancer, and patient's actual survival using the Farley Broth.

Second line therapy is chemotherapy given for a [tumor](#) that has already failed to [respond](#) to a [first](#) chemotherapy [regimen](#) (called first [line](#)). (16 Dec 1997) Oncology



**** Indicates patient is still living.**

Reference:

Hudes [41], in a randomized study of 192 patients on second-line treatment, has compared vinblastine alone versus vinblastine and estramustine. He has obtained measurable responses of 6% and 18%, respectively, a progression-free median survival of 1.9 and 3.7 months ($p = 0.001$) and a global survival of 9.2 and 11.9 months ($p = 0.18$). Although nonsignificant, this figure corresponds to an increase of 25% in global survival.

Hudes G, Roth B, Loehrer P et al. Phase III trial of vinblastine versus vinblastine plus estramustine phosphate for metastatic hormone refractory prostate cancer (HRPC). Proc Am Soc Clin Oncol 1997;16:316a.