Small Cell Lung Carcinoma (Lung Cancer)

After doctors delivered the diagnosis in 2007, they gave her a 30% chance of surviving 5 years if she agreed to chemo and radiation. Overall, the median survival time for patients with this disease is just 20 months.

Initial Symptoms-

- ✓ Small Cell Lung Carcinoma
- ✓ Breast Cancer In 2001
 ✓ Fibromyalgia & Chronic Fatigue
 ✓ Overweight

In just 3 months-

- to 151

✓ *Type II Diabetes*

- ✓ Triglycerides Dropped From 227 ✓ Glucose Level Dropped From 113 to 99
- ✓ Immune System Strong
 ✓ Chronic Cough Virtually Gone
 ✓ Cancer Markers Steady
 ✓ Friends Say She Is Looking Great!

"A year and a half after being diagnosed with this incredibly aggressive form of lung cancer, my patient is still thriving. Her cancer markers have remained virtually unchanged and when dealing with aggressive diseases, static numbers are fantastic news!"

-Dr. Van D. Merkle

Patient Profile:

01-16-08 - The 60-year old patient presented with a very aggressive case of small cell lung carcinoma and a previous case of invasive ductal carcinoma (breast cancer). She had a right side mastectomy in 2001 for the breast cancer but no chemo or radiation. During a follow-up in 2006, doctors noticed an upper left lobe lung lesion on the CAT scans and chest x-rays. It continued to grow and in October of 2007 the patient was diagnosed with lung cancer and a lobectomy was recommended. Her upper left lung lobe was removed in late October. She has had a chronic cough since the surgery. After a biopsy of the mass, doctors informed the patient that this form of aggressive cancer comes with a 30% survival rate with chemo and radiation. She refused further treatment, weighed her options then made an appointment at my clinic. At the time of the initial visit, she weighed 189 lbs at 5'5" and her blood pressure was 140/85.

Other complaints included fibromyalgia, chronic fatigue, high cholesterol, Type II Diabetes and excess weight. As a child she had thymus radiation which can lead to immunodeficiency problems in adults. She currently uses 125mg synthroid prescribed after 2 parathyroids were removed in 2001 and basic vitamins such as calcium, magnesium and vitamin C.

Patient's tests results:

02-20-08 – The patient provided us with some preliminary testing done by her oncologist which we compared with her new test results. The Glucose and Hemoglobin A1c are both high signaling the possibility of Diabetes. Also her cholesterol, triglycerides, VLDL, and LDL levels are high while the HDL cholesterol is low. This puts her cardiac risk assessment at 6.10 or moderate risk. Currently her body's defenses are optimal with good white and red blood cell counts but the vitamin D is clinically low at 16.50.

	Current Result	Current Rating	Prior Result								
Test Description Date:	01/17/2008	-	12/18/2007	Delta	He	alti	hy	CI	inic	ical	
Glucose	113.00	HI	105.00	8	80.00	-	95.00	65.00	-	99.00	
Hemoglobin A1C (Gly-Hgh)	6.30	HI			4.60	-	5.40	4.80	-	5.90	
Total Cholesterol	257.00	HI			140.00	-	170.00	100.00	-	199.00	
Triglyceride	227.00	HI			80.00	-	115.00	10.00	-	149.00	
HDL Cholesterol	42.00	lo			50.00	-	55.00	40.00	-	59.00	
VLDL Cholesterol	45.00	HI			5.00	-	20.00	4.00	-	40.00	
LDL Cholesterol	170.00	HI			50.00	-	75.00	6.00	-	99.00	
Total Cholesterol / HDL Ratio	6.10	HI			0.00	-	4.00	0.00	-	5.00	
Triglyceride/HDL Ratio	5.40	HI			1.00	-	2.20	0.50	-	4.00	
T4 Thyroxine	12.10	HI			7.10	-	9.00	4.50	-	12.00	
T3 Uptake	27.00	lo			29.00	-	35.00	24.00	-	39.00	
T7 Free Thyroxine Index (FTI)	3.30	Opt			2.61	-	3.60	1.20	-	4.90	
TSH	0.22	LO			2.50	-	5.00	0.35	-	5.50	
White Blood Count	5.50	Opt	4.10	0	5.00	-	8.00	4.00	-	10.50	
Red Blood Count	4.66	Opt	4.26	0	4.50	-	5.50	4.10	-	5.60	
Hemoglobin	14.10	Opt	12.90	0	13.30	-	15.20	11.50	-	17.00	
Hematocrit	41.30	Opt	37.30	0	39.50	-	47.00	34.00	-	50.00	
MCV	89.00	Opt	87.40		85.00	-	97.00	80.00	-	98.00	
MCH	30.20	Opt	34.50	0	28.10	-	32.00	27.00	-	34.00	
MCHC	34.10	hi			33.00	-	34.00	32.00	-	36.00	
RDW	13.90	Opt			13.50	-	14.50	13.00	-	15.00	
Platelets	222.00	Opt	195.00		175.00	-	250.00	140.00	-	415.00	
Polys/Neutrophils (SEGS-PMNS)	57.00	Opt	40.80	0	55.00	-	65.00	40.00	-	74.00	
Lymphocytes	32.00	Opt	41.50	0	25.00	-	40.00	14.00	-	46.00	
Monocytes	8.00	hi	13.10	0	5.00	-	7.00	4.00	-	13.00	
Eosinophils	2.00	Opt	4.10		0.00	-	4.10	0.00	-	7.00	
Basophils	1.00	hi	0.50	8	0.00	-	0.00	0.00	-	3.00	
ESR-Erythrocyte Sed Rate, Westergr	2.00	Opt			0.00	-	6.00	0.00	-	20.00	
CRP C-Reactive Protein	1.10	Opt			0.00	-	1.50	0.00	-	4.90	
Vitamin D 25-Hydroxy	16.50	LO			50.00	-	90.00	32.00	-	100.00	

Results of Initial Blood Test:

Blue = clinically very high or clinically very low

Red = clinically high or clinically low

Virtually no toxic elements were leaving the body thru the hair. The body is constantly exposed to environmental toxins so if not excreted in the hair, they are most likely loitering in the body causing all kinds of dysfunctions. Many essential element imbalances appeared in the results also suggesting an impaired ability for the body to excrete toxins and metals.

	Current Result	Current Rating	Prior Result					
Test Description Date:	02/15/2008			Delta	Healthy		Clini	cal
Essential Elements								
Calcium	1060.00	hi			663.00-	753.00	300.00-	1200.00
Magnesium	130.00	hi			53.00-	62.00	35.00-	140.00
Sodium	670.00	HI			37.00-	45.00	12.00-	90.00
Potassium	19.00	hi			14.00-	18.00	8.00-	38.00
Zinc	240.00	HI			140.00-	160.00	130.00-	200.00
Manganese	1.20	HI			0.21-	0.32	0.15-	0.65
Chromium	0.28	Opt			0.25-	0.31	0.20-	0.40
Vanadium	0.01	LÖ			0.04-	0.05	0.02-	0.06
Molybdenum	0.02	LO			0.05-	0.05	0.04-	0.10
Strontium	49.00	HI			2.00-	2.90	0.50-	7.60
Sulfur	50500.00	HI			45000.00-	45500.00	43000.00-	50000.00
Barium	1.90	hi			0.70-	1.20	0.50-	5.00
Cobalt	0.03	Opt			0.02-	0.03	0.01-	0.05
Iron	190.00	HI			6.80-	8.50	5.40-	14.00
Germanium	0.04	LO			0.05-	0.05	0.05-	0.06

Results of Initial Tissue Mineral Analysis:

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 finally see some of the stores of toxic elements in the urinary chelation challenge. The column labeled "Pre-Chall" exhibits what the body is able to excrete on its own. The column labeled "DMSA" shows what toxins are drawn out with the help of a chelation agent. There are toxins in the body and based on the test results, it's clear they will need some help to get out.

Results of Initial Urinary Chelation Challenge:

		Current	Current	Prior				
		Result	Rating	Result				
	Test Description Date:	01/20/2008		01/19/2008	Delta	Healthy	Clinical	
_	Agent	DMSA		Pre-Chall				
	Toxic Elements							
Γ	Lead (UA)	35.00	HI	0.00	8	0- 4.00	4.01-	5.00
	Mercury (UA)	3.40	hi	0.00	8	0- 2.00	2.01-	4.00

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.

Doctor analysis:

02-27-08 – Doctors have already cut the cancer mass out of this woman's body. My job is to make sure she reaches optimal health so her

body can fight off any cancer cells that try to come back. She was hit with a very aggressive form of cancer so in this case, no change can actually be a good thing. No change means she is not getting worse. It appears that she is in a fairly good spot now regarding her immune system however things like the high Triglycerides, Glucose levels and hidden toxic elements could change this. We need to get the toxins out and put her on a very healthy diet. Cancer cells feed on sugar so it's essential to get the Glucose and Hemoglobin A1C under control. This means lots of clean protein like nuts, seeds, salmon, eggs or chicken and as many low carbohydrate vegetables as she wants such as bean sprouts, broccoli, cauliflower, lettuce, mushrooms, carrots, peppers, squash, tomatoes and turnips and one serving of low carbohydrate fruit including cantaloupe, rhubarb or strawberries. To start she will be avoiding all breads, crackers, pasta, rice and other grains.

The high levels of iron, strontium, zinc and sodium in the hair test results are very odd and are most likely coming from her water. I recommended she get a reverse osmosis water filtration system to help with this problem.

For her supplement regimen, I used several chelators to start clearing out the heavy metals, immune system boosters and antioxidants, calculating dosages based on her test results and the severity of her condition.

Patient assessment:

04-16-08 – With such a short life prognosis, this patient followed my recommendations very closely and her efforts paid off. People at church began commenting on how well she looked. Her skin took on a healthy glow and the coughing problem which developed after her lobectomy was significantly better.

In just a few months her Glucose was down 14 points and within clinical guidelines. Her Hemoglobin A1C was still high but came down a few tenths as well. The total cholesterol dropped 24 points with all bad forms (LDL, VLDL and triglycerides) coming down as well and the good cholesterol (HDL) going up. Most importantly, we ran a tumor marker with this test, the CA27.29 which monitors breast cancer activity. Her number is within the clinical range, but we would like to see it lower. I ordered another CA27.29 to monitor activity and also a CA125 (various sites) to see if the cancer cells have spread.

Results of 2nd Blood Test:

	Current	Current	Prior							
Toot Description Defer	Result	Raung	64/17/2008	Dalta		alti	h.,	C1	inia	
Test Description Date:	04/14/2000		01/11/2000	Delta	a Healthy					
Glucose	99.00	hi	113.00	\odot	80.00	-	95.00	65.00	-	99.00
Hemoglobin A1C (Gly-Hgh)	6.10	HI	6.30	0	4.60	-	5.40	4.80	-	5.90
Total Cholesterol	233.00	HI	257.00	Ö	140.00	-	170.00	100.00	-	199.00
Triglyceride	151.00	HI	227.00	\odot	80.00	-	115.00	10.00	-	149.00
HDL Cholesterol	48.00	lo	42.00	0	50.00	-	55.00	40.00	-	59.00
VLDL Cholesterol	30.00	hi	45.00	Û	5.00	-	20.00	4.00	-	40.00
LDL Cholesterol	155.00	HI	170.00	٢	50.00	-	75.00	6.00	-	99.00
Total Cholesterol / HDL Ratio	4.90	hi	6.10	٢	0.00	-	4.00	0.00	-	5.00
Triglyceride/HDL Ratio	3.15	hi	5.40	٢	1.00	-	2.20	0.50	-	4.00
T4 Thyroxine	15.40	HI	12.10	8	7.10	-	9.00	4.50	-	12.00
T3 Uptake	29.00	lo	27.00	٢	29.00	-	35.00	24.00	-	39.00
T7 Free Thyroxine Index (FTI)	4.50	hi	3.30	8	2.61	-	3.60	1.20	-	4.90
TSH	0.14	LO	0.22	8	1.00	-	2.50	0.35	-	5.50
White Blood Count	4.70	lo	5.50	8	5.00	-	8.00	4.00	-	10.50
Red Blood Count	4.58	Opt	4.66		4.50	-	5.50	4.10	-	5.60
Hemoglobin	13.70	Opt	14.10		13.30	-	15.20	11.50	-	17.00
Hematocrit	39.90	Opt	41.30		39.50	-	47.00	34.00	-	50.00
MCV	87.00	Opt	89.00		85.00	-	97.00	80.00	-	98.00
MCH	29.90	Opt	30.20		28.10	-	32.00	27.00	-	34.00
MCHC	34.30	hi	34.10	8	33.00	-	34.00	32.00	-	36.00
RDW	14.80	hi	13.90	8	13.50	-	14.50	13.00	-	15.00
Platelets	218.00	Opt	222.00		175.00	-	250.00	140.00	-	415.00
Polys/Neutrophils (SEGS-PMNS)	51.00	lo	57.00	8	55.00	-	65.00	40.00	-	74.00
Lymphocytes	38.00	Opt	32.00		25.00	-	40.00	14.00	-	46.00
Monocytes	8.00	hi	8.00	9	5.00	-	7.00	4.00	-	13.00
Eosinophils	2.00	Opt	2.00		0.00	-	4.10	0.00	-	7.00
Basophils	1.00	hi	1.00	9	0.00	-	0.00	0.00	-	3.00
ESR-Erythrocyte Sed Rate, Westergr	8.00	hi	2.00	8	0.00	-	6.00	0.00	-	20.00
CRP C-Reactive Protein	1.60	hi	1.10	8	0.00	-	1.50	0.00	-	4.90
Vitamin D 25-Hydroxy	46.90	lo	16.50	0	50.00	-	90.00	32.00	-	100.00
CA 27.29	35.90	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 saw some minor disruptions in the CBC panel (MCHC, RDW, Neutrophils, etc) which is likely caused by cleaning out the toxic elements. The levels of Mercury and Lead excreted are now much smaller. As heavier metals come out, the lighter mass toxins take their turn.

Results of 2nd Urinary Chelation Challenge:

Results of 2nd Uri	esuits of 2nd Urinary Chelation Challenge:											
		Current	Current	Prior								
		Result	Rating	Result								
Test Description D	ate:	04/16/2008		01/20/2008	Delta	Healthy		Clinical				
Agent		DMSA		DMSA								
Toxic Elements												
Aluminum (UA)		110.00	HI	0.00	8	0-	13.00	13.01-	35.00			
Antimony (UA)		0.70	hi	0.00	8	0-	0.50	0.51-	1.00			
Lead (UA)		19.00	H	35.00	٢	0-	4.00	4.01-	5.00			
Mercury (UA)		0.00	Opt	3.40	٢	0-	2.00	2.01-	4.00			
Nickel (UA)		7.00	hi	5.50	8	0-	6.00	6.01-	12.00			

Blue = clinically very high or clinically very low

Red = clinically high or clinically low

05-12-08 – The tumor marker CA27.29 did rise a little in the past month placing it just over the clinical cutoff. The CA125 is also a bit high for my standards, but well below clinical guidelines. She was diagnosed with a very aggressive form of cancer. Minimal changes are a good sign! These numbers are not a cause for panic, but it is important to stay on track with the diet and supplements to keep the cancer cell count as low as possible.

Results of 3rd Blood Test:

	Current	Current	Prior					
	Result	Rating	Result					
Test Description Date:	05/12/2008		04/14/2008	Delta	Healt	hy	Clin	ical
CA 125	10.70	hi			0.00 -	10.00	0.00 -	35.00
CA 27.29	39.50	HI	35.90	8	0.00 -	10.00	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.

09-19-08 – We continued monitoring the tumor markers over the next several months and as you can see, no major changes occurred. This is good news and shows her body is able to control and fight back against the cancer cells to prohibit them from spreading.

Results of Progressive Tumor Markers:

Date:	09/19/2008	07/02/2008	06/02/2008	05/12/2008	04/14/2008
CA 125	11.90	11.20	11.10	10.70	
CA 27.29	36.80	30.90	30.90	39.50	35.90

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.

12-05-08 – With a healthier body, the patient is better able to eliminate toxic elements which can be easily seen in the second hair test. In this case higher numbers are not a bad thing because we would rather have the toxins come out then stay inside and disrupt bodily processes. The levels of essential elements are also starting to improve.

Results of 2nd Hair Test:

	Current Result	Current Rating	Prior Result				
Test Description Date:	12/05/2008		02/15/2008	Delta	Healthy	Clinical	
Toxic Elements							
Aluminum	4.30	hi	2.80	8	0- 2.2	2.21-	7.00
Antimony	0.02	Opt	0.02		0- 0.0	0.07-	0.12
Arsenic	0.04	hi	0.05	0	0- 0.0	3 0.04-	0.06
Barium	3.00	HI	1.90	8	0- 1.0	0 1.01-	2.00
Tin	0.21	hi	0.11	8	0- 0.2	0 0.21-	0.30
Titanium	2.70	HI	0.69	8	0- 0.4	0 0.41-	0.70
Total Toxic Representation	2.00	Opt	1.00		0- 2.0	0 2.01-	3.00

Blue = clinically very high or clinically very low Red = clinically high or clinically low

	Current Result	Current Rating	Prior Result					
Test Description Date:	12/05/2008		02/15/2008	Delta	Healt	hy	Clinic	cal
Essential Elements								
Calcium	991.00	hi	1,060.00	0	663.00-	753.00	300.00-	1200.00
Magnesium	120.00	hi	130.00	0	53.00-	62.00	35.00-	140.00
Sodium	1200.00	HI	670.00	8	72.00-	126.00	18.00-	180.00
Potassium	20.00	lo	19.00	0	30.00-	53.00	8.00-	75.00
Zinc	180.00	hi	240.00	Ô	150.00-	170.00	140.00-	220.00
Manganese	1.30	HI	1.20	8	0.28-	0.40	0.08-	0.60
Chromium	0.27	LO	0.28	8	0.48-	0.57	0.40-	0.65
Vanadium	0.02	lo	0.01	0	0.04-	0.05	0.02-	0.06
Molybdenum	0.02	lo	0.02	0	0.03-	0.04	0.02-	0.05
Strontium	65.00	HI	49.00	8	2.00-	2.90	0.50-	7.60
Sulfur	44200.00	lo	50,500.00	0	46000.00-	48000.00	44000.00-	50000.00
Cobalt	0.04	hi	0.03	8	0.02-	0.03	0.00-	0.04
Iron	380.00	HI	190.00	8	9.00-	13.00	7.00-	16.00
Germanium	0.10	HI	0.04	8	0.05-	0.06	0.05-	0.06

Results of 2nd Hair Test Continued:

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.

02-13-09 - Comparing the blood test done in April 2008 with the latest round of testing, we see that the cholesterol markers are not quite where they should be. This patient needs to tighten up her diet a little more staying away from carbohydrates and loading up on fresh vegetables and lean protein. The tumor markers still look great with no massive fluctuations.

	Current Result	Current Rating	Prior Result							
Test Description Date:	02/13/2009		04/14/2008	Delta	Healthy			Clinical		
Glucose	92.00	Opt	99.00	٢	80.00	-	95.00	65.00	-	99.00
Hemoglobin A1C (Gly-Hgh)	6.00	HI	6.10	٢	4.60	-	5.40	4.80	-	5.90
Total Cholesterol	220.00	HI	233.00	٢	140.00	-	170.00	100.00	-	199.00
Triglyceride	156.00	HI	151.00	8	80.00	-	115.00	10.00	-	149.00
HDL Cholesterol	44.00	Opt	48.00	8	39.00	-	120.00	36.00	-	140.00
VLDL Cholesterol	31.00	hi	30.00	8	5.00	-	20.00	4.00	-	40.00
LDL Cholesterol	145.00	HI	155.00	\odot	50.00	-	75.00	6.00	-	99.00
Total Cholesterol / HDL Ratio	5.00	hi	4.90	8	0.00	-	4.00	0.00	-	5.00
Triglyceride/HDL Ratio			3.15		0.00	-	2.00	0.00	-	4.00
TSH	0.81	lo	0.14	0	1.00	-	2.50	0.35	-	5.50
T4 Thyroxine	11.40	hi	15.40	0	7.10	-	9.00	4.50	-	12.00
T3 Uptake	25.00	lo	29.00	8	29.00	-	35.00	24.00	-	39.00
T7 Free Thyroxine Index (FTI)	2.90	Opt	4.50	0	2.61	-	3.60	1.20	-	4.90
T4, Free (Direct) Thyroxine					1.10	-	1.43	0.61	-	1.76
CRP C-Reactive Protein	1.70	hi	1.60	8	0.00	-	1.50	0.00	-	4.90
White Blood Count	5.70	Opt	4.70	0	5.00	-	8.00	4.00	-	10.50
Red Blood Count	4.46	lo	4.58	8	4.50	-	5.50	4.10	-	5.60
Hemoglobin	13.30	lo	13.70	8	13.30	-	15.20	11.50	-	17.00
Hematocrit	39.30	lo	39.90	8	39.50	-	47.00	34.00	-	50.00
MCV	88.00	Opt	87.00		85.00	-	97.00	80.00	-	98.00
MCH	29.80	Opt	29.90		28.10	-	32.00	27.00	-	34.00
MCHC	33.80	Opt	34.30	\odot	33.00	-	34.00	32.00	-	36.00

Results of Blood Test:

Blue = clinically very high or clinically very low Red = clinically high or clinically low

Results of Blood Test Continued:

	Current	Current	Prior							
Test Description Detail	02/42/2000	Nating	04/44/2009	Dalta		14	h			
Test Description Date:	02/13/2003		04/14/2000	Dena	Healthy			U U	inite	ai
RDW	14.20	Opt	14.80	٢	11.10	-	14.50	11.00	-	15.00
Platelets	220.00	Opt	218.00		175.00	-	250.00	140.00	-	415.00
Polys/Neutrophils (SEGS-PMNS)	53.00	lo	51.00	٢	55.00	-	65.00	40.00	-	74.00
Lymphocytes	36.00	Opt	38.00		25.00	-	40.00	14.00	-	46.00
Monocytes	8.00	hi	8.00	9	5.00	-	7.00	4.00	-	13.00
ESR-Erythrocyte Sed Rate, Westergr	7.00	hi	8.00	٢	0.00	-	6.00	0.00	-	20.00
Vitamin D 25-Hydroxy	68.10	Opt	46.90	٢	50.00	-	90.00	32.00	-	100.00
CA 125	9.30	Opt			0.00	-	10.00	0.00	-	35.00
CA 27.29	34.60	hi	35.90	٢	0.00	-	10.00	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.

03-04-09 – The patient became concerned when she noticed a few lumps developing in her neck. We checked out a few other tumor markers to be sure nothing had spread and all were within clinical ranges. The patient is considering a needle biopsy to determine exactly why the lumps appeared.

Results of Blood Test:

	Current Result	Current Rating	Prior Result					
Test Description Date:	03/04/2009		02/13/2009	Delta	Health	iy	Clir	nical
CA 15-3	24.20	hi			0.00 -	22.00	0.00	- 31.00
CA 19-9	7.00	Opt			0.00 -	10.00	0.00	- 37.00
CA 27.29			34.60		0.00 -	10.00	0.00	- 38.60
CEA	2.40	hi			0.00 -	2.00	0.00	- 3.00

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.

Dr. Merkle's Final Thoughts:

Small cell lung carcinoma is considered very dangerous because it multiplies at a fast pace and spreads to other vital organs very easily and very early in the course of the disease. Thus cancer cells can quickly take over the entire body which is why the prognosis is so bleak.

My patient's medical doctors gave her a 30% chance of surviving 5 years if she got radiation and chemotherapy. Overall the median survival for people with this disease is just 20 months.

A year and a half after being diagnosed with this incredibly aggressive form of lung cancer, my patient is still thriving. Medical doctors would most likely have given her just a few months (maybe weeks) after her refusal of radiation and chemotherapy. In fact according to the National Cancer Institute's website, for most patients "current treatments do not cure the cancer". They recommend anyone with small cell carcinoma consider entering a clinical trial where you will most likely be pumped full of non-FDA regulated cancer treatments. Short version – YOU BECOME A GUNIEA PIG!!

If you are willing to fight for your life, why take a road full of unknown side effects when you can work on reviving your formerly healthy, cancer fighting body. Everyone has cancer cells. Let your body be strong enough to fight those cancer cells off!

-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[™] 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.