

Clinical holistic medicine: A case of induced spontaneous remission in a patient with non-hodgkin *b-lymphoma*

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Abstract

This case is part of our research project with clinical holistic medicine (CHM) patients, who are treated with a modern version of the old Hippocratic character medicine in order to improve quality of life and health by rehabilitating the patient's character, life mission, and sense of coherence. A male 45 years old patient with non-Hodgkin B-Lymphoma diagnosed at the pathological institute of the University Hospital was cured within three months and 14 sessions of CHM and 250 hours of existential exercise. His ultrasound and CT-scans showed retroperitoneal tumours and his needle biopsy showed highly pathological cells of malignant lymphoma. The treatment with CHM was done, while the patient waited for the final diagnosis and biochemical cancer treatment. When he started he was in a very poor condition clinically; he was unable to work, unable to sleep due to constant fear, his self-assessed quality of life was low (measured by QOL1 and QOL5), his self-assessed mental health was low, and he had severe problems with his partner, including sexual problems. He was completely caught in the dark side of life and was tormented by the most evil obsessive fantasies of a violent character. Every relation he has to other people seemed negative and he had big problems relating to self and to the surrounding world. He was most definitely low in his sense of coherence. As his existential issues were solved in therapy his quality of life improved and his cancer disappeared.

Keywords: Quality of Life, QOL, philosophy of life, human development, clinical holistic medicine (CHM), salutogenesis, sense of coherence, spontaneous remission, cancer, alternative and complementary medicine (CAM), Denmark.

Introduction

The common definition of spontaneous remission is "a complete or partial, temporary or permanent

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disappearance of all or at least some relevant parameters of a soundly diagnosed malignant disease without any medical treatment or with treatment that is considered inadequate to produce the resulting regression (1). A search for “spontaneous remission and cancer” on Medline (www.pubmed.gov) December 20, 2008 gave 8,489 records, while in April 2004 the same search gave only 5,458 hits (2) documenting the intensity of the research in this area. Some remarkable examples are seen in several publications (3-42).

The incidence of spontaneous remission of cancer has been disputed. Some researchers found the phenomenon to be extraordinary rare, like 1-50 in 100.000 (43,44), while other researches believed the incidence to be 1:10.000 or even higher, as they without much effort found over 40 cases documented, but most of them not reported in the scientific literature (45). A massive under-reporting of the spontaneous remissions seems to happen due to the unwillingness of the physicians to recognise, appreciate, and investigate the phenomenon. Dige (45) found that about 2/3 of the patients had experienced some kind of spiritual awakening increasing the sense of coherence, before the remission took place, indicating that the patient himself played a central role in the process of healing.

The purpose of our intervention in the holistic clinic is strongly inspired by the work of David Spiegel et al (46), who helped women diagnosed with terminal cancer to improve their QOL in the remaining part of their life. After 12 months Spiegel and his co-workers demonstrated a significant improvement by various psychological tests: reduced pain, milder depression and less anxiety, so we believe that QOL can be improved for this group. Most importantly the intervention on quality of life seemed to improve survival time, and several patients had seemingly spontaneous remission of their cancer, surviving more than 10 years. David Spiegel showed one of the authors (SV) how he worked with these patients and how he supported the women in finding their internal and external resources for their struggle to improve the quality of life.

The concept used for the intervention in the Research Clinic for Holistic Medicine in Copenhagen (2,47) is close to the original concept of “natural healing” acknowledged and used by Hippocrates and

his students (48) and since that time by European doctors for over two millennia. The physician’s intent was to improve the patient’s quality of life, health and ability in general by the induction of existential healing (what Aaron Antonovsky (1923-1994) later called “salutogenesis” (49,50)). This was done by the combined recovery of human character (48,51), life mission, or purpose of life (51-57) and sense of coherence (49,50,58-63).

The focus of the original Hippocratic medicine seems to have been on the emotional and spiritual experience of what we today call the sense of coherence (48), as a recent analysis has indicated that the rehabilitation of emotions and sexuality (ESOC) (63) are core factors in the rehabilitation of sense of coherence and quality of life. The Hippocratic tradition of “character medicine” has as its core intent the rehabilitation of the patient’s character, including sexual character, so we feel safe to say that we practise holistic medicine in a manner very close to the original Hippocratic medicine, at least when it comes to the intent of inducing existential healing through the rehabilitation of character.

Regarding the mechanism of spontaneous healing it seems that the cancer cells are disappearing by apoptosis (for every cell, there is a time to live and to die and there are two ways in which cells die, either killed by injurious agents or they are induced to commit suicide. Programmed cell death is also called apoptosis), so a holistic cure for cancer is most likely to be successful if apoptosis can be induced (2). It might be a surprise for many researches, who follow the typical biochemical way of thinking, that induction of apoptosis seems quite possible and quite natural from a holistic medical perspective, as we believe that we are dealing with the same formative forces – the overall information system of the body (64-74) - in the body that induced apoptosis in embryonic life. If we radically can increase the coherence of the organism (49,50) and remove the disturbances that give the cells problems with their communication, the level of information in the tissues can be radically improved due to holistic healing (75) and the apoptosis thus induced, as apoptosis presumably happens as a function of the cells realising that it is not a natural and sound part of the body any more.

After having developed our research protocol for treatment of cancer patients with CHM (2,47), we have learned that other holistic therapists before us have tried and seemingly succeeded to induce spontaneous remission of cancer using similar, holistic principles (76).

Clinical holistic medicine

Clinical holistic medicine (CHM), or “quality of life as medicine” is a research program initiated by the late pediatric professor Bengt Zachau-Christiansen at the University Hospital (Rigshospitalet), Unit for Prospective Paediatrics, in 1990 (77). In 1997 it was clear that what we tried to do was re-vitalize the old tradition of Hippocratic holistic medicine, and a comprehensive protocol for complementary intervention on 1,000 somatically and mentally ill patients with a number of mild and severe health conditions (78), including cancer (2,47) and schizophrenia (79), were implemented. The Scientific Ethical Committee originally accepted the project in 1990 including intervention on mentally ill patients and children. We have reviewed the history of clinical holistic medicine (80) and our work lead us to use quality of life as medicine (78,81-84). For an overview of tools used in the CHM-therapy, please see (85,86). For the principles of healing taken into use, see (48,75). For the results from CHM-treatment on mental, somatic, sexual, and existential problems, see (87-91). Since 2000 the Nordic School of Holistic Medicine in Copenhagen has used this experience to train therapists and physicians in clinical holistic medicine.

What can be achieved with a patient with metastasized cancer?

The first and most important thing is to cooperate with the patient, helping the patient to achieve what is possible in every single case. This is extremely difficult, because the resources of the patient are often small, but if the will to live is strong, then there might be extraordinary resources in the patient. Therefore the assessment of the patient’s resources and direction is the first thing to do and everything depends upon

this judgment. The second thing is to understand the patient’s individual process of learning and transformation and especially what the patient is willing to give up in this process. If you want a new life, the price is your old life. So if you will not let go of your old way, values, perspectives and habits not much can be done for you in consciousness-based, holistic medicine. This willingness is in part related to the level of personal resources and in part related to the will to survive.

A general thing to learn from your cancer is that you can come closer to life (49,50). You can change, you can move into life, you can conquer the meaning of life, understanding its purpose and step into character more fully, being yourself more. This strange process of “becoming yourself” is what holistic medicine is all about, because you are this wholeness and healing is to become your true, whole self. So dependent of the resources, the will to live and the willingness to “let go of the ego and surrender” and take learning and thus transform into a more true and whole person, there is very little or very much that a holistic physician can do for his patient. The case in this paper is about a male patient with small resources, a strong will to live and with an impressive willingness to take learning and to transform.

A case story

The patient was a 45-year-old male Caucasian. He started in clinical holistic therapy [according to the research protocol (2,47)] the very same day he was diagnosed with non-Hodgkin B-Lymphoma at the pathological institute THG Århus University Hospital. His ultrasound and CT-scans showed retro peritoneal tumours and his needle biopsy showed highly pathological cells (T06002 (marrow from crista) M96003 (malignant lymphoma), M96103 (B-Lymphoma), P30990 (needle biopsy) P3A070 (enzyme histochemical examination) P3B000 (immune histochemical examination)).

He was in a very poor condition clinically, unable to work, unable to sleep due to constant fever, his self-assessed quality of life was low, his self-assessed mental health was low, and he had severe problems with his partner including sexual problems

(standard questionnaire administered at in-take). He was completely caught in the dark side of life and tormented by the most evil obsessive fantasies about cutting a woman into pieces with a sharp knife. Every relation he has to other people seemed to be negative, and he had big problems relating to self and to the surrounding world. He was most definitely low in his sense of coherence.

The therapy focused on helping him back into contact with his self and others also. It took three months of intensive therapy to make this happen. He entered into a huge personal crisis, where he mentally returned to childhood, cried constantly for a period of time as he re-experienced how he as child was treated badly by both his father and mother; during the therapy he confronted his childhood reality and learned how he then took all his parents problems in (called “introjections” in the therapy) and since then lived from that crippled existential position, spoiling his life for so many years. This process is called “spontaneous regression” in clinical holistic medicine, and it happens when a patient who intends to heal finally gets the resources necessary for the healing process (75). After the healing crisis (metamorphosis) he felt much better indeed. He actually did not feel sick anymore and started quite suddenly to work again.

In the meantime the hospital physicians had established his exact diagnosis and allocated the chemotherapeutic treatment. He therefore needed a final check-up at the hospital to establish the tumour burden and exact health status before initiating the treatment. But the scan now showed no sign whatsoever of the patient being ill. The patient told us that the hospital physician made a big cry out of surprise and used rather bad language. He just could not believe that the patient’s cancer had suddenly disappeared. The PET scan showed normal conditions and no area suspect for cancer. The CT-scan radiologist concluded: “Compared with the earlier CT scan (three months earlier) there are significant remission of earlier seen pathologically enlarged retro-peritoneal lymphatic glands” and in conclusion: “No sign of changes due to malignancy. The CT-scan shows complete remission of the retro-peritoneal tumours found earlier”.

The patient continued to go to control at the hospital for six months, but the cancer did not

reappear. Most interestingly the patient told the holistic therapist (SV) at that point that he now had got a completely new life – “as if he was part of a completely new movie”. Now he was able to love and be close and intimate to other people. He was happy with his girlfriend – whom he hated before and wanted to separate from. He felt good about himself and at home in the world.

During the process of healing his self-rated quality of life (QOL5) (92) went up from 3.2 (under neither good nor bad) to 2.2 (good), and his self-rated physical health went from 4 (bad) to 2 (good) on a five point Likert scale from QOL5. This was a large improvement of his quality of life, and a very large and radical improvement of his self-rated health, documenting the shift in his subjective experience of life and health. His self-rated quality of life (QOL) improved from 3 to 2 on the Likert scale as measured by QOL1 (92). He had a total of 14 sessions of CHM-treatment, and 250 hours (estimated) of exercise at home between sessions.

Discussion

Improving the quality of life can be done in a few days or weeks by the recovery of character, purpose of life and will to live. We believe from working with over 500 patients with clinical holistic medicine (CHM) that the gains on quality of life, health and ability in general are permanent. We have seen no significant side effects to the CHM-treatment, but patients often have temporary, developmental crises, when they overcome old trauma and enter into a new kind of life and experience (93).

Hippocratic medicine, in the modern form of CHM, have now been clinically tested on various samples of patients with physical illness and chronic pain, mental illnesses, sexual and existential problems, and we have found it surprisingly efficient. Often even severe health problems have been solved in only 20 sessions and one year of therapy.

We believe that all physicians are ethically obliged to take medical science a step further and develop new treatments, where the old ones have failed or are insufficient. We believe that holistic medicine can also help cancer patients subjectively to improve their quality of life; as we have already seen

happen in patients with a wide range of diseases. We are still developing the CHM-method, but we feel it is safe to conclude that the reason holistic medicine has been on the market for over 2000 years is that it is extremely efficient. The possibility that CHM actually can induce spontaneous remission of cancer indicates that Hippocrates' holistic medicine might be the most efficient medicine ever invented by man; it definitely seems to be the least harmful treatment for cancer we have if it works.

It is impossible to say if the spontaneous remission reported in this paper was actually induced by the CHM-therapy, but as it happened according to holistic medical theory, and as the subjective sense of coherence was recovered immediately before the remission of the cancer, we find it likely to be the case.

Holistic medicine aims at improving the patients QOL, and is thus compatible with any other treatment, biomedical or complementary. What is of great importance in the actual case is the extreme speed of the full recovery happening within only three months. For the many cancers known to grow slowly, it might therefore be considered to try a CHM-treatment just after the diagnosis and before engaging in the much more demanding chemotherapeutic treatment, that often has serious side effects. In this actual case, the treatment with CHM went so fast that the physicians at the hospital did not even establish the diagnosis and thus the rational biochemical cure, before the cancer was gone, probably due to the treatment with clinical, holistic medicine (CHM). This way of complementing a biomedical examination and treatment can only be considered as completely ethical and totally without any other problems, as it cures the patient without colliding with or postponing a chemotherapeutic treatment.

The recovery of human character, purpose of life, coherence, and will to live, with consciousness-based, holistic medicine (CHM) seems both fast and efficient in improving the QOL and health at least in some patients with cancer. We find it important that the holistic treatment for the patient highly motivated for personal development can be done with a limited number of hours of holistic therapy during a few days or weeks. From a holistic perspective cancer can be understood as a simple disturbance of the cells, arising from the tissue holding on to a trauma with

strong emotional content, in what we call "a blockage", allocating the function of the cells from their original function in the tissue to a function of holding emotions. Improving QOL and helping the patient to process and integrate these traumas might help the patients to survive longer or in some cases heal completely.

We believe that the consciousness-based/holistic medical toolbox has a serious offer to patients with metastasised cancer, and we will therefore strongly encourage the scientific society to explore these new possibilities. Our holistic medical research meets both ethical dilemmas and practical difficulties, but it seems evident from the presented case in this paper that the problems might be much less than we expected some years ago (2).

To support the patient in learning from his disease the mastery of coherence of body and life, and using the crisis of cancer to recover the human character and the purpose of life seems turning a personal potential disaster into the greatest gift of all. When it comes down to it, life is not just about surviving; what is more important is to live fully, to learn from the great challenges of life, and to obtain the optimal quality of life while being here.

The limitation of this research is that we are presenting a case study and not a large group of patients, but that is the possibility we have at the moment at the Research Clinic for Holistic Medicine in Copenhagen, which is a private clinic, where the patients themselves have to finance their treatment and the patient flow not as large as in a public medical center.

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