

Case Analysis

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Vitamin C

62 yo female with sarcoma

- Conventional treatment with chemo and radiation
- Also does HDIVC
- Disease resolution
- Disease free x 3 years while on HDIVC therapy
- Transition to heavy metal work up:
 - High provoked lead in urine
- Started chelation therapy for lead. Movement of lead, arsenic and aluminum mobilized.
- Patient still alive and well without signs of return. Over 5 years from diagnosis.

Vitamin C + ART

62 yo female with breast cancer HER2/neu positive
Conventional treatment with surgical removal and
Herceptin only x 1 year. Patient refuses radiation and
further treatment.

- Starts HDIVC+ART 6 months into treatment
- Disease resolution
- Disease free x 6 years currently
- Does IV 50 grams + ART every 3 months currently
- No signs disease

Vitamin C Nutrients and Hydrogen Peroxide

- Fatigued, generally stressed 42 year old female. Repeated respiratory infections during the fall and winter months.
- Allergens, food intolerances
- Work requirements increase, exercise routine
- Heat of enclosed home and work, mold potential
- Nutrient infusions with higher dose Vit C 25 gms
- Alternating with Hydrogen peroxide
- Supportive nutrients and glutathione enhaler

Nutrient and rehydration, HDIVC, ART

- 88 year old female with eGFR 28. Dementia present. DM type II and on insulin. Has a history of poor blood sugar control. Has a history of CLL with possible recurrence recently.
- Life time work in dry cleaners, exposure to perchloroethylene or tetrachloroethylene.
- Chemical toxicity leads to inability to utilize insulin. Nerve dysregulation and carcinogenic
- Nutrient and hydration replenishment infusions
- HVIVC, ART and alternating nutrient replacement infusions

Nutrients Vit C

- 20 year old female with mast cell activation syndrome, POTS present. Induced after taking 1 dosage of levoquin for infection. Woke up next morning with body pains and weakness. Very reactive to substances. Abdominal pain present and lack of appetite. Has seen many specialist.
- Infusion of small amounts of IV nutrients .25 to .5 mLs each
- Hydration and repletion Ivs
- DMSO added to infusions initial 1 mL increased up to 5 mL
- Oral liquid vitamins 10 ml vs the usual 60 mL
- Oxygen therapies: ozone, hydrogen peroxide, UV light

HDIVC H2O2 Nutrients

- 22 year old with elevated ASO and Anti-DNASE. Cunningham profile high. Dx. with PANS/PANDAs by another physician. Has failed 3 rounds of oral antibiotics and oral herbals.
- HDIVC 50-75 grms weekly
- Alternating with H2O2
- Nutrient infusions monthly
- On going prognosis

Oxygen therapies, Nutrients, GSH, H2O2

- 42 year old female with a history of uterine cancer which successfully has been in complete remission for 4 years. Received standard conventional oncological treatments and was pretreated with glutathione before oxaliplatin. Has a hx of high cadmium and lead which before cancer dx was tx with 30 rounds of chelation. Metals remained high and unchanged. She also completed high dose vitamin C during chemotherapy and after. However, she presents with extreme fatigue. Needing to nap every 10 minutes post chemotherapy. She has been cleared by cardiology, endocrinology and pulmonology. Basically every specialist without known cause. Final diagnosis is chronic fatigue syndrome and main chronic infections.

- IV and Oral Nutrient infusions with glutathione
alternating with
- HD Vit C 25-50 grms
- Oxygen therapies
 - Ozone
 - H2O2
- Resolving symptoms still fatigued and resting often
- Consider UV light therapy