## Helixor

Mistletoe therapy for tumor patients



Improvement in quality of life for breast cancer patients during chemotherapy with Helixor® A adjuvant therapy

Tröger, W.: Helixor®-therapy during chemotherapy. Results of a randomized clinical trial. Onkologie 33(suppl 2), 34 (2010)



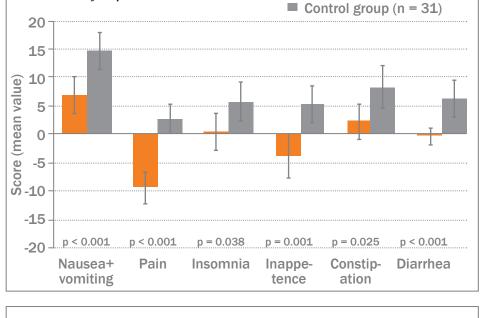


Positive influence of Helixor® A adjuvant therapy on the quality of life of breast cancer patients, which is impaired by chemotherapy, and on the decrease in the number of neutrophilic granulocytes

**EORTC** symptom scales

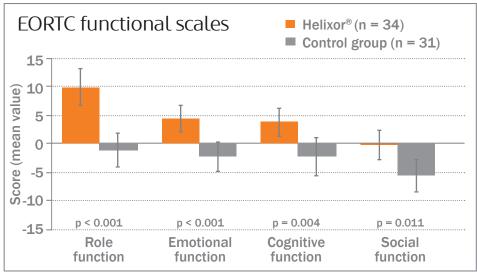
Quality of life was ascertained using the EORTC QLQ-C30 questionnaire.

With 4 function and 6 symptom scales, there was a significant difference in the average score in favor of the patients also treated with Helixor® A.



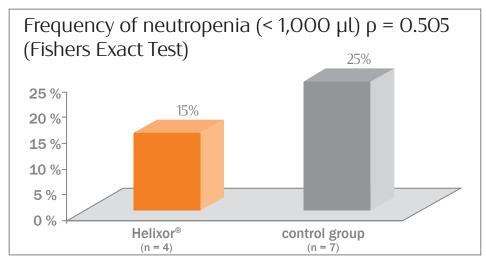
 $\blacksquare$  Helixor<sup>®</sup> (n = 34)

In the functional scales, an *increase* in the score corresponds to "improvement", while a *decrease* in the score in the symptom scales represents "improvement". Group comparison of the mean values using Dunnett's test.



Neutropenia occurred less frequently in the Helixor® A group than in the control group:

occurrence in 15.4% vs. 25.0% of the patients (p = 0.505, Fisher's exact test).



### Results

- Helixor® group better than control group in almost all EORTC dimensions
  - Significant in 10 of 15 dimensions (p < 0.05)</li>
  - Differences clinically relevant (difference at least 5 score points)
- Neutropenia less frequent in Helixor® group than in control group

#### Good tolerance

- The only adverse effect observed for Helixor® A was 42 excessive, but spontaneously reversible, local reactions following a total of 1,527 injections (2.75%).
- Conclusion: high level of drug safety for Helixor® A during chemotherapy.

#### Conclusions

Adjuvant treatment with Helixor® A during chemotherapy

- improves the quality of life for breast cancer patients
- reduces the frequency of chemotherapy-induced neutropenia.

**Patient population:** breast cancer patients following surgery  $(T_{1.3}N_{0.2}M_0)$  with planned

chemotherapy (6 cycles CAF)

Aim of the study: testing the influence of Helixor® A adjuvant treatment on

quality of life and neutropenia

Study design: prospective, randomized open pilot study (phase III)

Number of patients: 65 patients (34 Helixor®, 31 controls)

Comparison groups: Treatment group: CAF + Helixor® A, 3x per week s.c.,

dose escalation from 1 mg  $\rightarrow$  max. 200 mg

Control group: CAF alone



Mistletoe therapy for tumor patients



# Integrative oncology with Helixor®

#### Treating tumor patients integratively

In integrative oncology, the holistic mistletoe therapy from Helixor significantly improves the quality of life for patients at all stages of tumor treatment.

It stimulates self-healing and minimizes ailments, and its efficacy has been documented in numerous reviews and trials.

For questions on eligibility for reimbursement and for medical advice:

Telephone: 0049 (0)800 9353-440\* Fax: 0049 (0)800 9353-500\* F-mail: beratung@helixor.de

> \*free from German landlines



Helixor® A/-M/-P injection solution. Composition: Aqueous extract of fresh mistletoe leaves (1:20), special blend of winter and summer harvests in a standardized manufacturing process. Manufacturing of Helixor® A from fir mistletoe, Helixor® M from apple tree mistletoe, Helixor® P from pine tree mistletoe. The amount of fresh plant used to produce an ampoule is given in mg. Therapeutic indications: In accordance with the anthroposophic knowledge of man and nature. Malignant and benign tumorous diseases, stimulation of bone marrow activity, relapse prevention after tumor surgery, defined precancerous conditions. Contraindications: Acute inflammatory, feverish disorders, mistletoe allergy; pregnancy: if strictly indicated. Adverse effects: Local inflammation, reactions at the subcutaneous injection site, fever, flu-like symptoms, regional lymph node swelling, activation of inflammation, allergic reactions. Note: If there is a proneness to phlebitis, the injections are to be administered outside of the regions at risk of inflammation. In the event of pronounced hyperthyroidism, a delayed dosage increase is indicated. Dosage: s.c. according to the guidelines for treatment with Helixor®. In principle, begin with small doses. Increase dosage gradually while taking into account the patient's reaction. Commercial forms: Series packs (SE I - IV) with 7 ampoules; original packs (OP 0.01 - 100 mg) with 8 ampoules. Large packs and bundle packs (BP) with 4 x 7 amp. of SE II + SE IV also available. Helixor Helimittel GmbH & Co. KG • Fischermühle 1 • 72348 Rosenfeld • mail@helixor.de • www.helixor.de