

Bilateral asynchronous renal cell carcinoma with lung metastases: A case report of a patient treated solely with high-dose intravenous and subcutaneous *Viscum album* extract for a second renal lesion

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Background

- Bilateral asynchronous renal cell carcinoma (RCC) is infrequent.
- Immunotherapy is the first-line treatment for advanced RCC not controlled by locoregional therapy.
- Viscum album* extracts (VAE) have been shown to improve quality of life as well as immunological and antineoplastic properties in different types of cancers.

Material and methods (Case presentation)

A 67-year-old man was diagnosed with Fuhrman grade 3/4 RCC, stage pT1bN0M0 in the right kidney. During the subsequent 6 years, he underwent a right nephrectomy and two metastasectomies (lung). Then an RCC lesion of the left kidney was detected. The patient refused a second nephrectomy and was treated solely with high-dose intravenous and subsequent subcutaneous VAE.

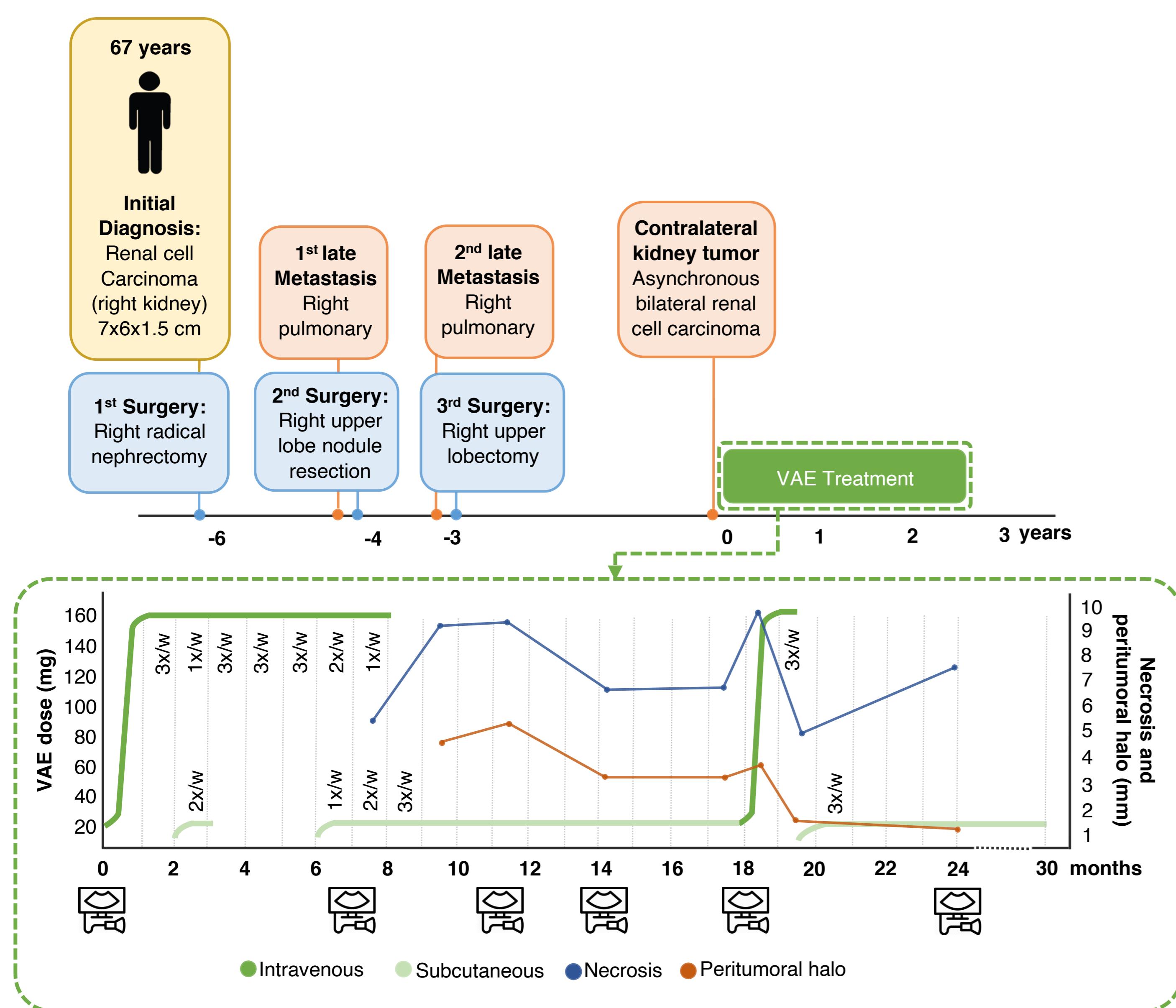


Figure 2.- Timeline of the patient with asynchronous bilateral RCC stage IV treated with VAE for 30 months.

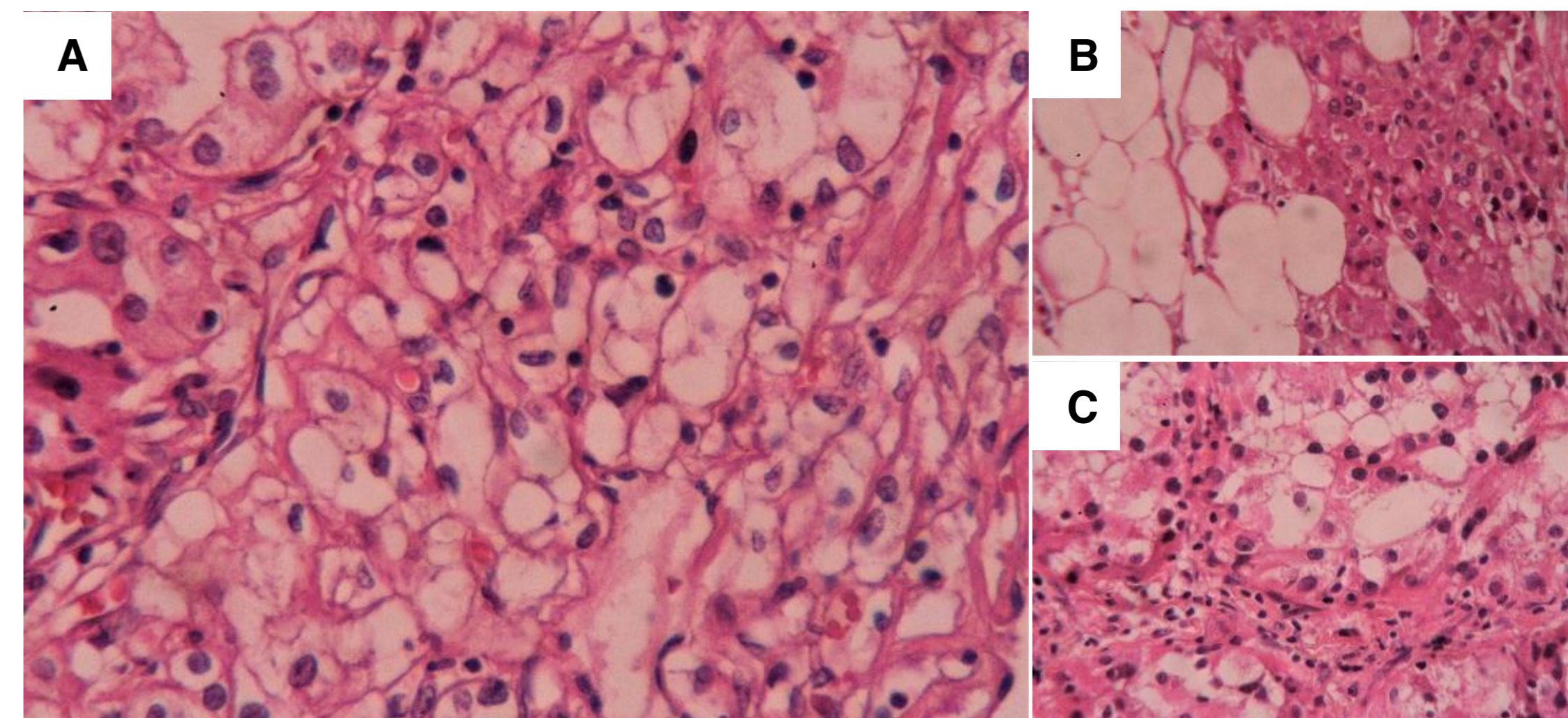


Figure 1.- A-B: Biopsy of the primary renal tumor: A: Fuhrman grade 3/4 clear cell RCC with moderately irregular nuclear contours and visible nucleoli. B: fat tissue slightly compromised. C: Biopsy of the pulmonary metastasis: compatible with primary clear cell RCC.

Results

- A central necrotic area and a peritumoral halo were seen on an ultrasound follow-up from month 7.
- After 2.5 years of VAE treatment, 9 months of intravenous treatment and subsequent subcutaneous treatment, no tumor progression was detected.
- The patient remained asymptomatic with a good quality of life during the whole treatment period. He did not present any adverse reaction to the intravenous and subcutaneous VAE applications.

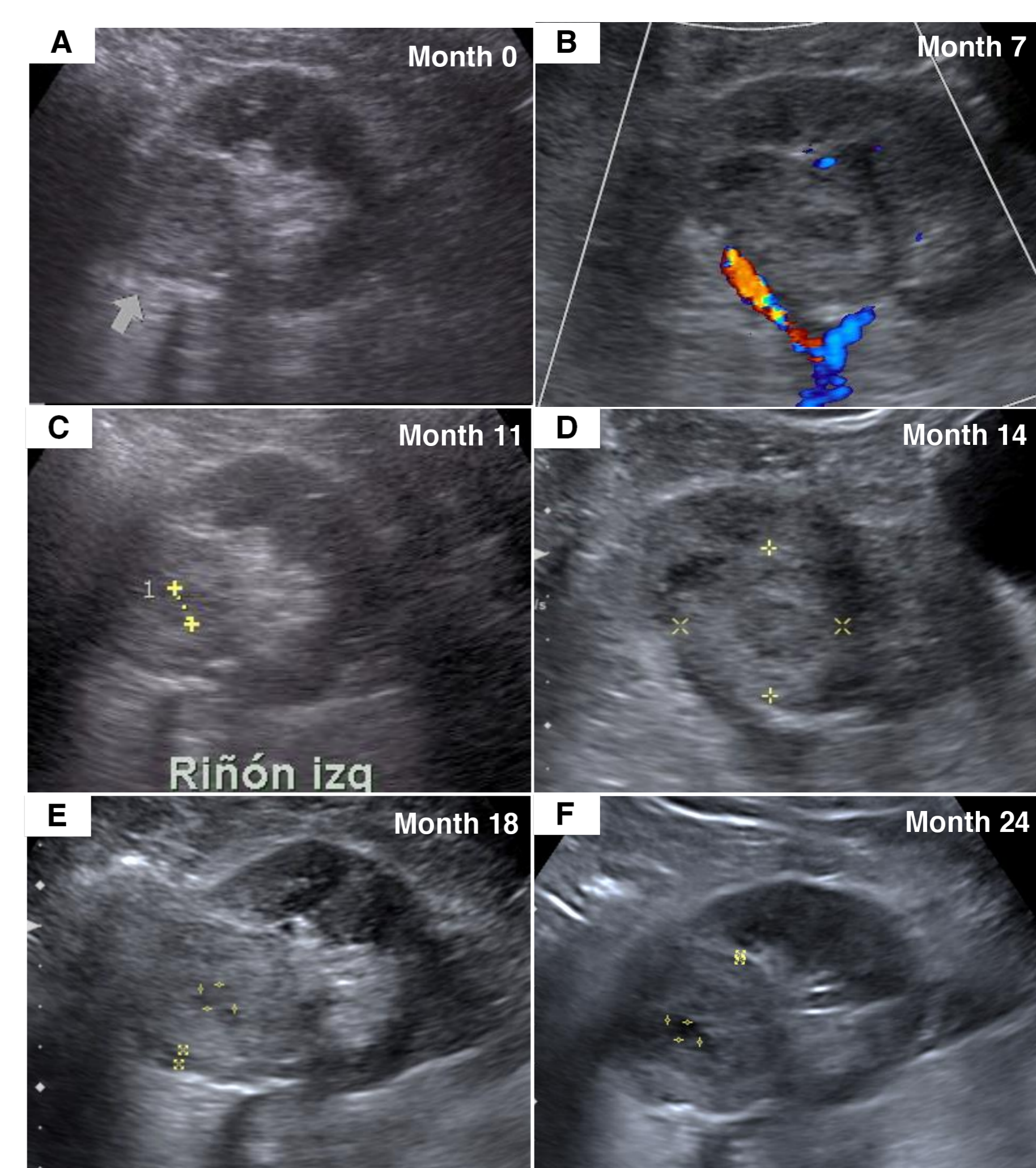


Figure 2.- Kidney ultrasound evolution of the clear cell RCC patient during 24 months of VAE treatment. A peritumoral and necrotic area were observed from month 7 until month 24 (last follow-up). A-B: ultrasound from month 0, 7, 11, 14, 18, 24 respectively.

Conclusion:

- As far as we are aware of, this is the first report of a patient with metastatic RCC with an RCC lesion of the second kidney treated solely with high-dose intravenous and subcutaneous VAE, associated with 2.5 years of progression-free survival and a good quality of life. The use of VAE in RCC should be carefully documented and published to determine future research.

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