

Clinical Image

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Theranostic modality by NaCl+KCl solution on multiple metastatic prostate cancer: A clinical image***Corresponding Author: Chur Chin**

Department of Emergency Medicine, Semin
Hospital, Daegu, South Korea.
Email: khancristo@nate.com

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Abstract

We report a case of multiple metastatic prostate cancer. A 63-year-old man presented with both paraplegia with anesthesia following transurethral resection of prostate (TUR-P). 18F-fluorocholine positron emission tomography-computed tomography (18F-FCH PET/CT) and magnetic resonance imaging demonstrated multiple axial bone and pulmonary metastasis with multiple lymph nodes invasion. A palliative radiation therapy was performed. The patient's pulmonary nodules were disappeared after infusion of a NaCl+KCl solution.

Keywords: NaCl+KCl; Colloid gold-camostat mesilate powder; Prostate cancer; Multiple bone metastasis; Pulmonary nodules; Multiple lymph node invasion.

Case description

The patient was a 63-year-old man who presented with severe both lower limb weakness progressing for 3 days before presentation. A neurological examination revealed both paraplegia below T10 sensory dermatome with anesthesia. The only abnormality found in erythrocyte sedimentation rate: 104 mm/hr, C-reactive protein 3.35 mg/dl. 18F-fluorocholine Positron Emission Tomography-Computed Tomography (18F-FCH PET/CT) shows increased F-FCH uptake on left pericardial and urinary bladder (stage T4N1M1) and enlargement of bilateral multiple pulmonary nodules. Electrocardiography showed Wenchebach type second degree Atrioventricular (AV) block. Moreover, increased F-FCH uptake in para-aortic, aortocaval, retrocaval lymph nodes. A magnetic resonance image obtained with and without contrast showed multiple destructive lesions in axial bones of thoracic, lumbar and sacral region (T 12,L 1-3,S 1-2). Transurethral Resection of Prostate (TUR-P) revealed prostatic cancer. The patients received palliative radiotherapy. The patient subsequently received 250 mL of normal saline with 5 cc of Potassium Chloride (KCl) as a graphene exfoliator (Figure 1), intravenously over 6 h, multiple pulmonary nodules in both lung field were disappeared (Figure 2) [1,2].

Declarations

Ethical agreement: Our institute does not require ethical approval for reporting individual case or case series.

Conflicts of interest: The author declares no conflicts of interest regarding the publication of this paper.

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Figure 1: Proposed mechanism to exert carcinogenic effect that can be removed by colloid gold with camostat mesilate powder. red arrow: The Presence of Lipid Nanoparticle (LNP)-encapsulated plasmid DNA. blue arrow: LNP adsorbed on graphene.

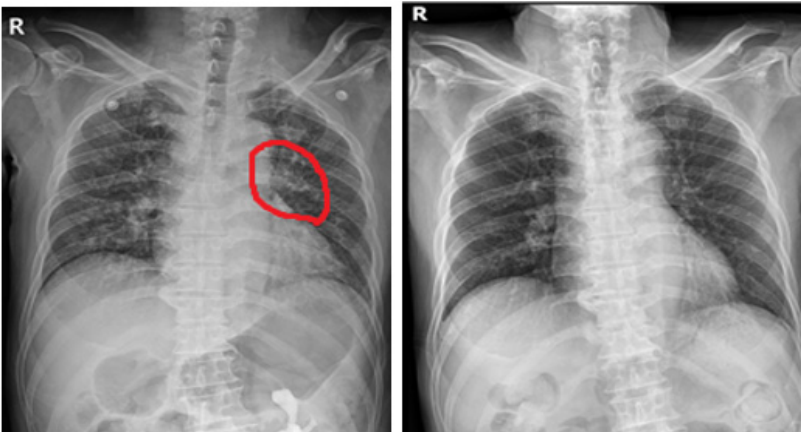


Figure 2: Instant disappearance of multiple pulmonary nodules by NaCl+KCl solution.