

Caucasian with Pan Colonic Diverticular Disease

Patient Overview

MR.M is a 67-year-old Caucasian male diagnosed with Pan Colonic Diverticular Disease and Terminal Ileitis. In 2022, he presented with markedly raised tumor markers, prompting initiation of CRT-REDOX+ and LIPON therapy. The patient commenced treatment on 22 November 2022 and completed the protocol on 7 February 2023. Following treatment completion, his tumor markers normalized, indicating a positive therapeutic response.

Treatment Timeline

- **22 November 2022:** Initiated CRT-REDOX+ and LIPON treatment protocol
- **7 February 2023:** Completed CRT-REDOX+ and LIPON treatment course
- **8 February 2023:** PET Scan performed to assess treatment response

Current Status

Post-treatment PET Scan conducted on 8 February 2023 revealed no FDG uptake indicative of malignancy. Tumor markers have normalized to within reference ranges. The patient has successfully completed treatment and returned to his home country, the United Kingdom, for ongoing monitoring and follow-up care.

Treatment Documentation

The tables below summarize treatment visits, dosing schedules, laboratory findings, and clinical progress.

CRT-LIPON X	CRT-LUMINA X	CRT-REDOX X	CRT-TROVITE X	FRT	LAB TEST X								
Type of Immunisation	DOSE 1	DOSE 2	DOSE 3	DOSE 4	DOSE 5	DOSE 6	DOSE 7	DOSE 8	DOSE 9	DOSE 10	DOSE 11	DOSE 12	
▶ 1-C	22/11/22	29/11/22	07/12/22	13/12/22	20/12/22	29/12/22	04/01/23	10/01/23	17/01/23	24/01/23	31/01/23	07/02/23	

Table 1.1: CRT-REDOX Treatment Record

CRT-LIPON X	CRT-LUMINA X	CRT-REDOX X	CRT-TROVITE X	FRT	LAB TEST X								
Type of Immunisation	DOSE 1	DOSE 2	DOSE 3	DOSE 4	DOSE 5	DOSE 6	DOSE 7	DOSE 8	DOSE 9	DOSE 10	DOSE 11	DOSE 12	
▶ 1-C	22/11/22	29/11/22	07/12/22	13/12/22	20/12/22	28/12/22	04/01/23	10/01/23	17/01/23	24/01/23	31/01/23	07/02/23	

Table 1.2: CRT-LIPON Treatment Record

centre		KDK	KDK	PANTAI	GN
test	date	22.11.22	10.01.23	07.02.23	normal range
AFP		5.4	-	3.5	<'9.0ng/ml
CA 15-3		-	-	20.5	0-23.5u/ml
CA 19-9		138.5	54.9	27.1	<35u/ml
CA 125		-	-	21.1	< 35 u/mL
CEA		19.9	12.8	6.4	No smoker< 5.1 ug/L- smoker <10.0
PSA (total)		8.515	6.721	-	<4.000
H.C.G (quantitative)		-	-	-	
Lipase		-	-	-	11 - 82
Serum Amylase		24	-	-	28 - 100
CRT-REDOX+		D1	D8	D12	
CRT-LIPON		D1	D8	D12	
CRT-LUMINA		-	-	-	

TABLE 2: Real-Time Laboratory Results

ITEM CATEGORY: CT/PT

REPORT :

TYPE OF STUDY: I8F-FDG PET/CT

CLINICAL INFORMATION:

Presented with loss of weight, appetite, and raised CEA.

INDICATION: Investigation for occult malignancy.

PROCEDURE:

Body weight: 58kg. Fasting Blood Glucose: 5.7mmol/L. PET/CT scan from vertex till mid-thigh with oral contrast was performed 60 minutes after intravenous administration of 5.79mCi I8F-FDG. SUVmax was calculated based on gross body weight.

CONCLUSION:

- 1) Small focal FDG uptake in the proximal sigmoid colon could be due to physiological bowel activity or inflammation. However, early malignancy cannot be ruled out in view of raised CEA.
- 2) The hypodense lesion in left cerebellum could be due to infarct. Suggest MRI brain.

PET SCAN RESULT