# CASE REPORT – USE OF ACUPUNCTURE, HOMOEOPATHY, AND CHINESE HERBS FOR THE TREATMENT OF CHRONIC RENAL DISEASE IN A DOMESTIC SHORT HAIR FELINE.

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### **ABSTRACT:**

A 12 year old domestic short hair feline was presented with chronic renal disease. The symptoms included inappetance, dehydration, lethargy, halitosis, weight loss, vomiting, and lower back pain. Acupuncture and Chinese herbs based on Traditional Chinese Medicine (TCM) and homoeopathy was used to manage these symptoms and improve quality and duration of life.

## **SIGNALMENT:**

"Fiasco", a 12 year old, male neutered Domestic Short Hair feline. His weight on presentation was 5.6kg.

#### **DIAGNOSIS:**

Fiasco's renal disease was first diagnosed in July 2008 and progressed over the next 9 months. In April 2009 he suffered a week episode of inappetance, dehydration, lethargy, and aggression. He was admitted to his regular veterinary services for hospitalisation, intravenous fluids and appetite stimulants. Bloods test (Table 1) showed stage 4 renal disease (IRIS, 2010) and euthanasia was recommended to the owner which she declined and brought home from the surgery.

Fiasco had also been treated for lameness of his left fore leg. Radiographs showed mild osteophytes of the intermedioradial carpal bone. Medications included Metacam, Tramal, and Cartrophen reduced his limping but he remained holding his leg up on sitting. Pain was evident on manipulation of his left elbow but still had full range of movement.

A grade 2/6 systolic sternal heart murmur had been present for some time. An intermittent cough and nightly wheeze started August 2008. Radiographs showed increased pattern of the lungs on the left lateral radiograph and some loss of distinction of the cardiac cranial border of the heart. He was treated with Doxycycline, however the cough continued intermittently. Occasional vomiting started after September 2008.

Previous blood test results are listed below in Table 1 below.

Lab Value	26/7/08	29/7/08*	2/9/08	15/4/09
Urea (5.7-12.9 mmol/L)	17.7		14.6	46.9
Creat (71-212 umol/L)	297		360	1202
PCV (0.28-0.45)	.36		.33	.36
Urine SG		1.026		

\*Hills K/D, Royal canon and Walthams renal diets were started at this time

Fiasco was presented on 18/04/2009 after his hospitalisation for inappetance, dehydration, lethargy, and aggression. He did not eat when released from hospital even with administration of oral Diazepam. His TCM examination revealed his Tongue (T) was lavender and thick, while his Pulse (P) was wiry. On physical examination he had a dull coat and halostosis was evident. He was lip licking, and drooled on approach of his mouth. His voice was croaky and hoarse and he was jumpy to touch especially around the upper to mid lumbar region. He was sensitive to palpate over the GB meridian particularly GB 25 and GB 29. He was generally quite weak and stiff in his hind legs. Mentally Fiasco likes to check on his owner but he never connected to her mother who had looked after him. He loves food, and bribing works well. He also likes cuddles, but never close to his face. Fiasco was however nervous around new people and liked to be dominant over other cats.

Fiasco had a western diagnosis of chronic renal disease, cardiac valvular disease, arthritis and dynamic airway disease. His TCM diagnosis based on clinical signs and blood test results is obstruction of the Triple Heater meridian, with Kidney Yin deficiency, Kidney Yang deficiency, Lung Yin deficiency with Damp pain Bi syndrome.

## **TREATMENT:**

During the first few days and a relapse in November 2009, Fiasco received 100mls subcutaneous fluids daily. The remaining time he maintained hydration on his own and additional fluid treatment was not required. A combination of other therapies was used over the next 16 months.

Acupuncture points varied each treatment according to clinical signs. These included; GB 25, GB 29, LI 11, LU 5, TH 5, BL 23, SP 6, KID 3, ST 36, BL 20, GV 14, PC 6, and BL 15. On the last morning extra acupuncture points were used including GB 20, GV 20 and LIV 2. (Worth & Muller, 2004 and Maciocia, 2003)

- LI 11 and Kidney alarm point GB 25 both even method, and reduced method on GB 29 to clear the Triple Heater obstruction.
- BL 23, SP 6, and KID 3 were reinforced for tonifying Kidney Yin and Yang.
- SP 6, KID 3 and ST 36 reinforced also used for Lung Yin tonification.
- LI 11, LU 5, TH 5 with even method on these local points for chronic Damp pain obstruction of the elbow.
- ST 36 and SP 6 reinforced furthermore drains Damp with reinforcing of BL 20.
- GV 14 with ST 36 were reinforced for immune support with even method on LI 11
- PC 6 and BL 15 were reinforced for Heart support
- GB 20, GV 20, and LIV 2 were reduced to clear Damp Heat due to Upward disturbance of Wind Phlegm on the last day.

Seirin No. 1 (0.16) x 15mm acupuncture needles was used for points on the extremities and Seirin No. 3 (0.20) x 30mm for points on the body. Fiasco received acupuncture three times in the first week then reduced sessions to approximately every 6 weeks. Extra sessions were given during November 2009 with an acute relapse of his condition and according to lameness periods or suitability.

The Chinese herb formula, *Liu Wei Di Huang Wan* or Rehmannia Six combination, is indicated for kidney diseases that have a pattern of Kidney Yin deficiency and Heart Fire (Marsden, 2007). In this formula there are three supplementing herbs; Rehmannia (*Sheng Di Huang*) nourishes Kidney Yin and cools Blood; Cornus (*Shan Zhu Yu*) nourishes Liver Blood and Yin and astringes Kidney Essence leakage; and Chinese Yam or Dioscorea (*Shan Yao*) also astringes Essence and warms and nourishes the Spleen (Sun ten, 2006). To balance these tonics there are three draining and moving herbs; Alisma (*Ze Xie*) promotes urination in the lower burner where Rehmannia (*Sheng Di Huang*) acts giving it a cooling action; Poria (*Fu Ling*) provides Spleen support and leeches Damp from the middle burner where Chinese Yam (*Shan Yao*) acts; and Moutan Bark (*Mu Dan Pi*) clears Heat and drains Fire from the Liver, moderating the empty Heat accumulating in the system as well as the warming and astringing effects of Cornus (*Shan Zhu Yu*) (Marsden, 2007). *Liu Wei Di Huang Wan* was given at ½ tsp twice daily starting from 11 days into treatment and continued for the entire duration.

Homoeopathy utilized at the early stages of treatment included; Solidago 6C for kidney support, Apis 30C for kidney disease with thirstlessness, Nux vomica 30C for aggression with pain as well as kidney disease accompanied by vomiting, Berberis and Cantharis 30C for radiating pain from the kidneys (RADAR 9.1v, 2007).

Homotoxicology preparations included Heel products; Berberis-Homaccord, Solidago Compositum, Nux vomica-Homaccord, Reneel oral drops and Nux vomica oral drops. Berberis-Homaccord ad us vet injection contains Berberis vulgaris 4X, 10X, 30X, 200X 4.4mg; Colocynths 4X, 10X, 30X, 200X 3.3mg, Colocynths; Veratrum 5X, 10X, 30X, 200X 3.3mg in each 1.1ml ampule.

Solidago compositum S contains Solidago virgaurea 3X, Berberis vulgaris 4X, Vesica urinaria suis 8X, Pyelon suis 10X, Ureter suis 10X, Urethra suis 10X, Terebinthina larcina 6X, Mercurius sublimatous corrosives 8X, Arsenicum album 28X, Cuprum suluricum 6X, Bucco 8X, Hepar sulfuris 10X, Capsicum annum 6X, Orthosiphon aristatus 6X, Equisetum hyemale 4X, Pareira brava 6X, Cantharis 6X, Apisinum 8X, Baptisia tinctoria 4X, Natrium pyruvicum 10X, Pyrogenium nosode 198X, Sarsparilla 6X, Bacterium coli nosode 13X, Coxsackle-virus A9 nosode 8X, Argentum nitricum 6X, 22mg each in 2.2mls.

Nux vomica-Homaccord as us vet contains Strychnos nux vomica 4X, 10X, 15X, 30X, 200X, 1000X ana 0.01ml; Bryonia cretica 4X, 6X, 10X, 15X, 30X, 200X, 1000X ana 0.01ml; Lycopodium clavatum, 5X, 10X, 30X, 200X, 1000X ana 0.015ml; Colocynthis, 5X, 10X, 30X, 200X ana 0.015ml per 5ml ampule. The Nux vomica-Homaccord oral drops

Reneel oral drops contains Berberis vulgaris 6X 100mg, Cantharis 6X 100mg, Serenoa serrulata 4X 100mg, Equisetum hyemale 4X 100mg, Populus tremuloides 4X 100mg in each 1ml.

constituents remain the same with 2X potency replacing the 4X.

1ml each of Heel Solidago Compositum and Berberis-Homaccord injections was given daily initially and during acute relapse in November 2009. 1ml of Nux Vomica-Homaccord injections were added in 6 weeks into treatment. These injections were given every 3 weeks and prior to any absence of the owner. Maintenance with Reneel oral drops at 0.35ml twice

daily and Nux vomica oral drops at 0.35ml or 7 drops once daily also started at 5 and 6 weeks respectively and used for long term treatment between visits.

Slippery Elm (*Ulmus rubra*) was introduced 5 weeks into treatment at ¼ teaspoon once daily. The actions of this herb includes demulcent, emollient, antitussive, astringent, nutrient, and laxative and thus can be used for inflammation and ulceration of GIT such as oesphagitis, gastritis, colitis, ulcers, diarrhoea, constipation, and irritable bowel syndrome (Foruge, 2007).

Dietary changes were made 9 months into the treatment from prescription renal diet with grains to a more natural carnivore diet of meat based, with added veggies, ghee, cottage cheese and more fats off meats, with no grains.

#### **RESULTS:**

After 6-7 days Fiasco started to brighten up, initially drinking a little milk, and cleaning his front paws. His tongue also became redder and was more restless at night. By another week time he had more energy, his voice started to return, appetite improved, and back to drinking water. Over the next 491 days he gained weight (5.6 to 7.15kg), his lameness reduced, only occasional limping, he had very little wheezing if heard at all, his coat became very smooth and glossy and no halitosis was evident. His vomiting did continue on average a weekly basis until a dietary change in January 2010 to more natural raw meat diet, which dramatically reduced the vomiting, indicating the vomiting was not completely related to kidney disease but rather food intolerance. The only signs of chronic kidney disease he displayed included polydypsia and a minor relapse in November 2009 with inappetance where repeated daily subcutaneous fluids and homotoxicology injections returned him to his prior condition in a few days. In August 2010 he deteriorated in a 48 hour period. He had 3 seizures within 24 hours and passed away during the 3<sup>rd</sup>. Bloods results below in table 2. Between seizures he was rested and calm and showed no signs of distress.

Table 2.

Lab Value	26/7/08	29/7/08*	2/9/08	15/4/09	22/8/10
Urea (5.7-12.9 mmol/L)	17.7		14.6	46.9	87.4
Creat (71-212 umol/L)	297		360	1202	2295
PCV (0.28-0.45)	.36		.33	.36	.33
Urine SG		1.026			

#### **DISCUSSION:**

Renal disease is classified as azotemia and urine specific gravity < 1.030 in dogs and 1.035 in cats and results from primary renal disease that has persisted for greater than 3 months (IRIS). It is characterized by irreversible renal dysfunction that tends to deteriorate progressively over months to years. Most cases are idiopathic. Other known causes include nephrotoxins, hypercalcaemia, glomerulonepritis, amyloidosis, pyelonephritis, polycysitic kidney disease, nephroliths, chronic urinary obstruction, drugs, lymphoma, neoplasia, feline infectious peritonitis and diabetes mellitus (Tilley & Smith). There is a greater than 75% of loss of functional renal mass before blood urea nitrogen and creatinine rise out of normal reference levels. International Renal Interest Society (IRIS) recognizes four stages of renal

disease. It has been shown to be strongly predictive for the survival in cats with stage IIb, III, and IV with median survival times of 1,151 days, 778 days and 103 days respectively (IRIS, 2010).

Conventional treatment is according to the IRIS stages. In type I and early II renal disease the focus is on eliminating primary diseases and to prevent progression to further stages. This includes treatment of urinary tract infections, hypertension, and proteinuria. Once a cat has reached later II, III and IV stages where there is a progression of the disease, the emphasis changes to serial measurements of creatinine concentrations and managing symptoms of the disease with low protein and sodium diets, intestinal phosphate binders, darbepoetin administration, antiemetics, calcitriol treatment, and subcutaneous fluids are advocated (IRIS, 2010).

In Fiascos case no urine-protein-to-creatinine ratio or blood pressure measurements were taken. Only going on his plasma creatinine concentration (1200 umol/L) Fiasco was at stage IV renal disease and it was highly likely the disease would progress and end in death. Treatment was thus aimed at slowing the progression of the disease and improving his quality of life. TCM treatment was aimed at clearing the Triple Heater obstruction, tonifying Kidney Yin, Kidney Yang, and Lung Qi, with relieving Damp pain obstruction of his left fore leg.

Triple Heater (TH) is the gate keeper of the Kidneys, governing the flow in and out of the Yin reservoir. GB 25 is the specific point that influences the movement of Yin and Qi in and out of the Kidneys. It also prevents descent of Heart Yang energy to interact with Kidney Yin to produce Kidney Qi. The Kidney Yin cannot ascend to cool the Heart and interact with Heart Yang to form Heart Qi. They do not meet in the middle burner to produce Qi in general (Marsden, 2007). Obstruction of this process results in declining Qi and the risks of death is imminent. In other species TH obstructions are usually exuberant patients with elevated alkaline phosphatase (ALKP) and cholesterol levels (Marsden, 2007). In cats they are usually more subdue with active Gall Bladder points like Fiasco's which indicate the patient is not just Kidney Qi deficient. With these cases the Tongue is purple to lavender in colour, and the Pulse is deep and wiry. Triple Heater obstruction also has symptoms of Rebellious Qi and manifests as chronic cough, nausea and vomiting. Prolonged presence of Stasis and slow depletion of Qi is one of the most common causes to cardiac disease in small animals and is likely to be the cause for Fiascos valvular murmur over time. Acupuncture points to treat TH obstruction includes; GB 25, GB 24, GB 34, BL 19, BL 18, BL 20, GV 9, LI 11, LIV 14, TH 6, CV 12, and active GB points to clear the obstruction (Maciocia, 2003 II).

Once the obstruction is relieved, Kidney Qi tonification may be required. With the inadequate Kidney Yin failing to and cool Heart Fire, heat is trapped in the upper body and increasing cold in the lower body (Marsden, 2007) producing Fiasco's symptoms of red tongue (day 4 of treatment), increased thirst, nocturnal restlessness, rapid and forceful pulse. Other patients may also demonstrate crying at night, and seeking cool surfaces. The Heart Fire failing to descend prevents warming of Kidney Yang which results in his polyuria, weight loss, dry coat, lower limb weakness, and low back stiffness. Acupuncture points for renal disease from Kidney Yin deficiency include CV 4, KID 3, KID 6, KID 10, KID 9, SP 6, and CV 1 reinforced with no moxa (Maciocia, 2003 I). Points for Kidney Yang deficiency include BL 23, CV 4, GV 4, CV 6, KID 3, KID 7, BL 52 (Maciocia, 2003 I)

Fiascos hoarse voice continued after the initially treatment. The deficiency of Kidney Yin fails to rise fluid to the Lungs for moisture resulting in Lung Yin deficiency creating his dry

cough in the evening. Points to treat Lung Yin deficiency include LU 7, LU 9, LU 1, SP 6, CV 4, ST 36, and KID 3 (Maciocia, 2003 II).

Damp painful (or Fixed painful) obstruction syndrome is where there is Dampness obstruction characterized by pain, soreness and swelling in the muscles and joints with a feeling of heaviness and numbness. (Maciocia, 2003 II) The pain is fixed in one place. In human practice the obstruction can be more easily classified according to the location of the pain in proximity to the channels along the limb. This is not always the case for treatment of animals. General distal points for the elbow include LI 4, LI 1, TH 5, and TH 8. Local points to consider include LI 11, LI 12, TH 10, SI 8, and LU 5. Points for Damp obstruction include SP 6, SP 9, GB 34, ST 36, BL 20 reduced method in acute and even method in chronic cases (Maciocia, 2003 II).

Numerous studies show the benefits of acupuncture for cases such as Fiasco. Chen et al (2010), shows electroacupuncture *Taixi* (KID 3) can increase the expression of NAD-dependent isocitrate dehydrogenase and Quinone reductase in the kidney tissue, suggesting an increase of energy metabolism after electroacupuncture and a close correlation between the KID 3 and the kidney. Tsay (2004) studied 106 human participants in a randomized control trial indicating there were significant improvement with acupressure on fatigue in patients with end-stage renal disease. Ma (2004) showed effectiveness in 72 cases of gouty renal damage with the changes in 24-hour urinary protein content, blood creatinine, uric acid and urea nitrogen in blood before treatment and one month after treatment. And Song (2009) researched 152 cases of renal hypertension in chronic kidney disease in humans finding that the therapeutic effect and advantages of the combined acupuncture and medicine therapy were superior to the medication.

Liu Wei Di Huang Wan, employed in this case, was first recorded in the Xiao Er Yao Zheng Zhi Jue [Key to Therapeutics of Children's Diseases] by Qian, Yi and re-edited by Yan, Jizhong, A.D. 1119 (Hou & Jin, 2005). This ancient master formula contains 24gm of processed Rehmannia root, 12gm each of Chinese Yam and Cornus fruit, 9gm each of Moutan, Alisma, and Poria. Today it is used for treating deficiency of the vital Essence or Yin of the Kidneys and Liver with symptoms of thirst, night sweats, dizziness, tinnitus, frequent urination, tidal fevers, dry mouth and throat, red tongue and a thready and rapid pulse. Hu et al, 2005, showed Liu Wei Di Huang Wan can markedly improve the therapeutic effectiveness and counteract the adverse reaction of hormonotherapy in treating nephrotic syndrome, and reduce the recurrence of the disease. The individual herbs of Liu Wei Di Huang Wan have also been studied in their clinical uses.

Rehmannia (*Sheng Di Huang*) is a sweet and slightly warm herb acting on the Liver and Kidney meridian (Hou & Jin, 2005). It was traditionally used as a tonic for all wasting diseases and weakened conditions of the body (Smith & Stuart, 1973). Rehmannia has been shown by Lee et al (2009) to ameliorate the progressive renal failure potentially by the expression of angiotensin II and AT(1) receptor and by regulating TGF-beta1 and type IV collagen expression. And like wise Kang et al (2005), has also shown that Rehmannia ameliorates renal defects in rats with acute renal failure. Chae et al (2005) studied how Rehmannia induced protective mechanism in H9C2 cardiac muscle cells. Furthermore Park et al (2009) used Rehmannia on knee osteoarthritis patients in a double-blind, randomised placebo-controlled trial finding the herb to be safe, tolerable and effective for symptomatic improvement of pain and physical function.

Cornus fruit (*Shan Zhu Yu*) with a sour taste and slightly warming properties is used as an astringent for body fluids and tonic (Hou & Jin, 2005). Cornus studies have shown cornuside, an iridoid glycoside from Cornus fruit, to have remarkable antioxidant activity and inhibited myocardial cell necrosis (Jiang et al, 2010). Cornuside has also been shown to have a capacity to inhibit inflammatory response in sepsis. (Jiang et al, 2009).

Chinese Yam or Dioscorea (*Shan Yao*) is sweet in taste and acts on the Kidneys, Lungs, and Spleen (Hou & Jin, 2005). It is another tonic and restorative herb. In rats with an acute toxicity, Chinese Yam showed good improvements in renal tubular degranulation changes, necrosis and disintegration. The extract of Yam also possessed a good protection against the inflammation of central vein and necrosis of liver tissue (Lee et al, 2002). Liu et al (2009) also shows the benefits of Chinese Yam on hypertensive rats to reduce the blood pressure. Jeon et al (2006) demonstrated an improvement in digestive capability, but also affects the conversion of some intestinal flora to helpful bacteria. Chinese Yam is also a candidate for the treatment of rheumatoid arthritis with significantly inhibited the production of TNF-alpha and IL-1beta as well as down-regulating the expression of cyclooxygenase-2 and inducible nitric oxide synthase in IL-1beta- and TNF-alpha-stimulated human fibroblast-like synovial cells. (Kim et al, 2004). The flavonoid rich fraction (FRF) of Dioscorea has a strong free radical scavenging activity and modulating the energy producing mitochondrial enzymes has a cardioprotective effect (Jayachandran et al, 2010).

Moutan Bark (*Mu Dan Pi*) is bitter and pungent in taste and cold, acting on the Heart, Liver and Kidneys. It clears Heat, promotes blood circulation, and removes blood stasis (Hou & Jin, 2005). Moutan and Dioscorea were able to decrease by 10-15% the DNA stand break from hydrogen peroxide-mediated oxidative stress (Szeto et al, 2009).

Alisma (*Ze Xie*) is sweet in taste and cold, it acts on the Kidney and Bladder meridian. It is an excellent diuretic agent, used widely for dysuria, oedema and urological disorders (Hou & Jin, 2005). The ethyl acetate elution of Alisma orientalis extract can significantly inhibit urinary calcium oxalate stone formation in rats (Cao et al, 2003).

Poria (*Fu Ling*) is sweet in taste and neutral, it acts on the Heart, Spleen, and Kidney meridian. Today it is used as a diuretic for dropsy and oliguria, a sedative for palpitations and insomnia, a stomachic to eliminate food stagnation, and an anti-inflammatory for ulcers (Dong et al, 1998). The derivative triterpene acid has been linked to reduce inflammation (Yasukawa et al, 1998). Ding et al (2010) shows dosage-dependent effect of Poria suppressing acute rejection of renal transplantation. And anti-emetic activity of triterpenes has also been shown in frogs (Tai et al, 1995).

Homoeopathy is the use of highly diluted materials based on the primary concept 'like cures like', a substance that can cause an illness, which when given in the potentised form to a person with similar symptoms, can stimulate the body to naturally heal these symptoms. Preliminary data obtained by Rao et al, 2007, using Raman and Ultra-Violet-Visible (UV-VIS) spectroscopy illustrate the ability to distinguish two different homeopathic medicines (Nux vomica and Natrum muriaticum) from one another and to differentiate, within a given medicine, the 6c, 12c, and 30c potencies. Materials science concepts and experimental tools offer a new approach to contemporary science, for making significant advances in the basic science studies of homeopathic medicines.

The combination homeopathic medicines of Homotoxicology are administered based on conventional diagnoses and disease classifications in an effort to stimulate the body's natural defence system to overcome the symptoms produced in the process of getting rid of the toxins causing the illness. Heel products Nux vomica, gastricumeel and lymphostat have shown improvement in case trials of functional dyspepsia (Heinz Ricken, 1997). The same formulas also used with Coenzyme compositum and Ubichinon compositum have successfully treated Helicobacter pylori patients with gastroscopic examination, macroscopic and histologtical findings showed no evidence of Helicobacter pylori after 4 weeks of treatment (Heinz Ricken, 1997).

Slippery Elm is a neutral herb with a sweet taste consisting of mucilage, tannins and phytosterols (Fougere, 2007). Traditionally it has been used by Native Americans to treat gastrointestinal issues, topically for skin disorders and wounds, and sore eye and throat problems (Fougere, 2007). In modern times Slippery elm scavenges superoxide and peroxyl dose-dependently reducing the reactive oxygen metabolites produced by inflamed colonic mucosa making Slippery elm a novel treatment in inflammatory bowel disease (Langmead, 2002).

In has been suggested cats fed raw meat diets may live for fourteen years, compared to about twelve years for cats fed dried food. Diseases suspected to be more common in dried food fed cats are kidney disease, obesity, arthritis, bladder stones, liver disease, irritable bowel disease and diabetes (Middle, 2008).

#### **CONCLUSION:**

Conventional drugs were not used in this case simple based on the physical wellness of the cat for such a severe pathological disease. Holistic medicine acknowledges the bodies ability to make adjustments in blood pressure, motility, hormones and to stimulate the body's natural defence system to overcome the symptoms produced in the process of getting rid of the toxins causing the illness.

In this situation, not only did Fiasco outlive his predicted survival time of 103 days (491 days), the enrichment in Fiascos wellbeing over 16 months of treatment was amazing. His weight gain (5.7 to 7.1kg), smooth shiny coat, appetite, hydration, cough and lameness all improved and showed no visible signs of uraemia. Although low protein diets may be indicated for renal patients his vomiting started shortly after introduction of prescription diet and subsided once changed to a natural diet, indicating the natural diet was probably more suited to his situation. Apart from an increased thirst he displayed no other symptoms that would indicate the severity of his condition. And although a cure was not brought about, to be in such health for such an extended period of time is a successful outcome evident in photos 1-3 below.

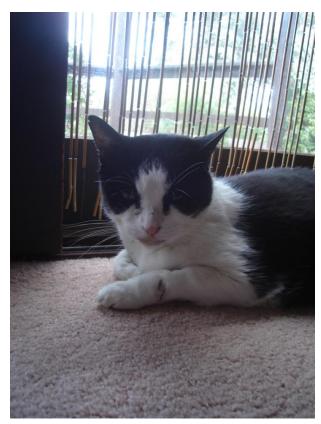


Photo 1; Fiasco before treatment April 2009



Photo 2; Fiasco September 2009, 5 months into treatment



Photo3; Fiasco May 2010, 13 months into treatment

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