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*Richard Malter*  
*James Woessner*  
*Alan Loader*  
*Helen Tyrrell*

## Complete Reversal of Stage IV Squamous Cell Carcinoma



### Background

A 71 year old male was diagnosed by a multidisciplinary oncological and radiological team as having a stage IV squamous cell carcinoma (SCC) of the floor of the mouth measuring 5cm maximal sagittal diameter filling the whole area long the teeth. Diagnosis was confirmed by PET and CT scans and histological analysis from a punch biopsy. Symptoms were bleeding from the tumour, dysarthria, difficulty eating, severe weight loss, and lethargy. The patient was informed that his cancer was incurable, but treatment might prolong his life. Treatment of five cycles of Carboplatin and 5FU was given, but after initial positive response the tumour was chemo-resistant and increased in size. Second line chemotherapy and radiotherapy were then recommended for palliative symptomatic benefit only not survival, but were declined by the patient who decided to discontinue all standard oncological examination and treatment and seek alternative treatment. The patient was assessed and treated using the Bi-Digital O-Ring Test (OMURA Y, 1977-2010; BDORT) electromagnetic field (EMF) resonance technique between two identical substances. Biochemical parameters, non-organic toxins and presence of viral infection that always exist in a malignant tumour have previously repeatedly been identified and confirmed by BDORT research <sup>[1,2]</sup>. A large amount of HBV surface antigen was detected by BDORT in the mouth SCC. Because of this finding, the liver was examined and a large HBV infection was found by BDORT measurement on the visceral surface of the organ. BDORT guided complex treatment of the liver was performed over an eight week period. The tumour was not treated. The effect of the liver treatments on the SCC during this time were also measured by BDORT.

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