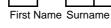
Pleurodesis Therapy with

Viscum album (Mistletoe)

Case documentation sheet

Stamp of the examining doctor

Pat.-Initials:



Pat.-No.:

1			

Forschungsinstitut Havelhöhe / Klinische Forschung, Helixor Heilmittel GmbH & Co. 03/2001

Pleurodesis do	cumentation				
Initials:	Surn.	PatNo.:	Today's Date:	Day Month	Year

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Pleurodesis documentation
Initials: Firstn. Surn PatNo.: Today's Date: Day Month Year
1.1 Basic documentation
Date of birth
Height (cm) Weight (kg)
Karnofsky score at the beginning of mistletoe pleurodesis:%(see appendix page 1/3
Type of documentation: 0 retrospektiv 1 Prospektiv 2 retro-/prospektiv prospektiv since:
2.1 Tumour diagnosis
Diagnosis Initial diagnosis _{Month}
Tumorstate at initial diagnosis
Current tumorstate
p T N M or UICC-class. I II II IV
Other classification
Current metastasis: PUL OSS HEP BRA LYM MAR
PLE PER ADR SKI SPL GEN
Other:
Histology
Grading (I – III)
Hormone receptors negative positive: <u>%</u> / <u>%</u> progesteron-recpt.
Herceptin-receptors negative positive <u>%</u>

* short code Metastasis: PUL = pulmo, OSS = bone, HEP = liver, BRA = brain, LYM = lymphnode, MAR = bone marrow, PLE = pleura, PER = peritoneum, ADR = suprarenal, SKI = skin, SPL = spleen, GEN = general metastasis

Pleurodes	is docu	mentation						
Initials:	Firstn.	Surn	PatNo.:	Today's Date:	Day	Month	Year	

1.3 Patient anamnesis (other than pleural effusion, see 3.1) Concomitant illnesses, previous operations etc. (such as Diabetes mellitus .since 1984, and coronary heart disease since 1995)	none
<u>1.</u>	
<u>2.</u>	
<u>3.</u>	
<u>4.</u>	
5.	
<u>6.</u>	
7.	
8.	
9.	
<u>10.</u>	
1.4 Current concomitant medication (other than for tumour therapy, see 2.2)	none
	none
(other than for tumour therapy, see 2.2)	none
(other than for tumour therapy, see 2.2) <u>1.</u>	
(other than for tumour therapy, see 2.2) 1. 2.	
(other than for tumour therapy, see 2.2) 1. 2. 3.	
(other than for tumour therapy, see 2.2) 1. 2. 3. 4.	
(other than for tumour therapy, see 2.2) 1. 2. 3. 4. 5.	
(other than for tumour therapy, see 2.2) 1. 2. 3. 4. 5. 6. 7	
(other than for tumour therapy, see 2.2) 1. 2. 3. 4. 5. 6. 7. 2.	

Pleurodesis do	cumentation			
Initials: Firstn	. Surn	PatNo.:	Today's Date:	Day Month Year

Type of therapy	Exact description incl. dates (from – until)	Therapy success (according to WHO*)
Operation	(such as total excision of breast cancer)	
(OP-description)		
none		
Radiation	(such as percutaneous rad., 50 Gy)	
(Radiation field, radiation dose)		
none		
Chemotherapy	(such as CMF, 6 cycles)	
(schedule, drug, no. of cycles)		
none		
Hormone therapy	(such as MPA)	
□ none		
Immune therapy	(such as Interferon)	
□ none		
Other therapies	(such as Thyme, Echinacea; mistletoe see 4.1)	

Pleurodesi	is documentation				
Initials:	Firstn. Surn	PatNo.:	Today's Date:	Day Month	Year

Type of therapy	Exact description incl. date (from – until)	Therapy- success (according to WHO*)
Operation		
(OP-description)		
none		
Radiation	(such as percutaneous rad., 50 Gy)	
(Radiation field, radiation dose)		
none		
Chemotherapy	(such as CMF, 6 cycles)	
(Schedule, type of drug, no. of cycles)		
none		
Hormone therapy	(such as MPA)	
none		
Immune therapy	(such as Interferon)	
none		
Other therapies	(such as Thyme, Echinacea; mistletoe see 4.1)	

eurodesis documentat	tion			
Initials: Firstn. Surn	PatNo.:		Today's Date:	Month Year
3.1 Characteri	sation of th	e pleural ef	fusion	
Initial diagnosis:	nth Year	Localisatio	on: 🗌 right	left
via	Clinic	Ultrasound s	can 🗌 Chest X-ray	y
	СТ	MRI		
Symptoms depending on effusion	Dyspnea Others	Cough	Pleural pair	าร
s there a pericardial e	ffusion as well?	no no	yes	
Examination of pl	eural fluid (if p	present)*:		
Puncture (date):	1.	lonth 2. Day M	Day Month	4.
Cytology				
Total protein in pleu fluid	ral			
Total protein in seru	ım			
LDH in pleural fluid				
LDH in serum				
Immunological parameters				
Mistletoe lectin antibodies				
Other				
* see appendix transudate/e				

leurodesis documentation								
Initials: First	stn. Surn	PatNo.:		Today's Date:	Day Month	Year		
	erapy of urodes		l effusio	on prior to mist	letoe	none		
Thorac	Thoracoscopy Drainage without pleural installation (Bülau, Matthys-Katheter)							
One o	One off pleurocentesis Drainage with pleural installation (Bülau, Matthys-Katheter)							
Intraple	eural therap	by with other pleur	odetics prior	to mistletoe pleurodesi	5			
Please ins	sert thera	pies in table wi	th date:		-	•		
Preparation	Dose of the preparation	Date	Thoraco- scopy	Catheter (Bülau, Matthys-K.) from - until	One off puncture	Effusion (ml)		
1.		Day Month Year						
2.		Day Month Year						
3.		Day Month Year						
4.		Day Month Year						
5.		Day Month Year						
6.		Day Month Year						
7.		Day Month Year						
8.		Day Month Year						
9.		Day Month Year						
10.		Day Month Year						
11.		Day Month Year						
12.		Day Month Year		emical examination of pleural fl				

eurodesis documentation									
Initials:	Firstn. Surn.	PatNo	.:	Today's Date:	Day Month	Year			
3.3 Mistletoe pleurodesis									
Mistletoe	preparation	IS:							
Abnoba v	iscum	Host tree							
Helixor A M P									
lscador		Host tree							
Other mis	tletoe prep.:								
Please i		pies in table wit	th date:						
Treatment No.	Dose of the mistletoe- preparation (mg or stage)	Date	Thoraco- scopy	Catheter (Bülau, Matthys-K.) from - until	One off puncture	Effusion (ml)			
1.		Day Month Year							
2.		Day Month Year							
3.		Day Month Year							
4.		Day Month Year							
5.		Day Month Year							
6.		Day Month Year							
7.		Day Month Year							
8.		Day Month Year							
9.		Day Month Year							
10.		Day Month Year							

Day Month Year

Year

Π

Day

Month

11.

12.

See example of mistletoe pleurodesis appendix page 2/3. Please insert available results of laboratory chemical examination of pleural fluid on page 7.

Firstn. Surn						Day	Month	rear
3.4 Reactions, AD	DRs d	uring	mistle	etoe p	leuroc	lesis		none
Please assess degree of adv				ng to Wł				
 none strong/pronounced 		slight/lig	ht atening		② = moo		ar / outcome	
Treatment no.	1.	2.	3.	4.	5.			,
Thoracic pain	1.	Ζ.	э.	4.	5.	·	·	·
Local burning (around puncture site)								
Dyspnae								
Cough								
Fever, raised temperature								
Max. temp. on day of intrapleural therapy								
Other:								
(Tiredness, flue-like symptoms, nausea, skin rash)								
Allergic reaction grade I-IV (therapie see appendix page 1/3)								
Did ADRs have to be treate	ed with	medicati	on?		no		Yes, with	ו:
Treatment no.	1.	2.	3.	4.	5.			
Antipyretic:								
Antihistaminic:								
Cortison:								
Local anaesth. intrapleural:								
Antitussive:								
Analgesic therapy								

itials: Firstn. Surn	PatNo.:		Today's Date: Day	Month Year
4.1 Concomita	int systemic	mistletoe th	nerapy	none
Vas the patient syste	emically treated w yes, with:	vith mistletoe prio	<u>r to</u> mistletoe pleu	rodesis?
Drug	Dose (grade, mg)	Frequency (x-times / week)	Application (s.c., i.v., intratumoural)	Date (from - until)
Vas systemic mistle	toe therapy carrie yes, with:	d out <u>during and</u>	after mistletoe pl	eurodesis?
Drug	Dose (grade, mg)	Frequency (x-times / week)	Application (s.c., i.v., intratumoural)	Date (from – until)

Pleuro	desis documentation			
Initial	s: Firstn. Surn	atNo.:	Today's Date:	Day Month Year
4.2	Reactions to syst	emic mistlet	oe therapy	none
	Local infection	At what dose		Height in cm
	Side effects:			
	Temperature reactions: Over what period of time			
	At what dose			
	What type of application			
	Laboratory changes during t (Complete blood count, CRP, in			
	*Please include copies of original results	in appendix		
	General reactions after injec (z. B. Tiredness, exhaustion, shiver		ss, skin rash)	
	Others:			

Pleurodesis docu	umentation					
Initials: Firstn.	Surn	PatNo.:	Today's Date:	Day	Month Year	

5.1 Assessmen	t of mistletoe pleurodesis
According to WHO gui	delines:
CR Complete remission	
PR Partial remission	A further effusion occurs within four weeks of the last pleurocentesis but does not require a further pleurocentesis
NC/PD No succ	ess: A further effusion occurs within four weeks of last pleurocentesis and requires pleurocentesis.
	ould not be recorded according to WHO criteria.
_	or in charge of the treatment, is:
1. Pleurodesis therapy	with mistletoe:
very ea	asy often easy quite difficult very difficult
2. Are the ADRs of prim	ne concern during therapy?:
very	sometimes rarely never
3. For the patient, pleur	odesis therapy has been
very go	ood good moderately good bad
Free space for therapy	assessment:

Karnofsky Performance Scale:

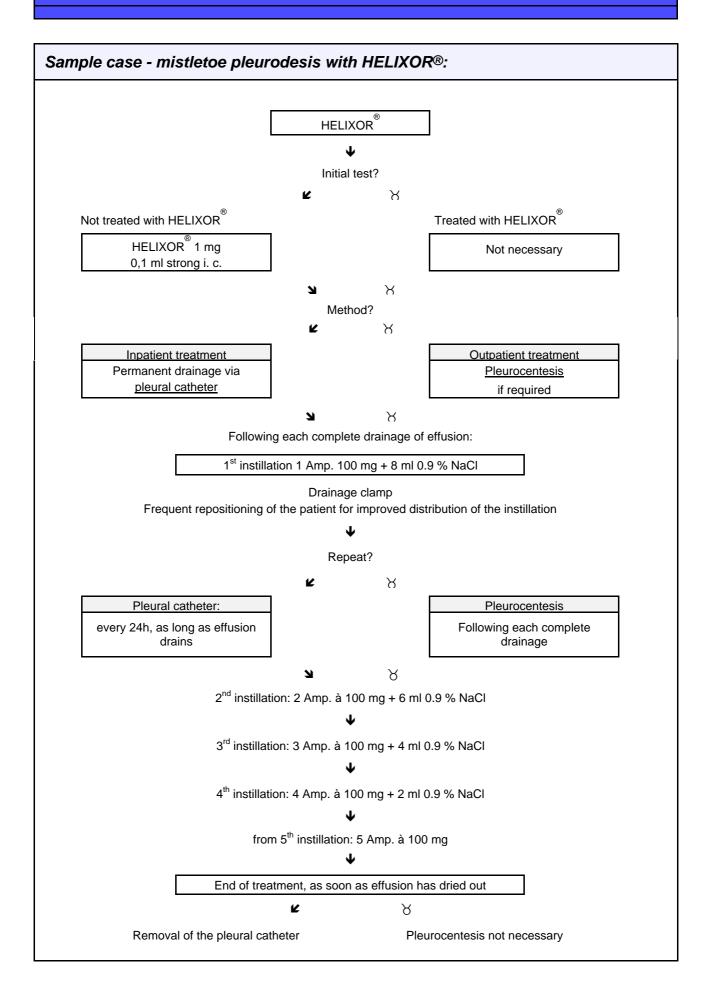
	%	Comment		%	Comment			%	Comment
A		Normal activity. No special care required.	В		Unable to work, can live at home and care for self but requires help with certain activities.		С		Patient cannot look after self. Patient requires special assistance and medical care.
	100	Normal state. No complaints. No evidence of disease.		70	Patient is able to care for self, but is unable to carry out normal activities or active work.		ľ	40	The patient is disabled and requires special care and assistance.
	90	Capable of normal activities. Minor signs/symptoms.		60	Patient is able to care for self, but requires occasional assistance-		ľ	30	Patient is severely disabled and hospitalisation is necessary. Death is not imminent.
	80	Some signs/symptoms and patient requires some effort to carry out normal activities.		50	The patient requires medical care and much assistance with self care.			20	The patient is very ill with hospitalisation and active life-support treatment required.
							ſ	10	Moribund. Fatal process proceeding rapidly.

Differentiation of the pleural effusion in transudate and exudate (Modified according to Loddenkemper 1992)

Parameter	Transudate	Exudate
Total protein	< 30 g	> 30 g
GE-Pleura/GE-Serum	< 0,5	> 0,5
Specific weight	< 1016	> 1016
Lactate dehydrogenases	< 200 U/I	> 200 U/I
LDH-PI / LDH-Serum	< 0,6	> 0,6
No. of leukocytes	< 1000/ml	>1000/ml
No. of erythrocytes	< 10000/ml	> 10000/ml
Cholesterol	< 60 mg/dl	> 60 mg/dl
Bili-PI/Bili-Serum	< 0,6	> 0,6

Degrees of severity and therapy for allergic reaction:

Clinic	Therapy					
Grade I local reaction						
Edema, erythema, pruritus,	- Stop allergen exposure					
wheals, Quincke's edema	- Antihistamines such as Fenistil 4 mg (Dimetinden)					
	or Tavegil 2 mg (Clemastin) i.v.					
	- H2-Blockers such as Tagamet 400 mg (Cimetidin) i.v.					
Grade II Systemic reaction						
Additional nausea, vomiting,	- Supply of oxygen					
onset of bronchospasms	- Infusion of 500 – 1000 ml Ringer's solution					
tachycardia, falling blood pressure	- 250 mg Solu-Decortin H (Prednisolon)					
	- possibly beta2-mimetics (for inhalation)					
Grade III Severe systemic reaction						
Additional shock	- Volume substitution with Ringer's solution, preferably also Haes 6/10%					
Severe bronchospasms	- Adrenaline 0,1-1 mg i.v., repeat after 3 min.					
Coma	- Solu-Decortin 1000mg or Fortecortin 100mg					
	- 1 Amp. Theophyllin 0,24 g over 10 mg					
	- 5-10 mg Diazepam (if fear of suffocation) with larynx- or glottis edema					
Grade IV						
Respiratory arrest, circulatory collapse	- Reanimation					



Notes:

This documentation sheet was developed at the Forschungsinstitut Havelhöhe (FIH) Berlin, and kindly supported by Helixor Heilmittel GmbH & Co. For interest it is free available on demand (see addresses) or see for downloading (pdf-file) <u>www.fih-berlin/pleurodese.de</u>. Comments or questions are welcome at <u>mistelpleurodese@fih-berlin.de</u>.

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