

# Protocol Selection Form

**Patient** Louise Stoten

**Location** Cape Town

**Condition** mBRCA

**Treatment Start Date** Monday, September 1, 2025

**Treatment Duration (weeks)** 12

## Select Treatment Protocols

### Please select the IV Treatment Protocol

Dropdown	Schedule	Comment
Paclitaxel & Curcumin IV	Weekly	Add 1 full amp MgSO4, slow infusion.
Laporta-Simms Protocol	Weekly	Friday: 50mg Curcumin, 5mg AKA-Bosvene 1 amp Lymphomyosot

### IV Treatment Comment

Optional:

Curcumin + Boswellia add on Laporta-Simms:

### Please select a Photobiomodulation Protocol

Transcranial 810nm +680nm Photobiomodulation

Multicolour Intravenous Photobiomodulation

**Photobiomodulation Treatment schedule**

Once a Week

### Photobiomodulation Treatment Comment

Green 20min, Yellow 20min.

Only for next 4 weeks.

Can include Sodium Bicarbonate at correct dilution nebulised.

# Hyperthermia Schedule

Schedule	Duration	Probe Position	Probe Size
Monday / Wednesday / Friday	90 minutes	Chest	30cm
Tuesday / Thursday / Saturday	90 minutes	Pelvic	30cm

## Hyperthermia Protocols

Step Up Protocol

Step Down Protocol

## Hyperthermia Caution

Port on Chest

## Hyperthermia Treatment Comment

Ensure Eribulin infusion whilst CHest mEHT running

## PDT Protocol

Transthoracic PDT

## PDT Protocol Comment

Transthoracic + Full body PDT

Week 1 & 3 - then review.

Start ASAP

PDT can be done with Fe infusion as well.

Suggestion: ICG Monday,

Ferrinjected 500mg (Patient refused this requires further discussion (09th September 2025),  
ICG Wednesday again.

Happy to continue with curcumin / Boswellia drips post PDT session. 45min bed + transthoracic laser if available - if not first week - bed

## H2 Inhalation Option

1 hour twice daily

## H2 Weekly Schedule

5 Day Intensive

## Chemotherapy required

Yes

## Chemotherapy Comment

Eribulin 0.7mg/m<sup>2</sup> D1 & D8 of 21 day cycle (3 weeks).

This is 50% of the dosage.

Add: Bevacizumab 2.5mg/kg weekly at Sanctura for 6 weeks only. (We havent confirmed when we start this as at 09th September 2025)

Zoledronic Acid 4mg infusion - Monthly

Calcium gluconate 1/2 amp IV added to drip start of week with zoledronic acid given end of week.

Please give Neupagen 1/2 dose prophylactically D4; and D12.

Possible additional PIK3CA inhibitor  
POssible enHertu

## Select an Immunotherapy Protocol

Immunotherapy: Check-point inhibitor therapy and vaccine referral

### Immunotherapy CKI Referral Options

Dendritic-Cell Vaccine

### Immunotherapy Comment

Defer for now:  
Possible check point inhibitor therapy.  
DCT Banking with biopsy please, may proceed DCT

## Please select Dietary Options

Low Carb Mediterranean

## Please select Essential Supplements

Dropdown	Quantity	Measure	Time of Day
Sanctura Isolate Protocol			

### Essential Supplements Comments

VitD3/K2 15,000 daily  
Boswellia 7 drops nocte  
MSB oil 4 nocte  
Ivermectin 37.5mg twice weekly  
Azithromycin 250mg po daily for 14 days of 21 day cycle.  
(Bactrim single strength at night twice a week)

Recormin 20,000 IU twice weekly, s/c.  
Continue anti-coagulation full dose.

No LDN  
No Fenbendazole.  
No statin

Weekend (S/S): Covacort 10mg + CoQ10 400mg + Cordyceps 2 + Ginsenox in morning

## Select Imaging Scans Required

CT-Guided Biopsy

MRI Brain

PET-CT

## Select Histology-Related Tests

HER2

Ki67

ONCOMINE Extended with HRR panel

PDL-1

TMB

## General Comments

edit 2025-09-01 - Name Correction

1st September 2025

Neupagen as needed. prophylactically 1/2 dose.

See previous results - timing of days

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