

International Journal of Medical Science and Dental Research

A Case of Metastatic Breast Cancer Treated Successfully by Using Yoga Prana Vidya (YPV) Healing Methods Persistently As Complementary Medicine and Patient's Self-Belief

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Abstract

Introduction: Breast cancer is diagnosed mostly in women, and recent research shows Breast Cancer in India accounted for 13.5% of all cancer cases and 10.6% of all deaths. Breast Cancer originates when breast cells mutate and lose control on their division leading to a mass of tissue called tumor. Treatment options include multidisciplinary approaches. This paper presents a case of metastatic breast cancer of a 49-year-old female treated successfully by Yoga Prana Vidya healing protocols as complementary medicine.

Method: This paper uses case study method of investigating the case, going through details of medical reports, YPV healers' documents, and patient feedback.

Results: The patient started taking YPV healings from August, 2020, while simultaneously taking medical treatment. Slowly and gradually through persistent healings, meditations, rhythmic breathing, forgiveness Sadhana and learning lessons over the course of two years, the patient began to recover from April-May 2022 onwards. Active cancer cells in the breast, quantum of pain, dependency on pain killers and radiation therapy have substantially reduced after healings.

Conclusions: Breast cancer is one of the most common diseases after skin cancer diagnosed in women, and early detection methods and personalized treatment approaches are saving lives. Yoga Prana Vidya has been established as a complementary and also as alternative medicine to successfully treat a variety of conditions, as seen in this case. Further research using YPV as complementary medicine with appropriate number of samples of cases similar to this case is recommended to throw more light on treatment and normalization of this condition.

Keywords - Yoga Prana Vidya System ®, YPV ®, Breast Cancer, Tumor, Chemotherapy, complementary and alternative medicine.

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I. INTRODUCTION

1.1 Breast Cancer

Cancer is a diseased condition in the body where the normal cells mutate, lose control on their multiplication and divide rapidly and uncontrollably than the healthy cells, thereby creating a mass of tissue called tumor. Breast cancer originates in the cells of the breasts, and most often begins with cells in the milk-producing ducts commonly known as the invasive ductal carcinoma.[1]. It may also begin in the glandular tissue called lobules or in other cells or tissue within the breast. This is referred to as invasive lobular carcinoma. In metastatic breast cancer the cancer cells may spread through the breast to the lymph nodes or to other parts of the body such as bones etc. [2].

1.2 Signs and Symptoms of Breast Cancer

An experienced healthcare professional can visually examine and find a new lump or mass which is the most common symptom of breast cancer, although most breast lumps are not necessarily cancer. A painless, hard mass that has irregular edges is more likely to be cancer, but breast cancers can be also soft, round, tender, or even painful.

Other possible symptoms of breast cancer include:

- Swelling of all or part of a breast (even if no lump is felt)
- Skin dimpling (sometimes looking like an orange peel)
- Breast or nipple pain
- Nipple retraction (turning inward)
- Nipple or breast skin that is red, dry, flaking, or thickened
- Nipple discharge (other than breast milk)
- Swollen lymph nodes under the arm or near the collar bone (Sometimes this can be a sign of breast cancer spread even before the original tumor in the breast is large enough to be felt.)

Many of these symptoms can also be caused by benign (non-cancerous) breast conditions. Still, it's important to have any new breast mass, lump, or other change checked by an experienced health care professional so the cause can be found and treated, if needed. Screening for breast cancer by mammography can help detecting breast cancer early, before any symptoms appear. Early diagnosis of breast cancer often gives a better chance of successful treatment. [3]

1.3. Causes for Breast Cancer

Studies have shown that risk for breast cancer is due to a combination of factors identified, such as hormonal, lifestyle and environmental. There are some risk factors listed below that are beyond our control such as:

- Getting older: Most breast cancers are found in women aged 50 years or older.
- Genetic mutations: Women who have inherited changes (mutations) to certain genes, such as BRCA1 and BRCA2, are at higher risk of breast and ovarian cancer.
- Reproductive history: Starting menstrual periods before age 12 and starting menopause after age 55 expose women to hormones longer, raising their risk of getting breast cancer.
- Having dense breasts: Dense breasts have more connective tissue than fatty tissue, which can sometimes make it hard to see tumors on a mammogram. Women with dense breasts are more likely to get breast cancer.
- Personal history of breast cancer or certain non-cancerous breast diseases: Women who have had breast cancer are more likely to get breast cancer a second time. Some non-cancerous breast diseases such as atypical hyperplasia or lobular carcinoma in situ are associated with a higher risk of getting breast cancer.
- Family history of breast or ovarian cancer: A woman's risk for breast cancer is higher if she has a mother, sister, or daughter (first-degree relative) or multiple family members on either her mother's or father's side of the family who have had breast or ovarian cancer. Having a first-degree male relative with breast cancer also raises a woman's risk.
- Previous treatment using radiation therapy: Women who had radiation therapy to the chest or breasts (for instance, treatment of Hodgkin's lymphoma) before age 30 have a higher risk of getting breast cancer later in life.

There are other risk factors that can probably be taken care of with conscious effort, such as – physical inactivity, overweight or obesity after menopause, taking hormones, drinking alcohol, smoking, exposure to carcinogenic chemicals etc. [4]

1.4 Yoga Prana Vidya (YPV) System

Yoga Prana Vidya (YPV) system is a holistic and alternative healing treatment approach that can be used as a complementary medicine also for treatment of physical, psychological, mental and emotional illnesses. YPV is based on bio-plasmic energy or prana that involves no-touch & no-drug treatment principle. YPV helps to treat the ailments through energy healing of the physical body by working with energy body of an individual. The energy body, also known as Pranamayakosa, interpenetrates and extends beyond (surrounds) the physical body and consists of an inner aura, an outer aura and health rays connecting the inner aura and the outer auras. The energy body consists of energy centers or chakrams (wheels) and Nadis (channels) to distribute the energy to entire aura and body parts. Trained and certified healers practice the skills of scanning the wheels (energy centers) and aura and carry out cleansing and energizing the wheels and affected body parts of the sick person. Patients usually experience recovery and relief from illness within a few healings given by the healer. Depending upon an individual's health condition, a healing session may last for 10 to 30 minutes, and one or more sessions per day as decided appropriately by the healer.

Thus, YPV system uses ancient techniques of energy healing and its protocols are structured for systematic healing of patients for treating various illnesses. More than 40 published research articles show consistent results of recovery for patients with various physical, psychological and mental illnesses. [5]

The literature shows that, by using Yoga Prana Vidya (YPV) healing techniques, many cases have been successfully treated such as, some difficult medical cases [6], Diabetes management & control [7], removing arterial block in heart without surgery [8], vision improvements for participants of an Eye Camp [9], improvements in holistic wellbeing and immunity of participants in a one-month YPV intensive programme [10], Role of Yoga Prana Vidya in first aid and emergency [11], improvements of health and immunity of senior citizens [12], speedy recovery of COVID patients [13], treatment of hypothyroidism [14], Lowering academic anxiety and enhancing academic performance of high school children [15], saving life of a snake-bitten human female [16], improvements in the cognitive abilities and social behaviour of mentally challenged children [17], managing the pain and side effects of a Hodgkin Lymphoma patient undergoing chemotherapy [18], healing treatment of a female patient suffering from kneecap dislocation [19]. A review of published literature shows some experimental studies also conducted with successful outcomes such as improvements in the wellbeing of prisoners [20], and significant reduction in anxiety and depression in corporate employees [21].

This paper presents a case of a 49-year-old female patient diagnosed with breast cancer who initially received healing from a senior healer and later on continued self-healing accompanied with healing from her husband for a period of two years with persistent effort to recover from her condition.

II. METHOD

This paper uses case study method going through detailed and complete case information including medical records, YPV protocols used and feedback from the patient and her family.

III. CASE REPORT

III(1) Patient background information

A 49-year-old female was diagnosed with having breast cancer during July 30, 2020. She was an exarmy officer, who was physically very active, running 5km daily with no major health problems.

III(2) Pre-YPV Condition of the patient

The first symptom she had was pain in her right leg. However, the pain would subside after warm ups and running exercises. She therefore, ignored this problem for a while and owing to the COVID situation in 2020, going to the hospital was delayed. When she had to travel a long-distance by road the pain aggravated and became severe. She had expanding pain from right hip bone down through her right leg. She stopped doing any

activity like walking, running etc. She was not even able to sit/stand/getup from bed on her own and needed family help. She consulted an Orthopedic and who advised for an MRI scan. From the scan report, the doctor inferred that her spine had become so weak and caused low-back ache. It appeared to be a cancer progression, and so referred her to an oncologist. She was diagnosed with cancer in the left breast that had metastasized to bones and infected her spine. She could not afford a minor fall also, since any effect on spine bone, such as fracture, could lead to paralysis.

The treatment started immediately from August 2020 which included allopathic pain killer medication, radiation therapy for back pain relief, targeted hormonal therapy. Due to hormonal medicines her WBC count was low and was prone to infections due to low immunity. She also consulted a nutritionist who advised her to consume healthy diet to cure the cancer condition. However, this diet treatment regime was intended upon reducing dependency on pain killer medication. She was not comfortable to reduce pain killers due to aggravating pain. So, she continued medication along with diet. She underwent periodic PET CT scans to understand disease progression/regression and also had monthly WBC counts checked to monitor side effects of hormonal therapy. She was advised GCSF injection to boost WBC if level dropped below minimum and was administered Zolondron injection monthly for bone growth and stabilization.

III (3) YPV Intervention

Initially, it was a shock to the patient and her family but they accepted the situation gracefully. Despite various uncertainties, she prepared herself to fight this condition with self-belief and immense positivity. The patient was already a YPV Level I practitioner since 2016. She started taking healings from a senior YPV trainer for three months during August 2020. The senior YPV trainer helped the patient greatly by healing and constantly nurtured her. The trainer further motivated the patient to self-heal, and her husband to learn YPV to heal her daily. Along with healing, the patient also continued targeted hormone therapy. The following YPV healing protocols were followed.

- Healing protocols for entire musculoskeletal system and severe back pain was given twice daily for 3 months.
 - Standard Color Psychotherapy was done daily using Level 3 protocols.
- Deep thorough cleaning of all chakrams and affected areas, especially the basic chakram, Mengmein chakram, and solar plexus chakrams was done.
 - Totally avoided red color prana because it can increase any infection.
 - Spine strengthening healing was done by localizing, deep cleaning and energizing every day.
- For healing the breast lump dark blue color prana was regularly used for localising and dark green, and dark violet color prana was used.
- Daily divine healing, white board technique, Rhythmic Yogic Breathing (RYB), live healing sessions, Forgiveness Sadhana, meditations were done by the patient.
 - Patient started fruit diet one time, and no-salt and no-sugar diet.
- Healings were given to counter the side effects due to radiation therapy and hormonal therapy and possible infections due to low WBC, digestive issues, severe back pain, severe legs pain and body itching.

HISS.RETA.BECPA

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Agr / Sec. / 54 Years / Franch

Bage Control

Dr. MANISH

Musculoskeletal systems:

FDG avid, multiple mixed lytic and sclerotic lesions involving head of right humerus, multiple cervical, dorsal, lumbar and sacral vertebrae, few ribs bilaterally, stermum, both scapulae, pervice bones, both femora (SUV max y 3-60).

Mild wedging of D2 vertebral body with patchy sclerosis and no increased tracer concentration.

Decreased tracer concentration noted in lumbar vertebrae post RT sequelae.

Best of the visualized portion of the musculoskeletal system appears normal with physiological tracer distribution.

Impression: Whole body PETCT reveals:

*Small soft tissue density nodular lesion involving lower outer quadrant of right breast parenchyma with subtle soliculated margins with no increased tracer concentration - Metabolically inactive.

*Small soft tissue density nodular lesion involving lower outer quadrant of left breast parenchyma with smooth margins, with no increased tracer concentration - Metabolically inactive.

*Small soft tissue density nodular lesion involving lower outer quadrant of left breast parenchyma with smooth margins, with no increased tracer concentration - Metabolically inactive.

*Metabolically inactive.

*Hetabolically inactive.

*Hetabolically inactive, multiple mixed lytic and sciencic lesions involving visualized axial and appendicular skeleton.

*When commanded to previous scan dated 0.106/2021, significant cliseasue progression.

*Por Clinical / 1HC / HPE / Followup correlation.

*Dr Sastal Blankae Marzzi

Figure 1. PET CT Scan Report 13/01/2022 showing disease progression

In the PET CT scan taken during June 2021 no active cancer cells were noticed, and hence the healing frequency was reduced. However, disease progression was noticed in January 2022 (See PET CT scan in figure 1) and showed increase in size and number of active cancer cells, and the patient resumed healings from the trainer. Parallel to this, the patient was administered Denosumab injection every month from January 2022.

The healing given was for pain relief and aid in elimination of cancer. Additionally, YPV psychotherapy helped the patient in managing apprehensions. The patient further upgraded herself with YPV level 2 & 3 courses during 2021. Further, she did some advanced YPV courses also, viz., Achieving Union With Atma (AUWA), Psychic Self Protection (PSP) with her trainer's guidance and motivation. Her husband also got himself upgraded to higher levels of YPV healing and Arhat Yoga.

III (4). Results

After YPV Intervention

The patient condition began improving from the time she resumed taking YPV healings from January 2022. The patient got significant relief after two years of sustained YPV practices with self-healing and taking healings from husband also. The active cancer cells in her lump got reduced (see report dated 9 May 2022 shown in Figure 2).

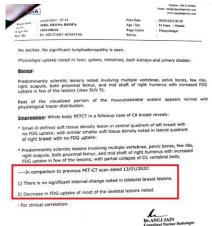


Figure 2. PET CT Scan Report dated 09/05/2022 showing reduced cancer cells in breast lump

The patient's sustained self-healing efforts over a period of two years, and self-belief are the main factors that complemented medical treatment leading to successful curing of her breast cancer condition.

Feedback from the Patient and Family:

The patient's feedback is reproduced below:

"I am a 49 year old ex-army officer. I was diagnosed with breast cancer metastasized to spine and arm bones during 2020. I used to have very severe pain expanding from right hip down through the leg due to which I was not able to sit/stand/getup from bed by my own. I was taking allopathic medication, radiation therapy and hormonal therapy for pain relief. I tried modified healthy diet from a nutritionist but I was not getting pain relief, so I had to continue the allopathic medication. I contacted one of our family friends who was a senior YPV healer and trainer. I started taking YPV healings from my trainer in 2020 for 3 months and later continued to heal myself. My husband also became a healer and has been healing me since two years. Slowly through healings, meditations, physical exercises, rhythmic breathing, forgiveness and learning my lessons over the course of two years, I started to recover. The quantum of the pain in my bones has gone down and I am able to reduce dependency on pain killer medicines.

Overall, there is significant pain reduction and greater mobility as compared to my initial health condition at the time of detection and diagnosis. By learning YPV courses, we have got a holistic understanding of life and mental strength to accept and understand physical conditions. Psychologically, YPV has helped me to grow stronger, positive and calmer. We can now feel more connected with the Soul. We thank our trainers and group for all the love and support."

III (5) Discussion

Breast cancer is mostly diagnosed in women. As per the Globocan data 2020, Breast Cancer accounted for 13.5% (178361) of all cancer cases and 10.6% of all deaths in India. [22]. Success and failure of screening programs depend on several factors ranging from the presence of proper guidance manuals, development and usage of an appropriate instrument for diagnosis to proper implementation and availability of adequate human resources.[22].

Management of Breast Cancer is multidisciplinary and has been evolving rapidly. In the past, the widely used treatment option was mastectomy followed by adjuvant chemotherapy for locally advanced Breast Cancer, triple-negative Breast Cancer and HER2neu expressing tumors (human epidermal growth factor receptor 2). [22] From using drugs like cyclophosphamide, methotrexate, etc. in the 1970s for chemotherapy to using their modifications like anthracycline-based combination chemotherapy protocols in the 1980s and 1990s, the medical science has come a long way. The field of breast surgery has also evolved from total mastectomy to breast conservation therapy to oncoplastic breast surgery. The rapidly advancing field of oncoplastic breast surgery offers a pragmatic alternative to total mastectomy and breast conservation therapy. [22].

Besides attempting medical treatment of this condition, one may consider various options carefully. As a complementary therapy, YPV offers great scope to treat this condition, as seen in this case, because of its simplicity of no-drug and no-touch modality and a painless process to the patient. YPV healing therapy had been applied successfully in the past in supporting a patient with Hodgkin lymphoma cancer treatment with energy healing to relieve the patient from side effects of chemotherapy, pain and psychological distress. [18]. In case the patient has not acquired sufficient skills and competencies for self-healing, an external healer can render required services of appropriate YPV protocols and techniques as complementary therapy to fully treat the patient. [18].

As agreed by experts at a Symposium in India during December 2019, a greater awareness of women's health and Breast Cancer is needed across India as well as the fact that more needs to be done to understand hereditary breast cancer in India, because a unique Breast Cancer gene variant has been described in the Indian population. [23].

IV. CONCLUSION

Breast cancer is one of the most common diseases after skin cancer diagnosed in women. The survival rates for this disease have increased and number of deaths is steadily declining largely due to early detection methods and personalized treatment approaches. Substantial awareness overcoming any cultural stigmas needs to be spread among women about monitoring breast health in order to avoid consequential and serious complications. Further research using YPV with appropriate number of samples of cases similar to this case is recommended to throw more light on treatment and normalization of this condition to give renewed life to patients in the society at large. Based on this and other cases of YPV intervention mentioned in references, it is suggested that all Health workers including Doctors must learn up to YPV Level 3 to compliment and support the patients with serious ailments with a Holistic and Integrated approach and also as effective Preventive healing.

Acknowledgements

Grateful acknowledgments to the patient and her family for sharing case details in confidence and to Sri Ramana Trust for giving permission to use their copyright terms Yoga Prana Vidya System ® and YPV ®.

Funding

Nil

Conflicts of Interest

None

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