



SINTOMA'25

8 A 10 DE MAIO

HOTEL INTERCONTINENTAL | SÃO PAULO

PARCERIA



society of hematologic oncology

APOIO
INSTITUCIONAL



Educação
e Pesquisa



Atividade física no manejo da fadiga: o que a literatura traz sobre isso ?

Dr Pedro Almeida



SCIENTIFIC REPORTS

OPEN

Effects of gratitude meditation on neural network functional connectivity and brain-heart coupling

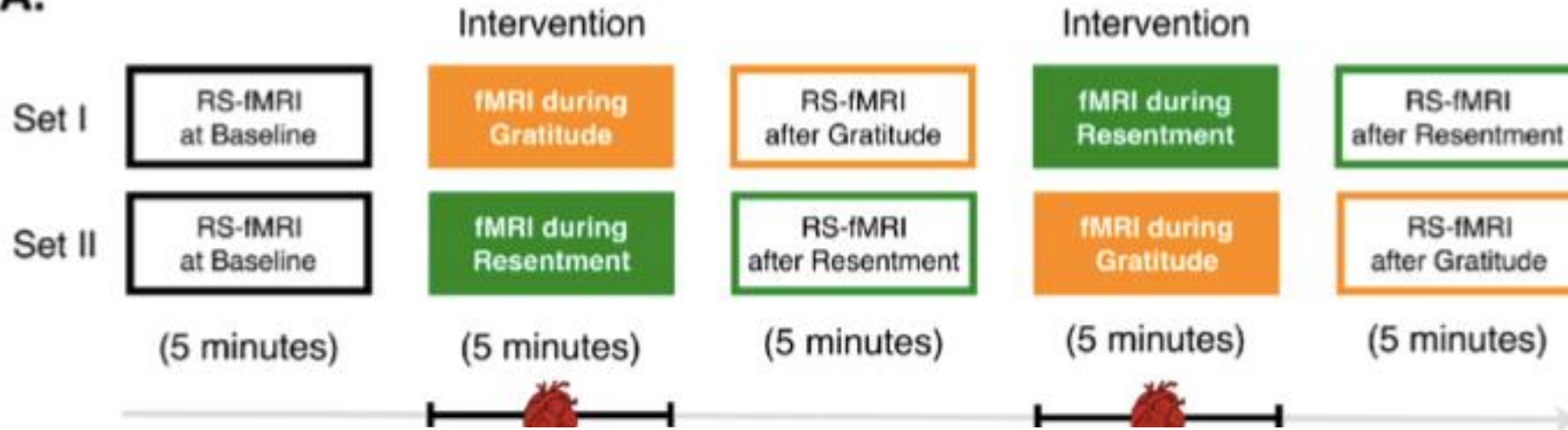
Sunghyon Kyeong¹, Joohan Kim², Dae Jin Kim², Hesun Erin Kim³ & Jae-Jin Kim^{1,3,4}

Received: 16 February 2017

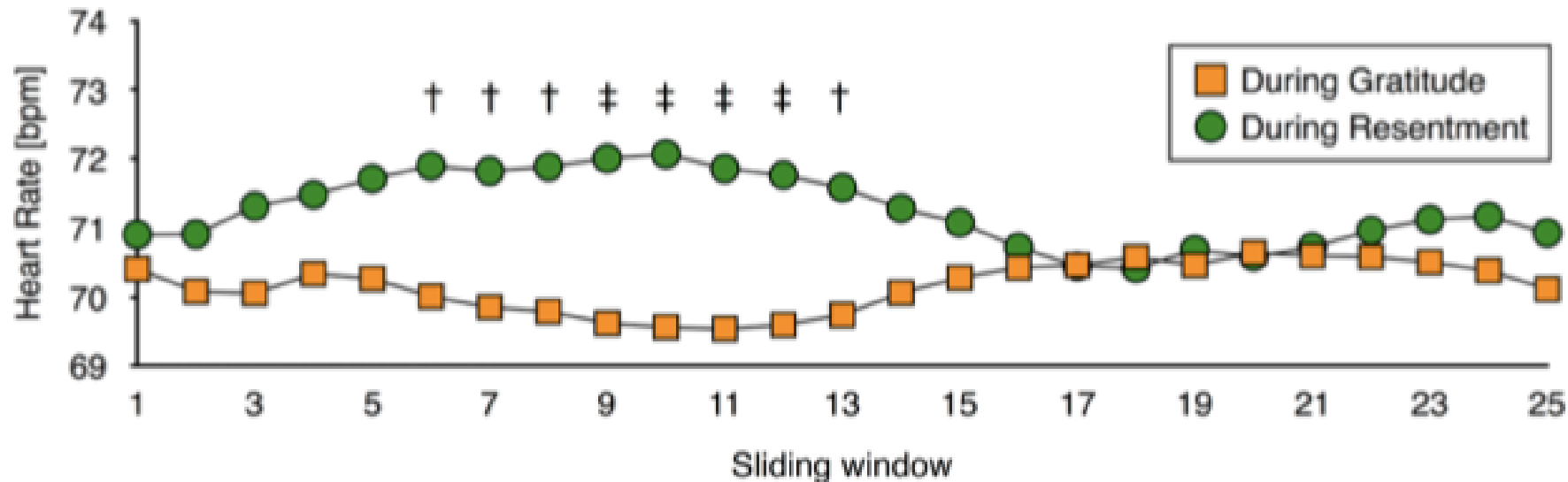
Accepted: 30 May 2017

Published online: 11 July 2017

A.



A. Sliding-window fluctuation in heart rate (HR)



Winningham, MacVicar, and Burke 1986 *The Physician and Sports Medicine*



"Historicamente clínicos aconselhavam pacientes com câncer a descansar e evitar a atividade física devido ao dificuldade do tratamento"

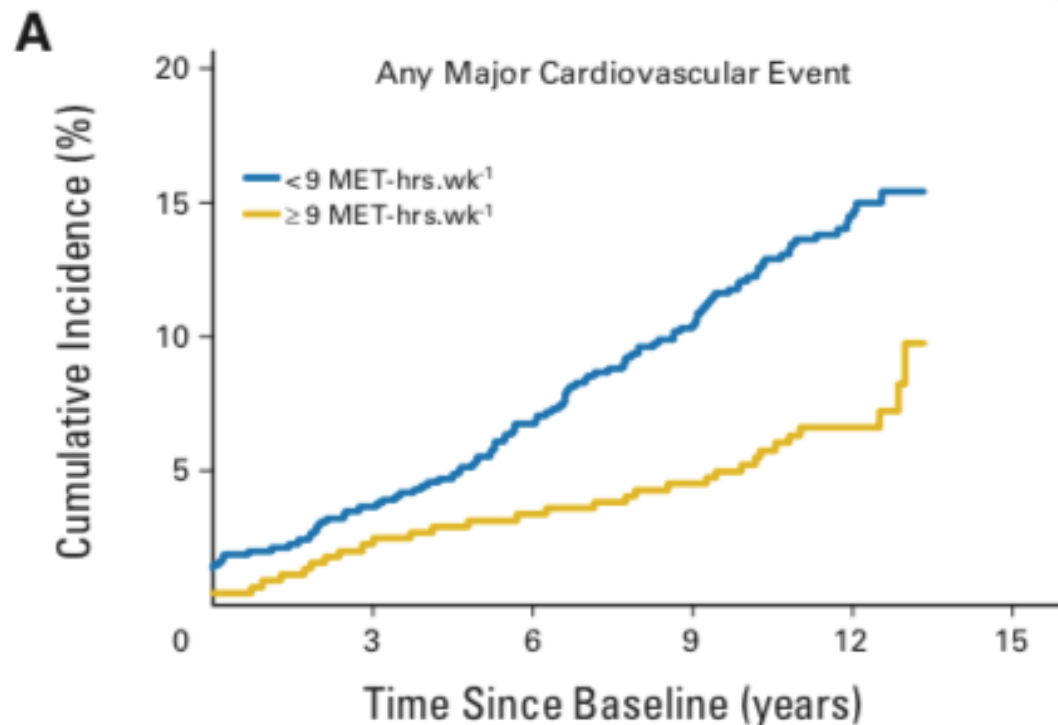
"Três décadas de pesquisa mostram que o exercício desempenha um papel vital na prevenção e controle do câncer."



Schmitz et al. American College of Sports Medicine. *Med Sci Sports Exerc.* 2010;42(7):1409-

Exercise and Risk of Major Cardiovascular Events in Adult Survivors of Childhood Hodgkin Lymphoma: A Report From the Childhood Cancer Survivor Study

Lee W. Jones, Qi Liu, Gregory T. Armstrong, Kirsten K. Ness, Yutaka Yasui, Katie Devine, Emily Tonorezos, Luisa Soares-Miranda, Charles A. Sklar, Pamela S. Douglas, Leslie L. Robison, and Kevin C. Oeffinger

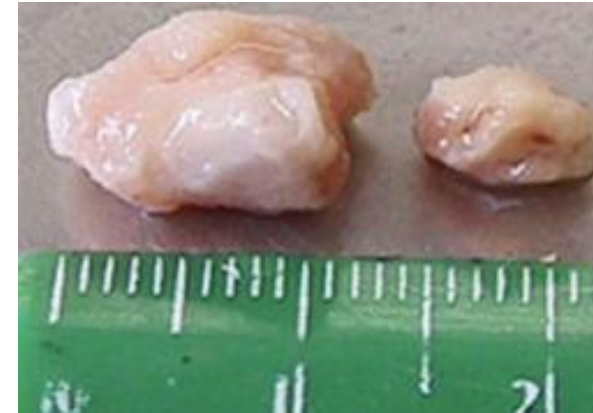
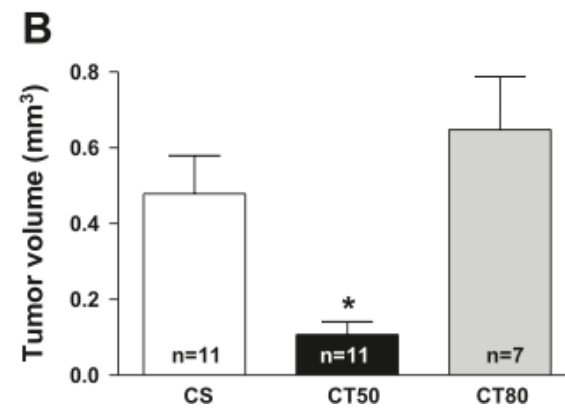
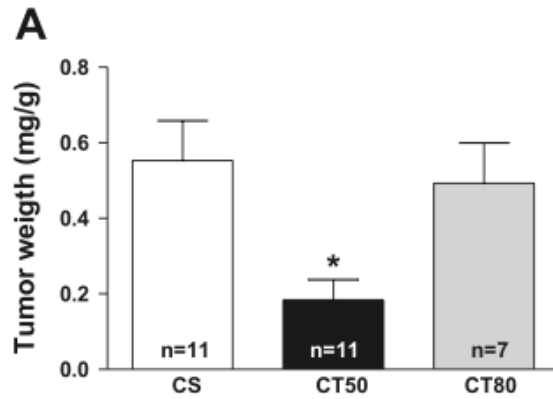


Swim training suppresses tumor growth in mice

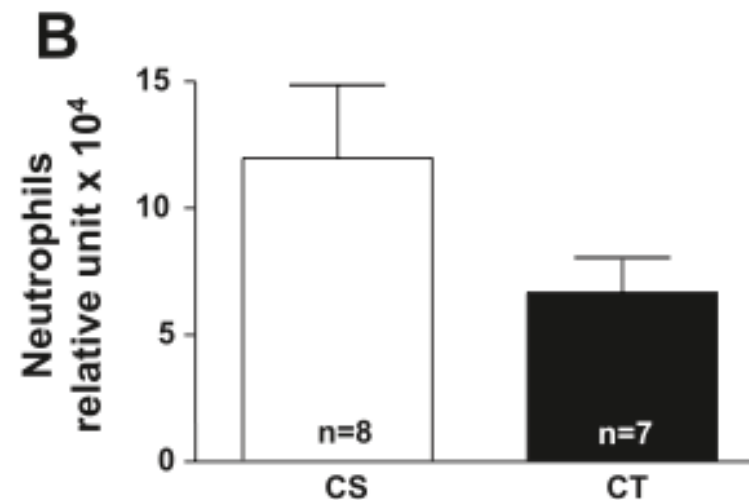
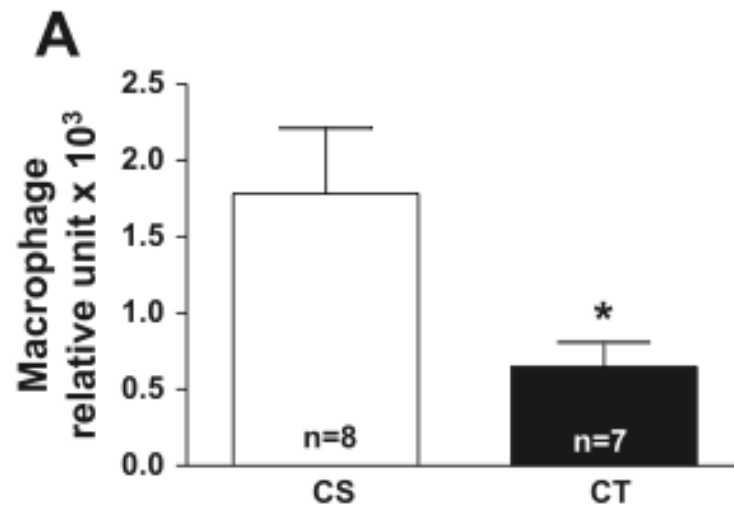
Pedro William M. Almeida,^{1,2*} Ary Gomes-Filho,^{1*} Anderson J. Ferreira,³ Carlos Eduardo M. Rodrigues,¹ Marco Fabrício Dias-Peixoto,^{1,2} Remo C. Russo,⁴ Mauro M. Teixeira,⁴ Giovanni D. Cassali,⁵ Enio Ferreira,⁵ Ivan C. Santos,² Alessandra M. C. Garcia,¹ Emerson Silami-Garcia,⁶ Ulrik Wisløff,^{7,8} and Guilherme A. Pussieldi¹



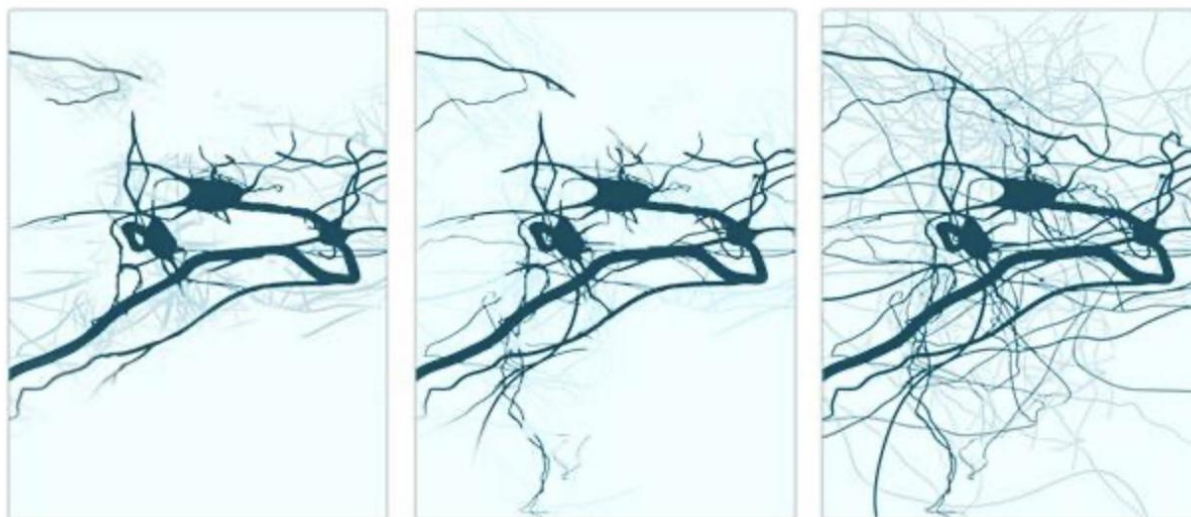
Almeida, P. W. M., Gomes-Filho, A., Ferreira, A. J., Rodrigues, C. E. M., Dias-Peixoto, M. F., Russo, R. C., Teixeira, M. M., Cassali, G. D., Ferreira, E., Santos, I. C., Garcia, A. M. C., Silami-Garcia, E., Wisløff, U., & Pussieldi, G. A. (2009). Swim training suppresses tumor growth in mice. *Journal of Applied Physiology*, 107(1), 261-265. <https://doi.org/10.1152/jappphysiol.00249.2009>



Exercício físico a 50% da carga máxima reduziu significativamente a quantidade de macrófagos (A) e (B) neutrófilos nos tumores.



Veja como é o desenvolvimento neural antes e depois de meses de exercícios:



Fonte: Cognifit

- Imagem um: Redes neurais antes do treinamento
- Imagem dois: Duas semanas após a estimulação
- Imagem três: Dois meses após a estimulação

Brunet et al. *BMC Cancer* (2020) 20:711
<https://doi.org/10.1186/s12885-020-07196-3>

BMC Cancer

STUDY PROTOCOL

Open Access

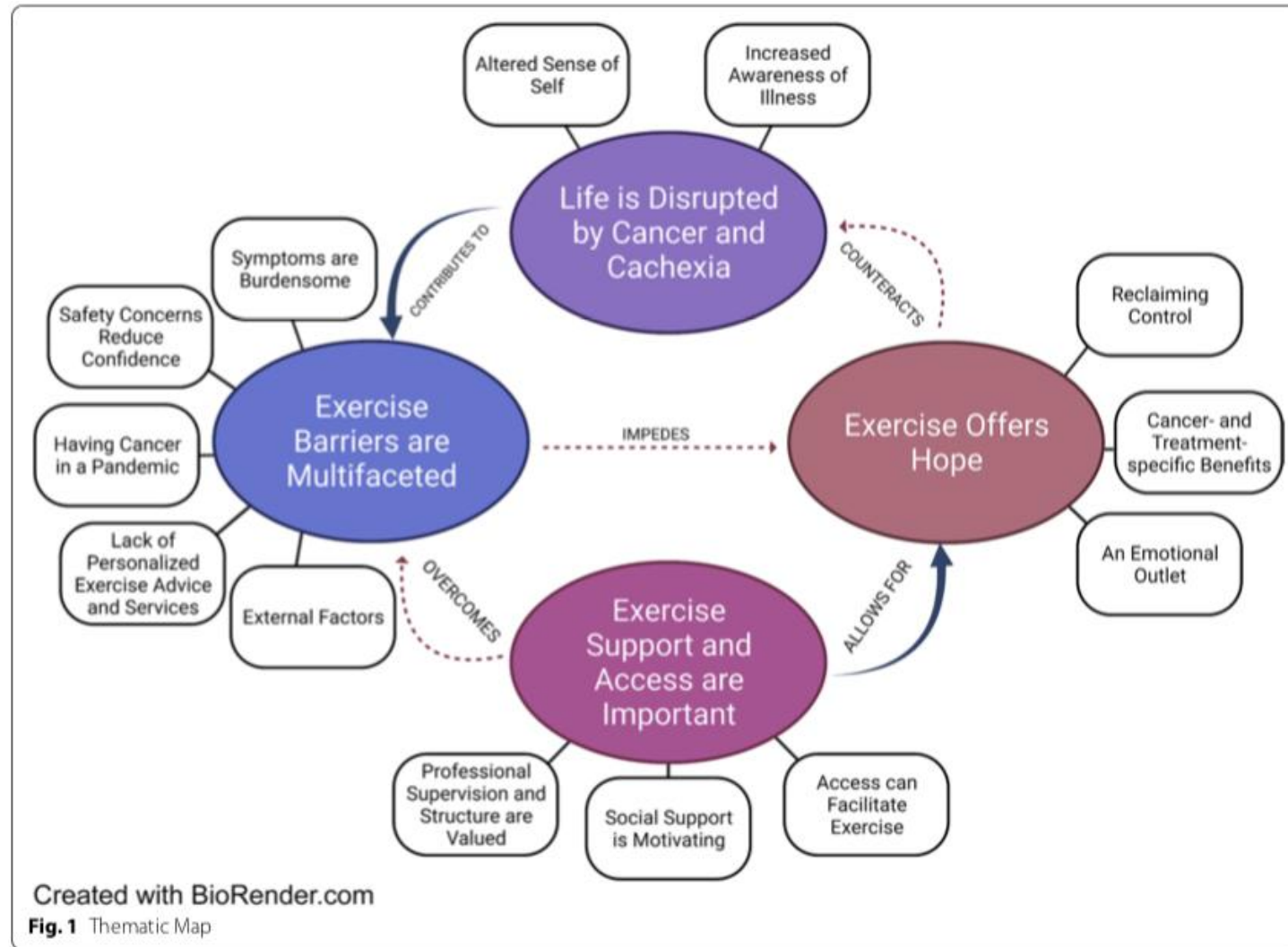
Study protocol of the Aerobic exercise and CogniTIVE functioning in women with breAsT canCEr (ACTIVATE) trial: a two-arm, two-centre randomized controlled trial



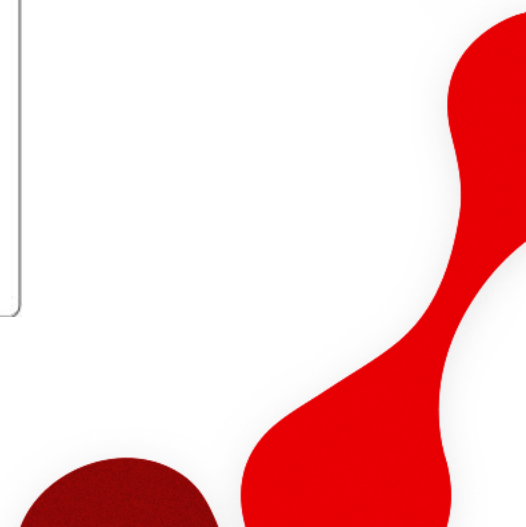
Jennifer Brunet^{1*}, Meagan Barrett-Bernstein¹, Kendra Zdravec², Monica Taljaard³, Nathalie LeVasseur⁴, Amirtha Srikanthan⁵, Kelcey A. Bland⁶, Barbara Collins⁷, Julia W. Y. Kam⁸, Todd C. Handy⁹, Sherri Hayden¹⁰, Christine Simmons⁴, Andra M. Smith⁷, Naznin Virji-Babul¹¹ and Kristin L. Campbell¹¹

Discussion: Aerobic exercise is a promising intervention for preventing and/or managing CRCC and enhancing quality of life among women diagnosed with breast cancer. The ACTIVATE trial tests several novel hypotheses, including that aerobic exercise can prevent and/or mitigate CRCC and that this effect is mediated by the timing of intervention delivery (i.e., during versus post-chemotherapy). Findings may support prescribing exercise during (or post-) chemotherapy for breast cancer and elucidate the potential role of aerobic exercise as a management strategy for CRCC in women with early-stage breast cancer.

Schoenfeld, T.J., Rada, P., Pieruzzini, P.R., Hsueh, B., & Gould, E. (2013). O exercício físico previne a ativação induzida por estresse de neurônios granulares e melhora os mecanismos inibitórios locais no giro dentado. *Journal of Neuroscience*, 33(18), 7770-7777.

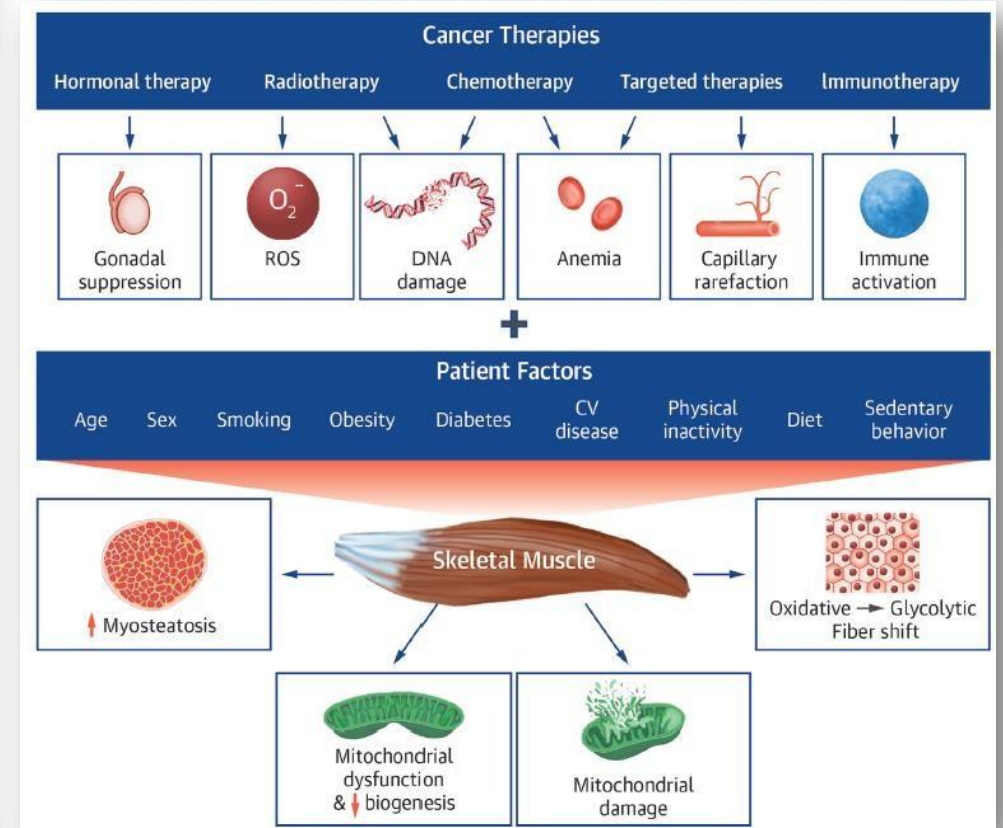
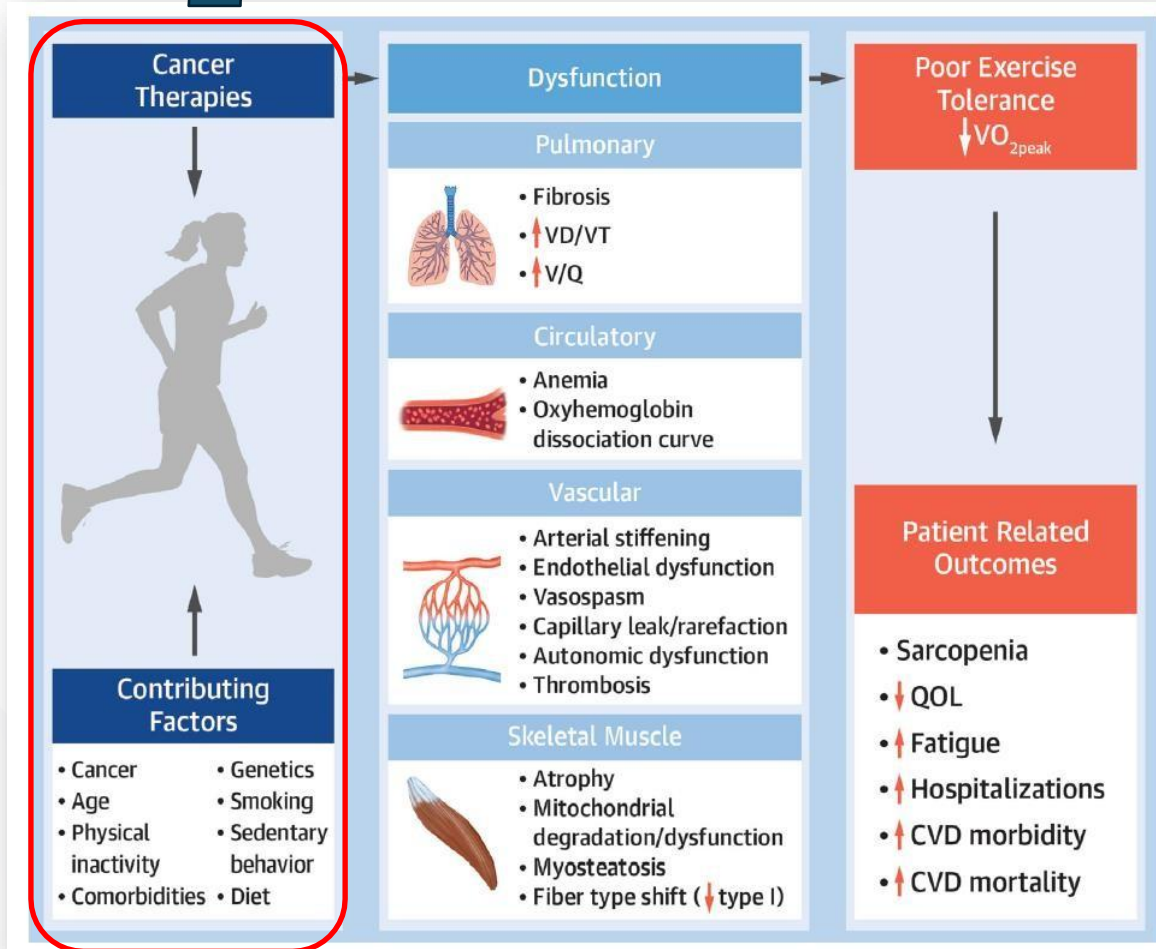


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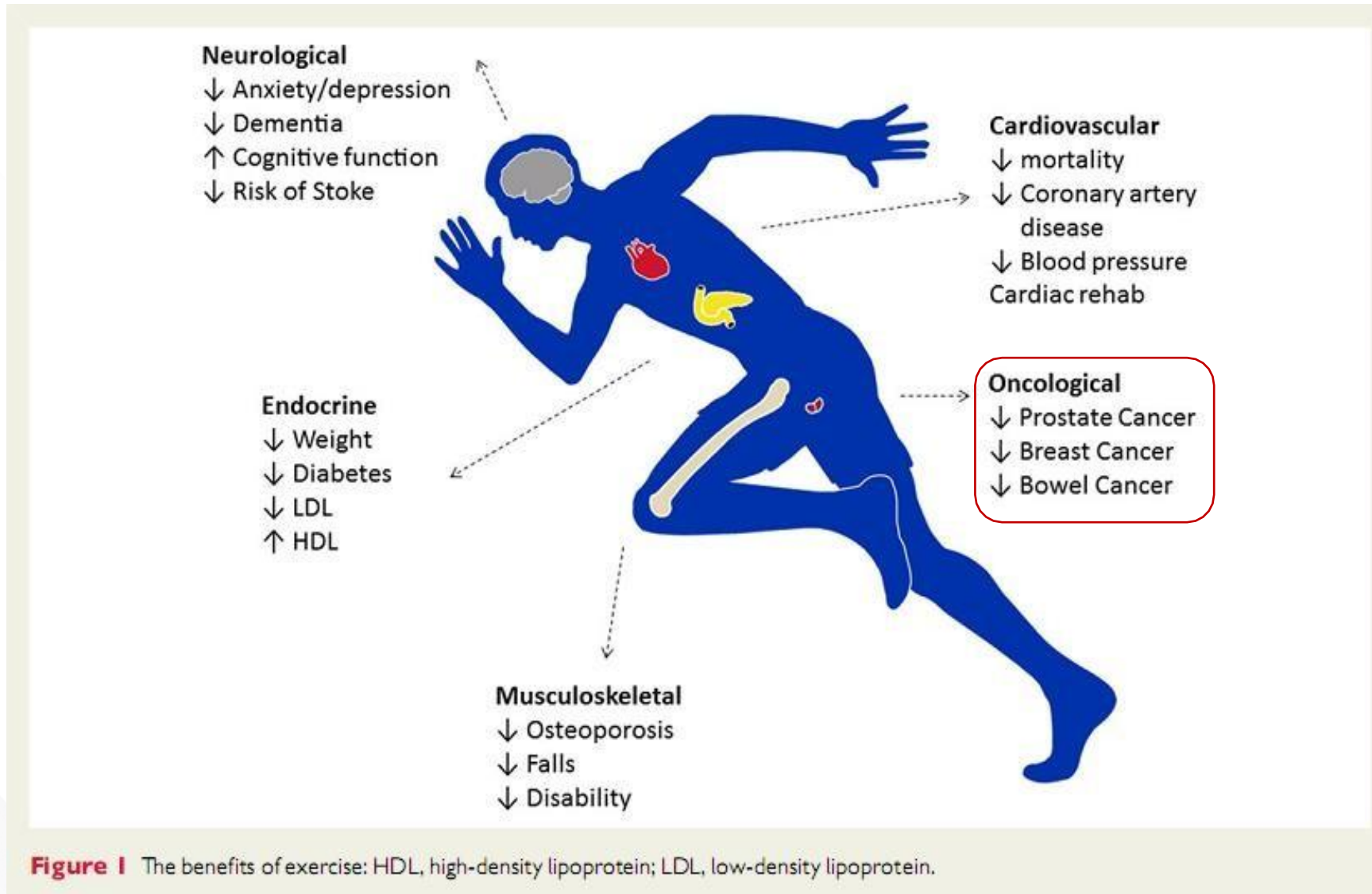


Cancer Therapy and Exercise Intolerance: The Heart Is Not a Part

JACC: CardioOncology State-of-the-Art Review



Benefícios do exercício físico



“Sua genética carrega a arma, mas é seu estilo de vida que puxa o gatilho”

Mehmet Oz

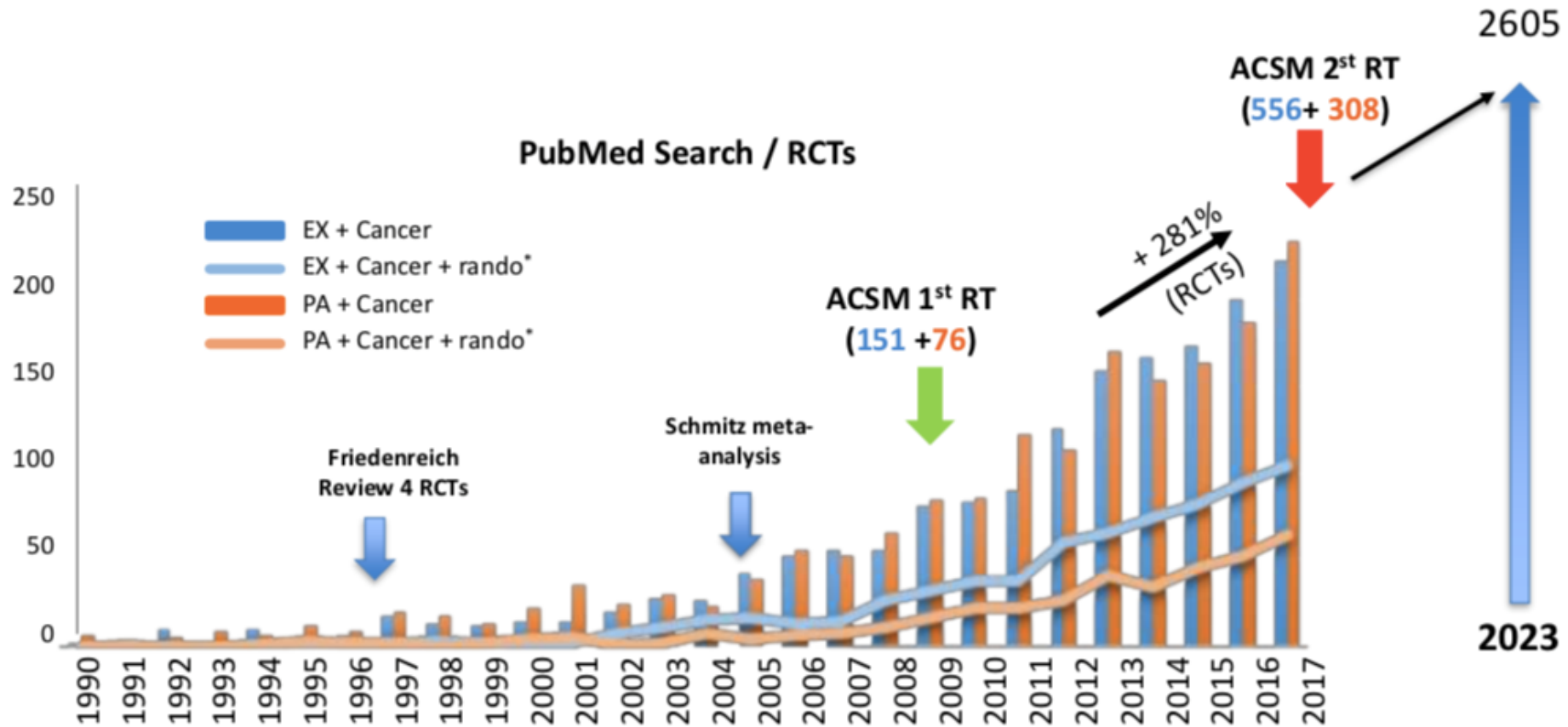
GENÉTICA NÃO É SINÔNIMO DE DESTINO.

Exercise Oncology: What is the Evidence and What are the Guidelines?

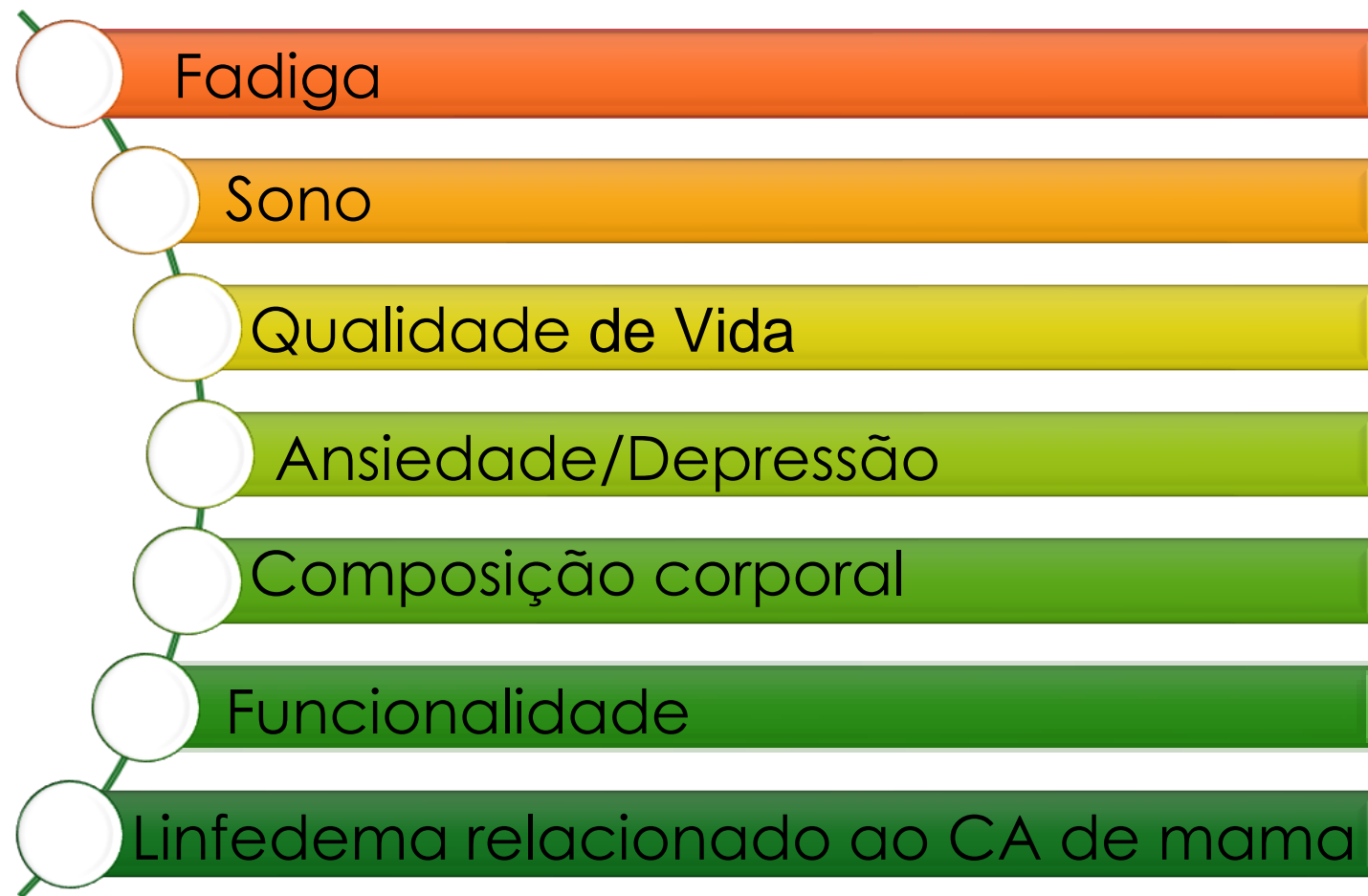
Kathryn H. Schmitz, PhD, MPH, FACSM, FTOS, FNAK
Professor, University of Pittsburgh
Past President, ACSM
Founder, Moving Through Cancer
American Cancer Society Clinical Research Professor

Schmitz, K. H., Courneya, K. S., Matthews, C., Demark-Wahnefried, W., Galvão, D. A., Pinto, B. M., Irwin, M. L., Wolin, K. Y., Segal, R. J., Lucia, A., Schneider, C. M., von Gruenigen, V. E., & Schwartz, A. L. (2010). American College of Sports Medicine roundtable on exercise guidelines for cancer survivors. *Medicine and Science in Sports and Exercise*, 42(7), 1409-1426. doi:10.1249/MSS.0b013e3181e0c112

RCTs in the Field of Exercise Oncology



RCTs de exercício em oncologia



Effects of Exercise on Health-Related Outcomes in Those with Cancer

What can exercise do?

+ Prevention of 7 common cancers*

Dose: 2018 Physical Activity Guidelines for Americans: 150-300 min/week moderate or 75-150 min/week vigorous aerobic exercise









+ Survival of 3 common cancers**

Dose: Exact dose of physical activity needed to reduce cancer-specific or all-cause mortality is not yet known. Overall more activity appears to lead to better risk reduction

*bladder, breast, colon, endometrial, esophageal, kidney and stomach cancers

**breast, colon and prostate cancers

Overall, avoid inactivity, and to improve general health, aim to achieve the current physical activity guidelines for health (150 min/week aerobic exercise and 2x/week strength training).

Outcome	Aerobic Only	Resistance Only	Combination (Aerobic + Resistance)
Strong Evidence			
 Cancer-related fatigue	3x/week for 30 min per session of moderate intensity	2x/week of 2 sets of 12-15 reps for major muscle groups at moderate intensity	3x/week for 30 min per session of moderate aerobic exercise, plus 2x/week of resistance training 2 sets of 12-15 reps for major muscle groups at moderate intensity
 Health-related quality of life	2-3x/week for 30-60 min per session of moderate to vigorous	2x/week of 2 sets of 8-15 reps for major muscle groups at a moderate to vigorous intensity	2-3x/week for 20-30 min per session of moderate aerobic exercise plus 2x/week of resistance training 2 sets of 8-15 reps for major muscle groups at moderate to vigorous intensity
 Physical Function	3x/week for 30-60 min per session of moderate to vigorous	2-3x/week of 2 sets of 8-12 reps for major muscle groups at moderate to vigorous intensity	3x/week for 20-40 min per session of moderate to vigorous aerobic exercise, plus 2-3x/week of resistance training 2 sets of 8-12 reps for major muscle group at moderate to vigorous intensity
 Anxiety	3x/week for 30-60 min per session of moderate to vigorous	Insufficient evidence	2-3x/week for 20-40 min of moderate to vigorous aerobic exercise plus 2x/week of resistance training of 2 sets, 8-12 reps for major muscle groups at moderate to vigorous intensity
 Depression	3x/week for 30-60 min per session of moderate to vigorous	Insufficient evidence	2-3x/week for 20-40 min of moderate to vigorous aerobic exercise plus 2x/week of resistance training of 2 sets, 8-12 reps for major muscle groups at moderate to vigorous intensity
 Lymphedema	Insufficient evidence	2-3x/week of progressive, supervised program for major muscle groups does not exacerbate lymphedema	Insufficient evidence
Moderate Evidence			
 Bone health	Insufficient evidence	2-3x/week of moderate to vigorous resistance training plus high impact training (sufficient to generate ground reaction force of 3-4 time body weight) for at least 12 months	Insufficient evidence
 Sleep	3-4x/week for 30-40 min per session of moderate intensity	Insufficient evidence	Insufficient evidence

Citation: bit.ly/cancer_exercise_guidelines

Moderate intensity (40%-59% heart rate reserve or VO_{2R}) to vigorous intensity (60%-89% heart rate reserve or VO_{2R}) is recommended.

MOVING THROUGH CANCER

Exercise is Medicine

AMERICAN COLLEGE OF SPORTS MEDICINE

Summary of Guidelines

	During Treatment		Post Treatment	
	Aerobic	Resistance	Aerobic	Resistance
ACSM	30 min 3x weekly Moderate	2x weekly	150-300 min/weekly Moderate	2x weekly
ACS	Recommended but not specific		150-300 min/weekly	No comment
ASCO	Recommended	Recommended	Not the focus of the guideline	

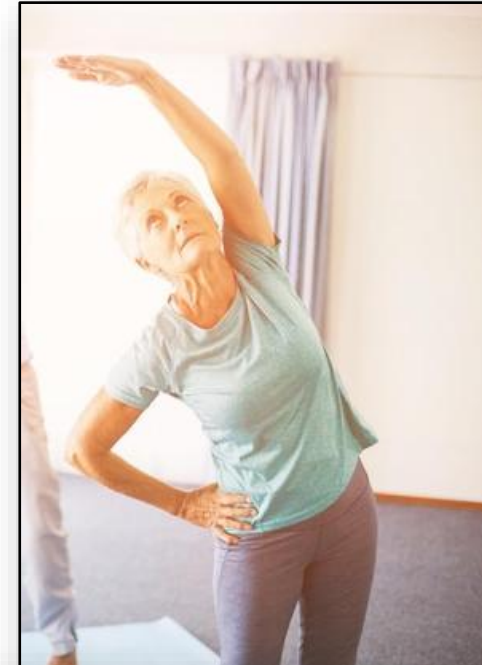
Exercício Físico



Review

Exercise and other non-pharmaceutical interventions for cancer-related fatigue in patients during or after cancer treatment: a systematic review incorporating an indirect-comparisons meta-analysis

Roger Hilfiker,¹ Andre Meichtry,² Manuela Eicher,^{3,4} Lina Nilsson Balfe,¹ Ruud H Knols,⁵ Martin L Verra,⁶ Jan Taeymans^{7,8}



Pílulas do exercício
Independência, redução da fadiga, prevenção da caquexia

RESEARCH



Association of self-directed walking with toxicity moderation during chemotherapy for the treatment of early breast cancer

KA Nyrop^{1,2} · A Page³ · AM Deal² · C Wagoner⁴ · EA Kelly² · Gretchen G. Kimmick⁵ · Anureet Copeland⁶ · JoEllen Specia⁶ · William A. Wood^{2,7} · HB Muss^{1,2}

Received: 7 June 2023 / Accepted: 18 December 2023

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Efeitos da QUIMIOTERAPIA

1/6

e números de passos por dia

<https://doi.org/10.1007/s00520-023-08275-4>



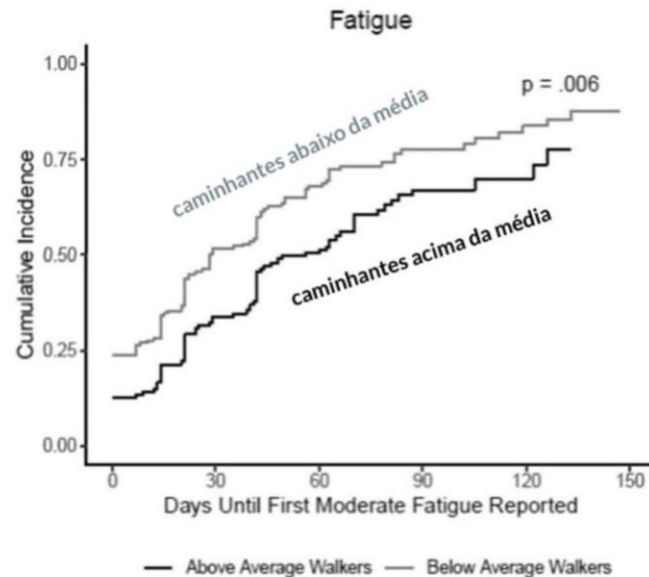
Nyrop, K A et al. "Association of self-directed walking with toxicity moderation during chemotherapy for the treatment of early breast cancer." Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer vol. 32,1 68. 28 Dec. 2023, doi:10.1007/s00520-023-08275-4

Patient-reported symptoms - moderate, severe or very severe (%)

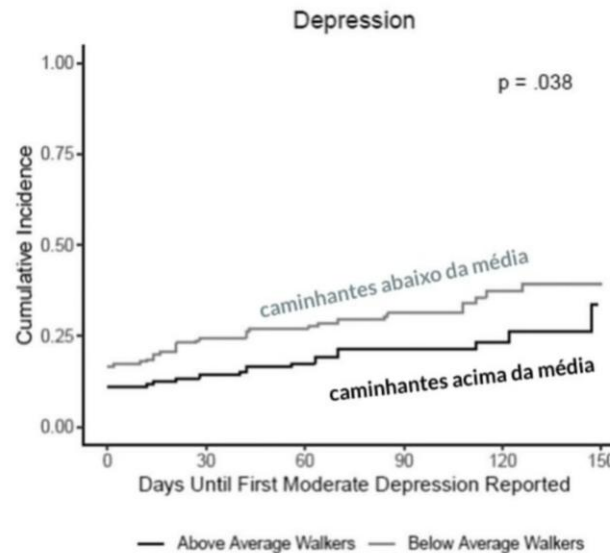
80

73

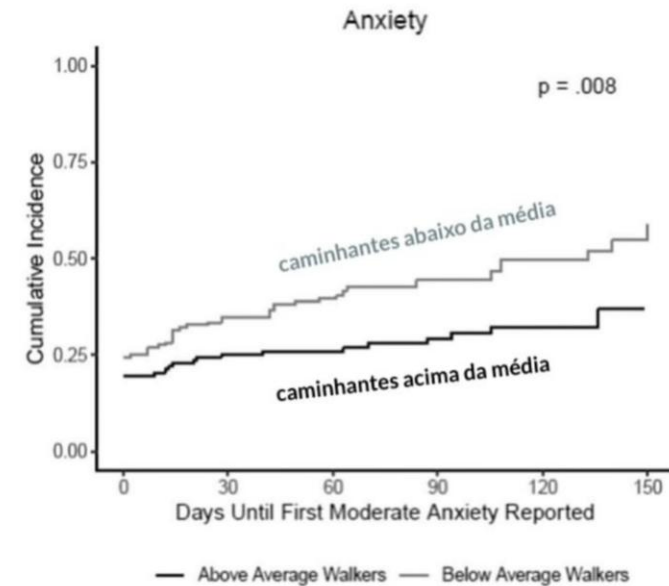
Menor incidência de fadiga nas mulheres que caminham mais



Menor incidência de depressão nas mulheres que caminham mais



Menor incidência de ansiedade nas mulheres que caminham mais



<https://doi.org/10.1007/s00520-023-08275-4>

Made with VISME

<https://doi.org/10.1007/s00520-023-08275-4>

<https://doi.org/10.1007/s00520-023-08275-4>

Made with VISME

□ Pre-chemotherapy ■ During chemotherapy

Adaptado de: Nyrop, K A et al. "Association of self-directed walking with toxicity moderation during chemotherapy for the treatment of early breast cancer." Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer vol. 32,1 68. 28 Dec. 2023, doi:10.1007/s00520-023-08275-4

Urban Nature Experiences Reduce Stress in the Context of Daily Life Based on Salivary Biomarkers



Hunter, MaryCarol R et al. "Urban Nature Experiences Reduce Stress in the Context of Daily Life Based on Salivary Biomarkers." *Frontiers in psychology* vol. 10 722. 4 Apr. 2019, doi:10.3389/fpsyg.2019.00722

Durante 2 meses, **36 moradores de centros urbanos** tiveram experiência com a natureza

Passar um tempo em um local ao ar livre que traz um senso de contato com a natureza

Pelo menos 3 vezes por semana durante 10 minutos ou mais

TABLE 2 | Efficiency of a nature experience in reducing stress in terms of time expended.

Effect	n	Beta	% Cortisol drop/hour ^A
Intercept	110	-0.52	
Time of day (diurnal effect)	110	-0.125	11.7%
Duration interval: length of NE (min) per quartile ^B	NE frequency for each minute in the interval	n/% of total sample	Beta
Q1: 7–14 min	1,2,1,2,5,7,7,3	28/25.5%	-0.0864
Q2: 15–20 min	5,2,8,1,6,5	27/24.5%	-0.0375
Q3: 21–30 min	4,1,3,2,6,4,3,1,1,5	30/27.3%	-0.2048
Q4: >30 min	1,1,2,1,1,1,1,2,1,2,1,1,1,1,1,1,1,2,1,1,1	25/22.7%	-0.1214

Para o cortisol salivar, a experiência com a natureza gerou uma queda de **21,3%/hora** além da queda diurna de **11,7%** do hormônio

21 a 30 minutos de contato com a natureza, **reduzem o estresse**

Review article

Combined Aerobic and Resistance Training Improves Body Composition, Alters Cardiometabolic Risk, and Ameliorates Cancer-Related Indicators in Breast Cancer Patients and Survivors with Overweight/Obesity: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

Desfechos positivos da composição corporal

- 1- Índice de massa corporal
- 2- Relação cintura quadril
- 3- Gordura corporal
- 4- Massa isenta de gordura

Desfecho positivo dos marcadores inflamatórios

- 1- Redução de IL6, IL8, TNFa ,

Desfecho de marcadores imunológicos

- 1- NK cells

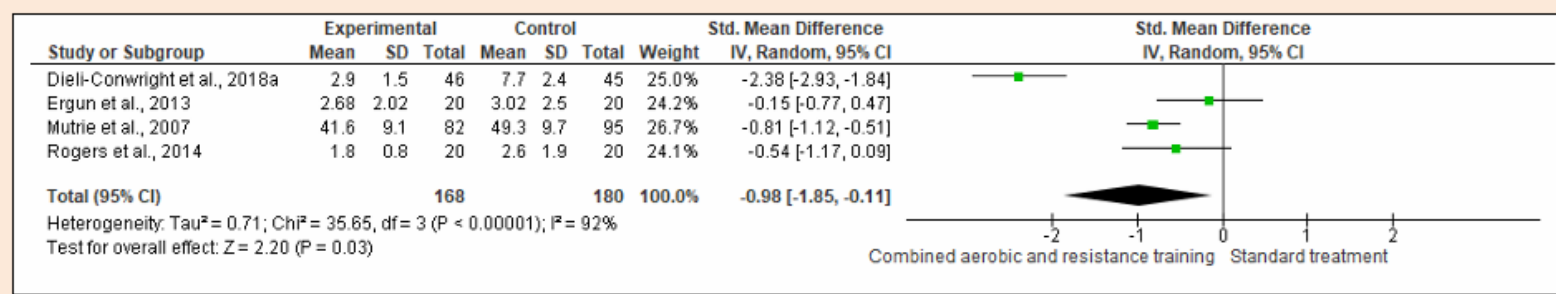


Figure S20. Effect of CART on cancer-related FA.

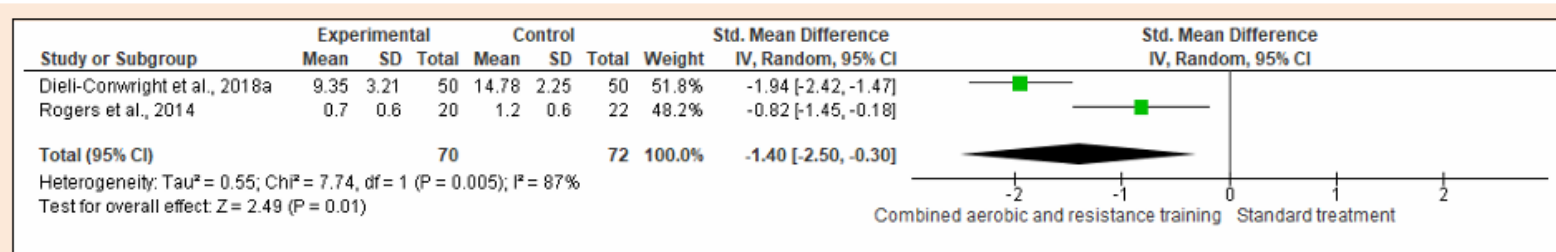


Figure S21. Effects of CART on SQ.

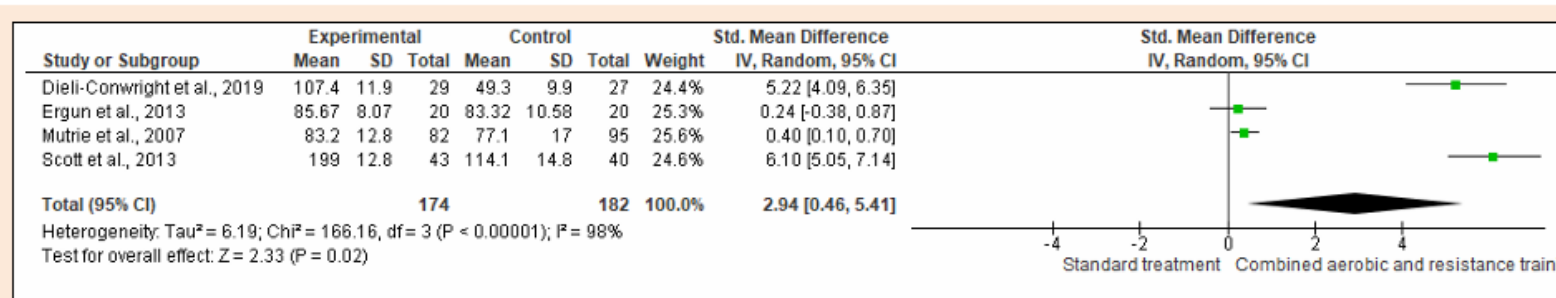


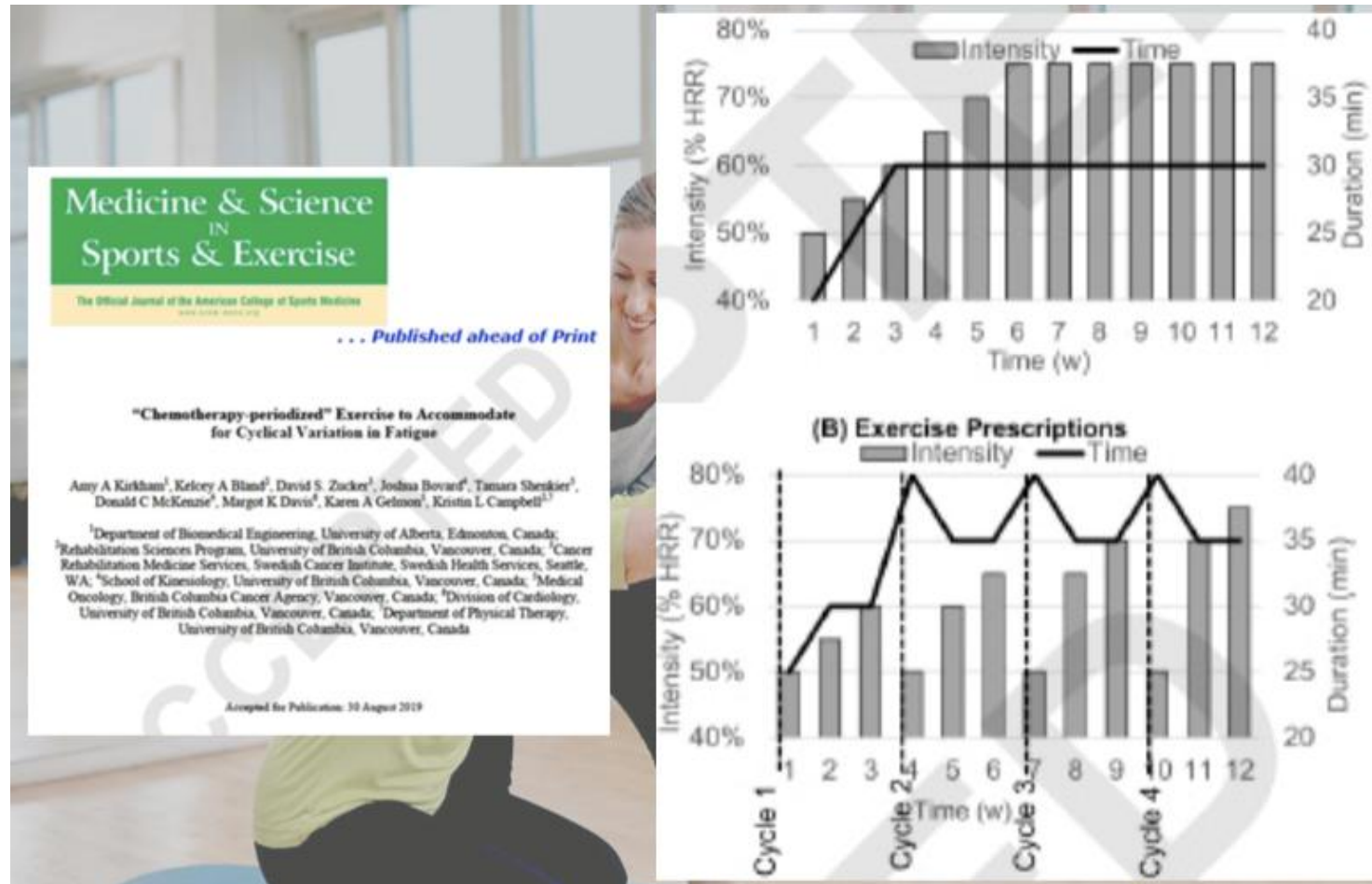
Figure S22. Effect of CART on QoL.

Melhoria dos efeitos colaterais

:

- 1- Fadiga
- 2- Sono
- 3- Qualidade de vida

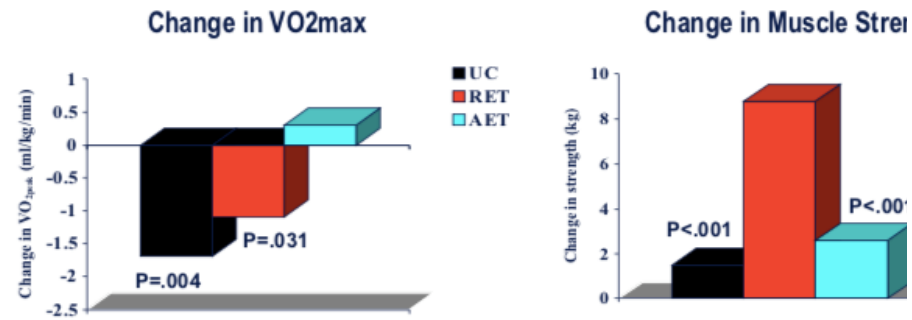
Como aliar Periodização do treinamento e QT



Hillengass M, Joseph J, Mccarthy J, Hillengass J. Physical Activity in Multiple Myeloma: A Review of the Current Literature. J Adv Pract Oncol. 2023 Mar;14(2):153-158. doi: 10.6004/jadpro.2023.14.2.5. Epub 2023 Mar 1. PMID: 37009406; PMCID: PMC10062531.

Effects of Aerobic and Resistance Exercise in Breast Cancer Patients Receiving Adjuvant Chemotherapy: A Multicenter Randomized Controlled Trial

Kerry S. Courneya, Roxanne J. Segal, John R. Mackey, Karen Gelmon, Robert D. Reid, Christine M. Friedenreich, Aliya B. Ladha, Caroline Proulx, Jeffrey K.H. Vallance, Kirstin Lane, Yutaka Yassi, and Donald C. McKenzie



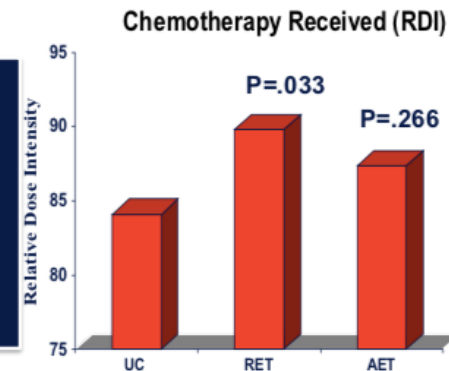
Courneya et al. JCO 2007;25:4396-4404

Effects of Aerobic and Resistance Exercise in Breast Cancer Patients Receiving Adjuvant Chemotherapy: A Multicenter Randomized Controlled Trial

Kerry S. Courneya, Roxanne J. Segal, John R. Mackey, Karen Gelmon, Robert D. Reid, Christine M. Friedenreich, Aliya B. Ladha, Caroline Proulx, Jeffrey K.H. Vallance, Kirstin Lane, Yutaka Yassi, and Donald C. McKenzie

Percentage of participants who received **85% of their planned RDI** was:

- 65.9% UC group
- **78.0% RET group**
- 74.4% AET group



Courneya et al. JCO 2007;25:4396-4404

Exercise During Cancer Treatment: A Key Factor in Reducing Hospitalization

Mizrahi et al., 2023



Our systematic review quantified the benefits of exercising during cancer treatment on both the rate and length of hospital admissions.

Including 20 studies and 2,635 participants across various cancer types (mostly blood, breast and colorectal), our study revealed that structured **exercise during cancer treatment**:



reduced hospital length of stay by 1.4 days



reduced hospital admissions by 8%

Nearly all programmes were moderate intensity, and were mostly combinations of aerobic (e.g. walking), resistance exercises (e.g. hand weights) and stretching, with some including balance exercises.



BJSM

Infographic by Chloë Williamson

CLICK HERE 
for full study

Physical activity with cancer recurrence and survival

PREDICT

Treatment	Additional benefit (%)	OS (%)
Surgery only	-	90
Chemotherapy	1	91
Hormone therapy	3	94

Physical activity

34% reduction in the risk of dying from breast cancer compared to those who were inactive.(2)

30-40% reduction in the risk of breast cancer recurrence.

Table 1. Participant Reports on Positive Effect of the Study

- “I can now open a juice bottle again.”
- “I don’t feel as tired after treatment.”
- “I have less back pain.”
- “It is much easier getting into my car and not having to drag my leg into it.”
- “My neuropathy has improved.”
- “I feel stronger in my legs and can stand up from a chair more easily.”
- “I can reach the top shelf in the kitchen, because I can stand on my toes again without pain or balance issues.”
- “I can take longer walks with my dog, and I can even pick up the droppings more easily.”
- “I have fewer muscle cramps at night.”


Physic
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Myeloma patients' experiences of a supervised physical activity programme: a qualitative study

Joanne Land^{1,2}  · Julia Hackett³ · Govundee Sidhu¹ · Malgorzata Heinrich¹ · Orla McCourt^{1,2} · Kwee L. Yong² · Abi Fisher¹ · Rebecca J. Beeken⁴

Conclusões: Uma intervenção de exercícios pós-tratamento para pacientes com MM foi uma experiência positiva, que melhorou o bem-estar físico e psicológico dos participantes. Exercícios personalizados em academia e em casa, um fisioterapeuta especializado em câncer e apoio contínuo foram considerados importantes para o sucesso.


ARTICLE

Clinical Study



BJC
British Journal of Cancer

Fatigue, quality of life and physical fitness following an exercise intervention in multiple myeloma survivors (MASCOT): an exploratory randomised Phase 2 trial utilising a modified Zelen design

Dimitrios A. Koutoukidis^{1,2,3}, Joanne Land¹, Allan Hackshaw⁴, Malgorzata Heinrich¹, Orla McCourt^{1,5}, Rebecca J. Beeken ^{1,6}, Stephanie Philpott¹, Dunnya DeSilva⁵, Ali Rismani⁷, Neil Rabin⁷, Rakesh Popat⁷, Charalampia Kyriakou⁷, Xenofon Papanikolaou⁸, Atul Mehta⁷, Bruce Paton⁹, Abigail Fisher¹ and Kwee L. Yong⁵

British Journal of Cancer (2020) 123:187–195; <https://doi.org/10.1038/s41416-020-0866-y>

Conclusões: O exercício físico pareceu seguro e melhorou a força muscular e a aptidão cardiovascular, mas os benefícios na fadiga pareceram limitados aos participantes com fadiga clínica no início do estudo. Estudos futuros devem se concentrar em pacientes com fadiga clínica.

RESEARCH NOTE

Open Access

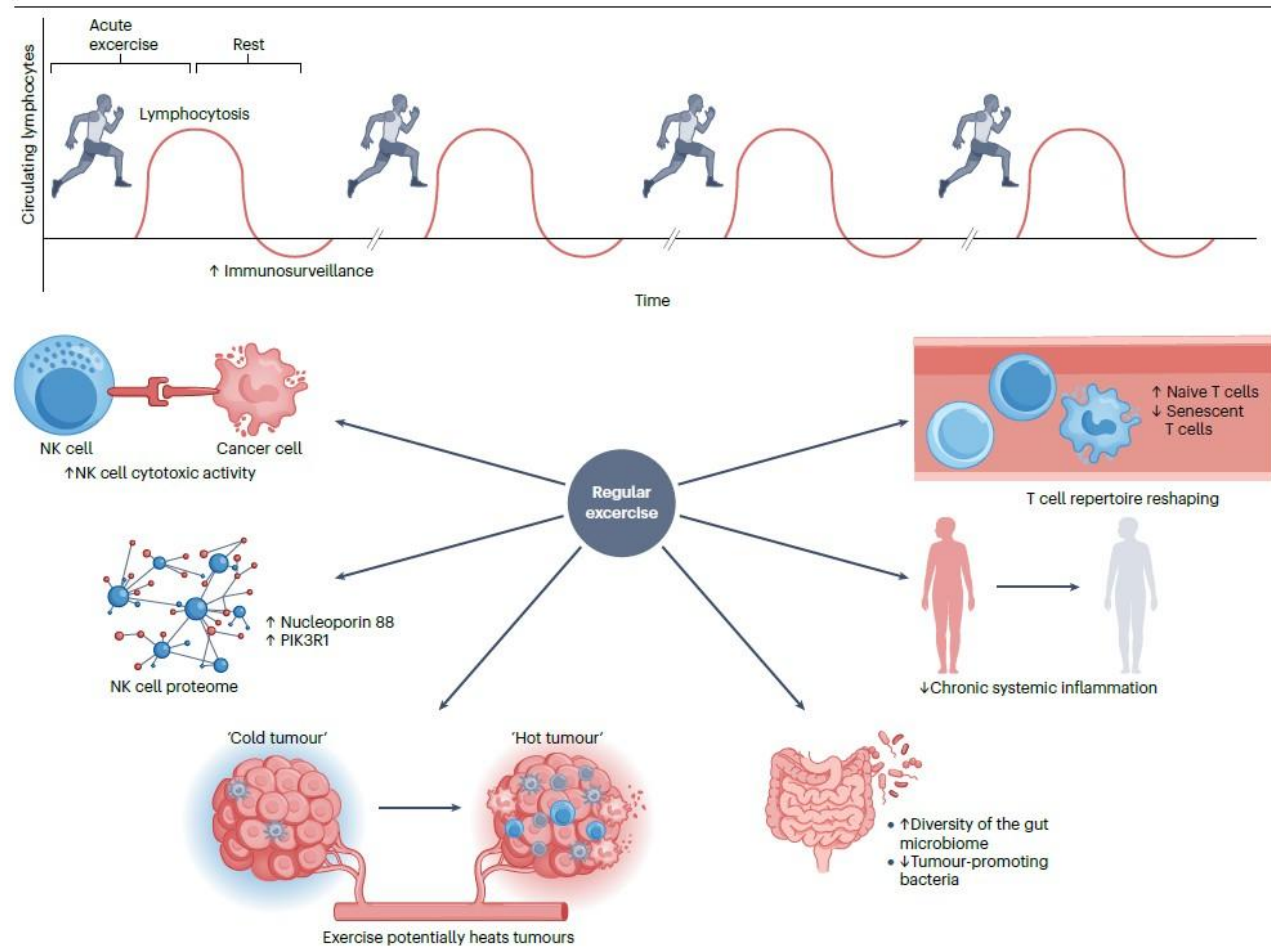
Multiple myeloma and physical activity



Catherine S. Y. Lecat^{1*} , Orla McCourt^{1,2}, Joanne Land³, Kwee Yong¹ and Abigail Fisher³

Dos 65 entrevistados, 75% gostariam de aumentar seu nível de exercício. Fraqueza, fadiga e dor foram as barreiras mais comumente percebidas à atividade física. 59% gostariam de receber aconselhamento sobre atividade física. Apenas 25% foram considerados ativos com base em suas pontuações no GLTEQ. Por fim, houve uma correlação positiva significativa entre a pontuação no GLTEQ e a pontuação no FACT-G ($p < 0,001$). Os resultados destacam uma necessidade não atendida de exercício em pacientes com mieloma. A prática atual deve ser revisada para desenvolver um modelo de cuidado mais holístico que incorpore aconselhamento ou programa de exercícios personalizados.

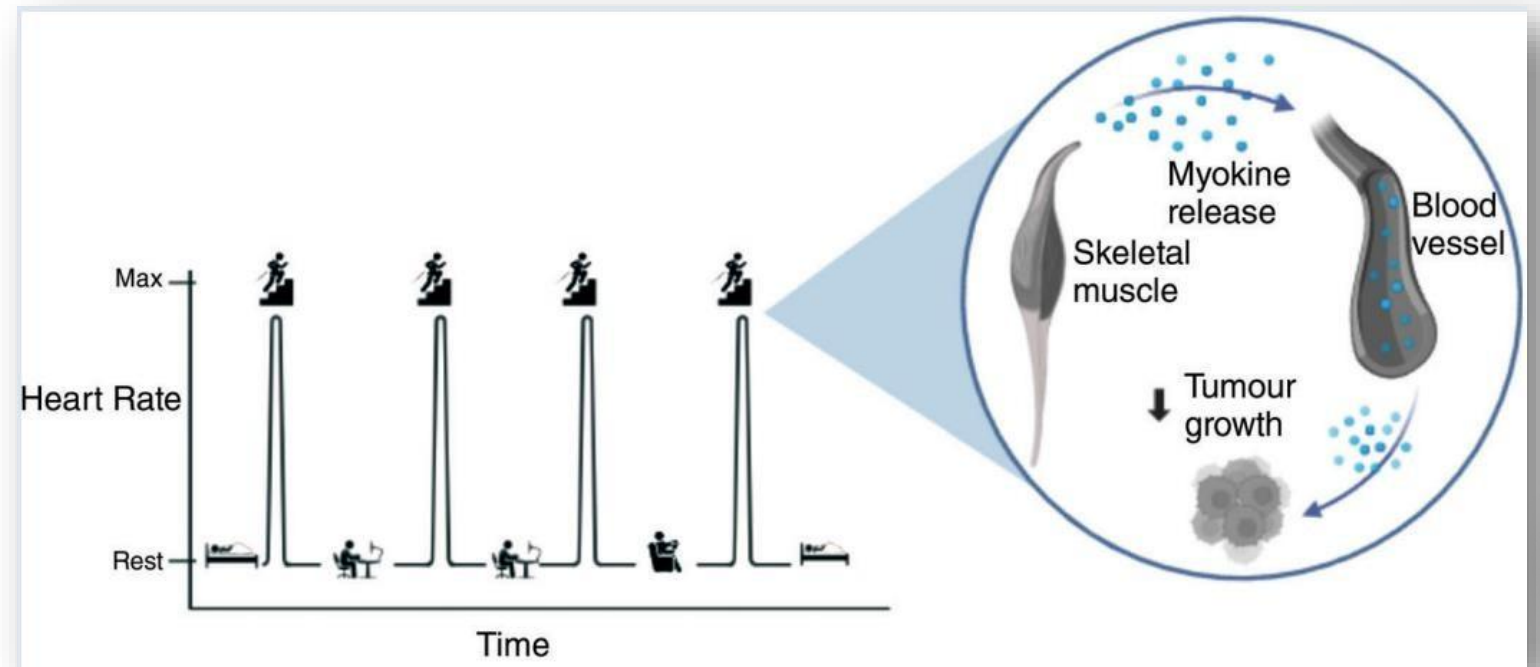
The effect of physical exercise on anticancer immunity



Benefits beyond cardiometabolic health: the potential of frequent high intensity 'exercise snacks' to improve outcomes for those living with and beyond cancer

- Miocinas afetam microambiente tumoral
- ↑ [] adrenalina P mobilização de linfócitos NK sensíveis a IL-6
- ↑ [] adrenalina P facilita a supressão do crescimento celular tumoral
- Intensidade que atinja limiar anaeróbico e modalidade que envolva grandes grupos mm P maior liberação de adrenalina e noradrenalina (maior recrutamento de NK) e maior liberação de miocinas

- HIIT → melhora de perfil metabólico, ↑ massa muscular e ↓ gordura corporal
- Exercise snacks → "bouts" de exercícios planejados, estruturados, várias vezes ao dia
- Exercise snacks :



- Efeito anti-tumor do exercício é transitório
- ↑ miocinas que ocorrem pelo exercício retorna a níveis basais dentro de 30 min

Desafios



OPEN **The effect of acute exercise on circulating immune cells in newly diagnosed breast cancer patients**

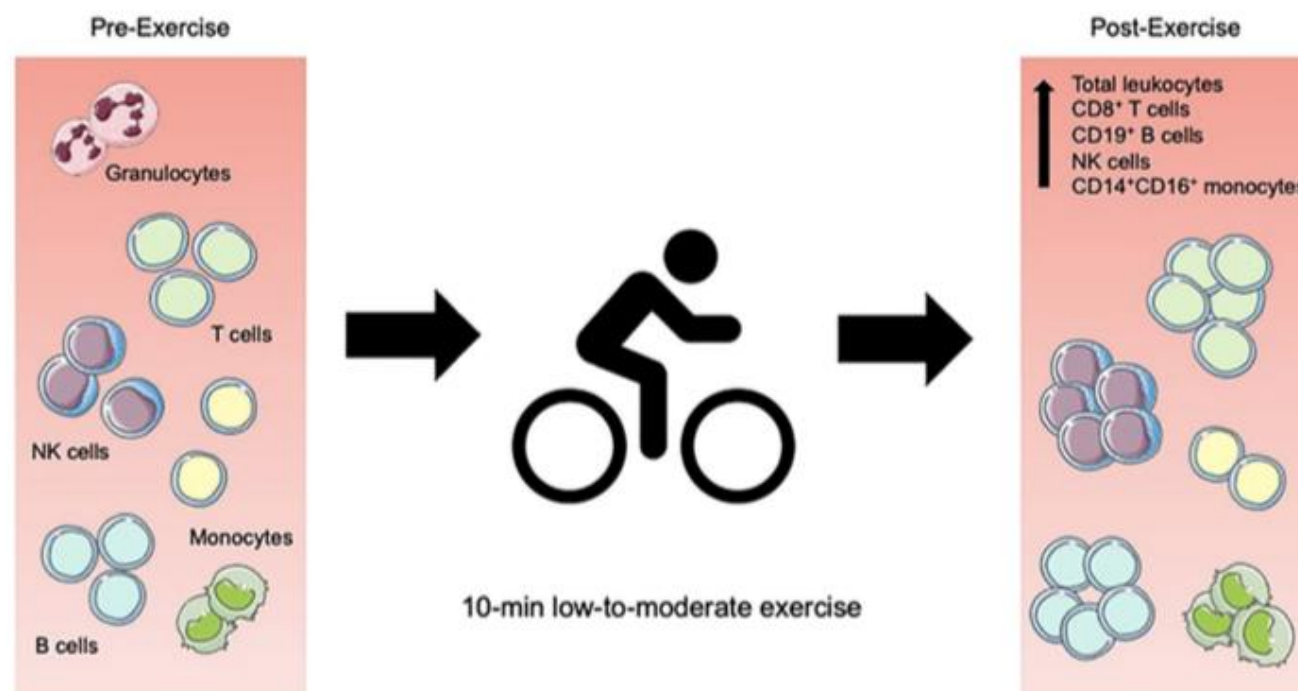


Figure 5. Acute exercise response in breast cancer patients. The number of several leukocyte subpopulations increase in blood following an acute exercise.



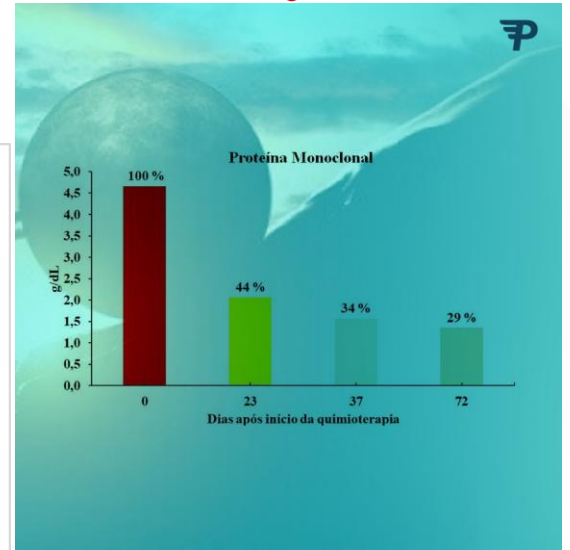
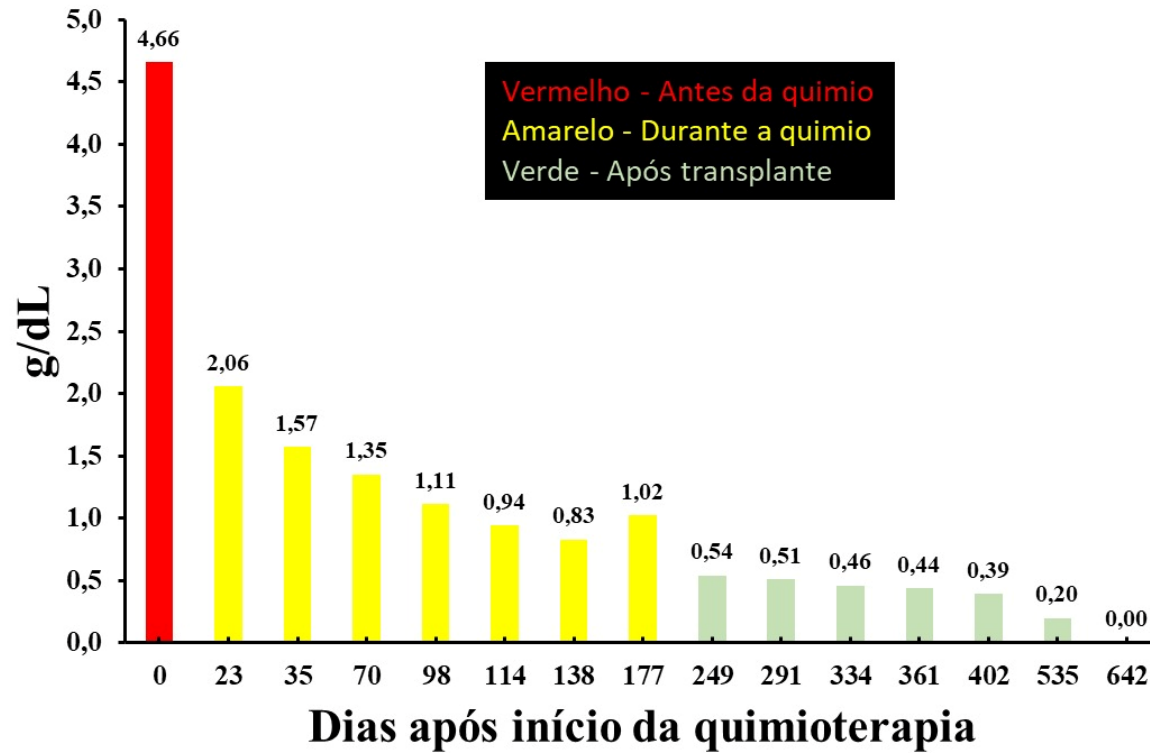
**VOCÊ IMAGINA QUE
ESSE CARA TÁ PASSANDO
POR UM TRATAMENTO
ONCOLÓGICO COM
ESSA DISPOSIÇÃO
E ENERGIA ?**

P PEDRO ALMEIDA
DO MOVIMENTO À VIDA

Impressionante, não? Foram 70 pedais com aproximadamente 30 km de distância percorrida por sessão de treino, completando 2064 km em 3 meses e meio de tratamento.



Proteína Monoclonal - Sérica



GOSTOU?
 MOTIVE ALGUÉM
 COMPARTILHANDO
 ESSE POST !!!

Comprei esta geringonça para usar no hospital durante o transplante da medula.
 O tempo máximo estimado para ficar no hospital é 30 dias. O mínimo 18.

paty27.08 @icesp

Eu dr.Diego Bruno Mendes

Médico Oncológico Hematológico Especializado em Medula Óssea.

Sou médico da Paciente:

Patricia de Souza Carvalho

Estou relatando o estado clinico patológico da paciente referente ao Câncer Metástico de Mieloma Medula Óssea. Foi realizado na paciente exames patológicos da medula óssea:

Exames sangue + líquido das células tronco (Mielograma óssea + biópsia)

Calcio+ contagem células blastos.

Após resultado, foi constatado na paciente 20 % das células tronco comprometida por um tumor na coluna, mais cálcio aumentado, baixas taxas sanguíneas, o que a ocasionava, cansaço, dores nas costas, constantes infecções.

O câncer medula óssea era de grande avanço entre 5% de Reversão, possibilitando também à um transplante de medula óssea caso viesse se espalhar.

A paciente estava com vários pontos Metásticos pelo corpo, Intestino Grosso, Baço, e mais a LMA (Leucemia Mielóide Aguda) que junto com o Mieloma Múltiplo Medula Óssea, eram de grave proporção e de um possível avanço acelerado. Foi realizado na paciente Quimioterapias Vermelhas, Brancas, Imunoterapia

@icesp

Eu dr.Rennan Toledo Marques
Médico Hematológico da paciente
Patricia de Souza Carvalho
Estou relatando o seu estado clínico Hematológico LMA (leucemia Mileóide Aguda). Seu estado era de grave proporção devido as alterações nas células brancas e vermelhas em seu sangue, plaquetas bsixas ,lhe trazendo várias infecções virais como febres constantes, fraqueza muscular, cansaço. Foi preciso ser colocados em fevereiro e março na paciente marcadores tumorais circulantes para rastrear neoplasias. Relato que após processo entre maio foi tirado os marcadores da paciente por haver melhoria , e os meses decorrentes foi diminuindo os tumores, abaixando o volume em cm das células hemácias e células leucócitos. Sua parte Hematológica estava comprometida em 80 e 90 %. Ela foi se exercitando como dizia através de atividades físicas diárias. Exames relataram sua resistência muscular melhorando a cada dia, e o fortalecimento do seu sistema imunológico , não tendo mais infecções virais e nem febre.

Pilulas do Exercicio

A paciente está sem células tumorais em seu corpo células todas negativas pra LMA.

Ela dizia estar fazendo exercícios físicos ao tratamento e ganhando força muscular. Laudo final Hematológico da paciente;

* Células Brancas leucócitos: de 8,9 para 0.0 negativada

* Células Vermelhas Hemácias: de 7,3 para 0,0 negativada.

Estado imunológico está em 90 %

Um caso surpreendente na Medicina, onde seu estado clínico era de 95% comprometido e 5% de Cura.

Mas foi revertido como ela diz aos médicos com Coragem Fé e Pilulas do Exercícios.

Eu vi um caso de Reversão impressionante, sendo que pelas mãos da Ajunta Médica Clínica foi o 1o caso raro de Remissão.

Parabéns a Paciente Patricia pela Coragem nos 5% revertidos pra 100%.

Dr.Rennan Toledo Marques

Pilulas do Exercicio



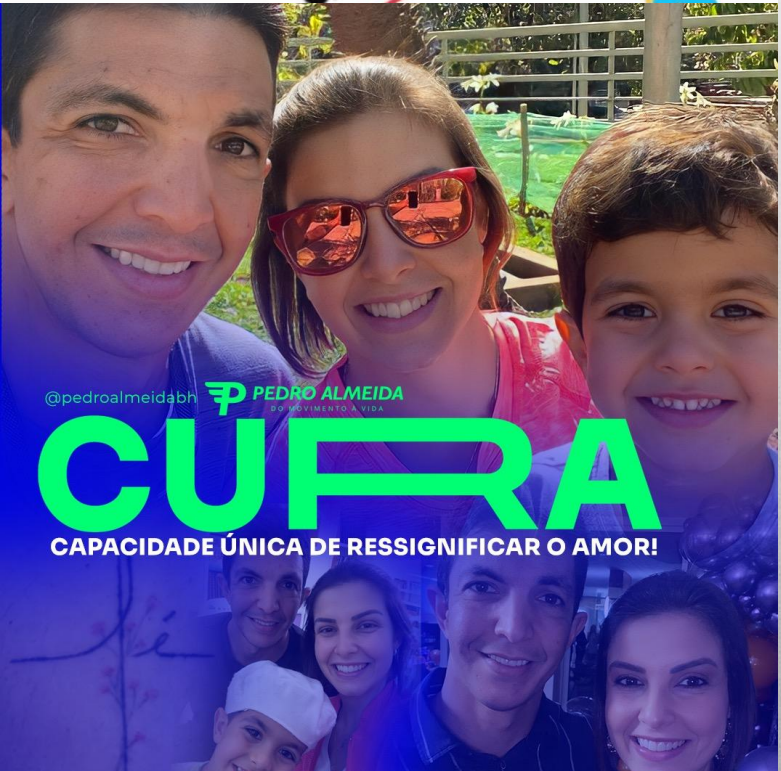


drumondmarta comentou: Você é mestre em renovar a nossa esperança, através do movimento e desse coração enorme traz a gente de volta à vida! Seja sempre luz!!! 5h



♥ [Ver resposta](#) [Mensagem](#)

A gente luta de pé, mas é de joelhos que temos a certeza da vitória.



Obrigado

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