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Subjective Reduction in Symptoms of Chronic Fatigue Syndrome Following Long-Term Treatment with a Porcine Liver Extract

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A PROSPECTIVE STUDY OF THE USE OF KUTAPRESSIN, a porcine liver extract approved for humans, in the treatment of chronic fatigue syndrome (CFS) examined subjective reduction in symptoms on a five-category functional symptom scale via assessment by both patients and physicians. Kutapressin, (2 mL im injections) had been used since 1940 without reports of significant toxic effects to treat patients in the United States who had conditions such as herpes zoster.

Therapy with Kutapressin (2 mL im daily) was administered for 25 days; this dosage was followed by 2 mL of drug administered every other day for 50 days and then by 2 mL of drug administered three times a week for 105 days, for a total of 95 injections over the 180 days from initiation of therapy. If a minor setback occurred the dosing regimen was started over again, and treatment was continued beyond 6 months if continued progress was considered likely by the patient and physician. Eighty-five percent CFS patients who had chronic fatigue for at least 4 months reported notable (only slight residual symptoms) or marked (asymptomatic) reduction in symptoms while receiving therapy with Kutapressin. Forty-two percent of patients reported complete remission of symptoms while receiving Kutapressin. The median number of injections required for moderate reduction in symptoms was 31; for notable reduction, 60; and for marked reduction (i.e., complete remission of symptoms), 85.

Minor setbacks during therapy were reported by 21 (16%) of 130 patients; of these 21 patients, 12 eventually reported notable reduction in their symptoms and four reported marked reduction. Of the 111 patients reporting notable or marked reduction in symptoms, 103 achieved this reduction within the first 6 months of treatment while the remaining 8 patients required treatment beyond 6 months. Of the 55 patients who reported marked reduction in symptoms, 36 did so within the first 6 months of treatment. Seventeen patients reported only moderate reduction in symptoms, and two reported a slight reduction. In an earlier study (before 1990) by our group in which less-frequent and fewer doses of Kutapressin (2 mL im daily for 10 days followed by this dosage three times a week) were administered, 201 (74%) of 270 patients reported comparable notable or marked reduction in symptoms.

In the present study, Kutapressin appeared to subjectively decrease the clinical symptoms of most patients with CFS. The reduction in symptoms (with Kutapressin treatment) reported herein is consistent with Kutapressin's reported in vitro activity against Epstein-Barr virus and human herpes virus type 6.