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Whom it may concern.

I am a Medical Practitioner that underwent a Total Gastrectomy, Omentectomy, Roux-Y Anastomosis and Coeliac Gland Clearance on the 19 December 2008 for Carcinoma of the fundus of the stomach. The Histology showed a totally Undifferentiated Carcinoma with involvement of two groups of gland in metastatic process. Staging of the Carcinoma was Adenocarcinoma Stage 2B.

I started with Oncotherapy at six weeks after surgery with Chemotherapy. A 25 day Radiation Therapy course was started after three weeks of Chemotherapy.

The combination of Chemo- and Radiation Therapy led to a severe depletion of White blood cells and a reduction in general Body Resistance with the result that I developed a lung abscess requiring further Surgery and ICU treatment. I do not exaggerate if I state that in the opinion of several colleagues - every one thought that I would not survive.

After weeks of delay, Oncotherapy was resumed and completed. I developed a Septicaemia at the completion of the Oncotherapy because of severe Neutropenia. After another bout of ICU treatment I lost 40 kg of bodyweight representing about 40% of total bodyweight.

At the three months follow-up with the Oncologist I asked what would be the future planning and I was informed that I would be followed-up in three months to detect metastatic illness.

In the interim I was doing a lot of research especially on the Internet and after reading the book written by Dr. Serfontein I decided to attend Dr. E. Pretorius who wrote the Foreword to the Serfontein book.

At my first appointment I presented Dr. Pretorius with all the relevant Surgical and Pathological reports and asked him whether



there was anything else to be done.

He told me about highly specialized tests that he suggested be done by a laboratory in Germany. The purpose of the test was to detect metastasis in the peripheral blood and to genetically examine the cells to ascertain their sensitivity to chemotherapeutic agents. Once we had specific sensitivities we could treat those with the most sensitive Chemotherapeutic agents. The benefits would be multiple;

1. Combinations of Chemotherapeutic agents with high sensitivity could be used alternatively at dosages much lower than the dosages used according to the American Cancer Institute Protocols with the result that
2. The side effects of high dosage therapy could be minimized or even excluded and that
3. The patient would get even greater benefit if the sensitive Chemotherapeutics are administered under conditions of Hypoglycemia. This work is attested to by research.

The concepts and plan that Dr. Pretorius had was not completely foreign to me as I have come across most of the concepts in my research. I did not know, however, of the tests that can be done on the peripheral blood but enquiry on the Internet confirmed the procedure and the technology was affirmed by the Oncologist in Vereeniging.

After careful and thoughtful consideration by me I accepted the protocol suggested by Dr. Pretorius. The bloods were taken at the first consultation and sent off to Germany. The results of the tests became available after about two weeks and I went to Pretoria for follow-up at the commencement of treatment. I completed a ten course protocol.

I would like to make the following comments about the professional interaction with Dr. Pretorius:

1. At no time did I feel unhappy, threatened or coerced by the doctor. His demeanor was always professional and at all times he appeared to be knowing what he was talking about. He explained to me all the pros and problems associated with the therapy and



answered all the many questions that I had, to my satisfaction.

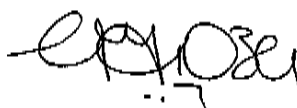
2. The facilities for treatment is at least as good and as adequate when compared to the facilities at the Oncotherapy Unit in Vereeniging.

3. The amount of personal supervision, especially during the times of Hypoglycemia, was perfectionistic. During my treatments there were opportunities for me observing his interaction with other patients and I would call it exemplary.

4. If the Service that Dr. Pretorius rendered to me and his other patients were not available, we would have had to go to countries outside of our borders at immense cost and inconvenience.

When it comes to the odds of survival, are the odds were against me. I had a highly malignant tumor of the stomach with spread to the neighboring glands. I lost 40% of bodyweight due to two episodes that can be firmly laid at the door of conventional high dosage oncotherapy in the presence of very sensitive bone marrow response. I have been for follow-ups and no signs of metastatic illness could be found. I have slowly but surely gained Ten Kilograms of weight and have been symptom-free for Sixteen months. I do not have it against Conventional therapy because I have been followed-up by them and the Oncologist was aware of my visits to Dr. Pretorius. I cannot say that Alternative Oncotherapy have cured me but I can say that I have been blessed probably by a combination of available therapies and I believe that I personally and Medicine in our Country will be the poorer if the alternatives were not accessible and available.

Yours truly,
George F Rautenbach.



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