Mistletoe

Pharmacologically Relevant Components of Viscum album L.
Guest Editor:
Hartmut Franz, Berlin (GDR)
59 figures, 22 tables, and 1 colorplate, 1986

Drug Dosage
The authors and the publisher have exerted every effort to ensure that drug selection and dosage set forth in this text are in accord with current recommendations and practice at the time of publication. However, in view of ongoing research, changes in government regulations, and the constant flow of information relating to drug therapy and drug reactions, the reader is urged to check the package insert for each drug for any change in indications and dosage and for added warnings and precautions. This is particularly important when the recommended agent is a new and/or infrequently employed drug.

Drug Dosage

Fig. 1. Untreated discharge. Large associations of tumor cells (a; x 125) which on higher magnification (b; x 550) are seen to consist of completely vital, adenomatous tumor cells.

Fig. 2. Case shown in figure 1, 1 week after Iscador treatment. a x 125. b On high magnification (x 700) the cells show a large degree of degenerative damage.

Fig. 4. Massive invasion by tumor cell colonies, with sparsely distributed lymphocytes and macrophages. Right and left from the same source, x 400.

Fig. 5. a Left. Massive numbers of lymphocytes, abundant eosinophilic granulocytes, and no tumor cells, x 600. b Right. Same origin as figure 4. x 700.

Fig. 7. An especially pronounced eosinophilic reaction, x 200.
Fig. 9. a Typical vital tumor cell, x 400. b Lymphocytes concentrated around a highly degenerated colony of tumor cells, some showing penetration into the colony, x 125.
Fig. 11. a Tumor cell in the native exudate, x 600. b Degenerated tumor cell and leukocytic reaction, x 250.
Fig. 13. Very large quantities of cell detritus and a mixed leuko-lymphocytic cell picture, x 200.

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