

# KASFERO NATURMEDIZIN®

## Thyroid gland and biological alternative replacement -suppressive therapy-

- Anamnesis
- Laboratory diagnostics
- Successful therapy

### **Possibilities of testing**

#### \* Anamnesis

- Obesity, muscle weakness (hypothyroidism)
- Malnutrition, nervousness (suspected hyperthyroidism)
- Other symptoms of the thyroid gland
- Running events (e.g. hormone therapy, scintigraphy)
- Following symptoms and illnesses (e.g. menopause symptoms)
- Existing Therapy (thyroid hormone-substitution)

#### \* Clinical trials

- **Sonography** ultrasound (size, structure of the tissue)

- **Scintigraphy** nuclear-medical diagnostic method: distribution of isotopes (radiopharmaceuticals) in the body by injection - not recommended!

\* Laboratory tests

- **TSH** thyroid stimulating hormone (thyroid stimulates the pituitary hormone)
- **FT3** free T3 = triiodothyronine
- **FT4** free T4 = thyroxine = tetraiodothyronine
- **TPO** TPO-AK = anti-TPO = Thyroid-Peroxidase-Auto-AK (formerly: MAK = microsomal antibodies)
- **TAK** thyroid antibodies
- **TRAK** anti-TSH-Receptor

\* Laboratory tests of thyroid markers of the thyroid gland

(not the subject of this presentation)

### Tireoglobulin

What does a high level mean:

Suspicion on the proliferative process of the thyroid gland (papillary and follicular carcinoma of the thyroid gland).

Measurement of thyroglobulin is suitable for monitoring the recurrence, primarily in total thyroidectomy and therapy with radioactive iodine.

Note: An elevated level occurs in struma nodosa, hyperthyroidism, in T3 medication, and in the oral use of the contraceptives.

### Calcitonin

What do high values mean?

Suspicion of medullary thyroid cancer or non-thyroidal tumors (low cell, bronchial, breast cancer and prostate).

Note: Elevated values occur during pregnancy, when using oral contraceptives and after infusions containing calcium.

## Basic Overview

**\* Thyroid gland - Function - Module: FT3, FT4, TSH**

**\* Thyroid gland - Autoimmune disease - Module: TPO, TAK, TRAK**

Basic Overview (E/S/G)

|  |                      |           |             |
|--|----------------------|-----------|-------------|
| Leukocytes                             | Sodium               | GOT       | Glucose     |
| Hemoglobin                             | Potassium            | GPT       | CRP         |
| Erythrocytes                           | Calcium              | GLDH      | ASL         |
| Hematocrit                             | Magnesium            | Bilirubin | Cholesterol |
| MCV                                    | Proteins             | LDH       |             |
| HDL-cholesterol                        |                      |           |             |
| MCH                                    | Urine                | Total-CK  |             |
| LDL-cholesterol                        |                      |           |             |
| MCHC                                   | Urea                 | CK / GOT  | LDL / HDL   |
| Differential circulation of creatinine | GOT / GPT            |           |             |
| Triglycerides                          |                      |           |             |
| Iron                                   | Remnant-N            | YGT / GOT |             |
| Copper                                 | Alkaline phosphatase | Amylase   |             |
| Fe / Cu coefficient                    | Gamma-GT             | Lipase    |             |

### -Function of the thyroid gland:

FT3, FT4, TSH, Parathyroid hormones

**- Autoimmune diseases of the thyroid gland:**

TPO-AK, TAK, TRAK

**Approximate frequency of positive antibody findings**

**TPO = Thyroid-Peroxidase-Auto-Ak TAK = Thyroidal antibodies TRAK = Anti-TSH receptor**

Disease

Finding-frequency

|   | TAK    | TRAK     | TPO      |
|---|--------|----------|----------|
| <b>Hashimoto-Thyroiditis</b><br>10%             |        | 60 - 90% | 30 - 40% |
| <b>Primary myxedema</b><br>0 - 5%               |        | 40 - 70% | 20 - 30% |
| <b>Graves-Basedow disease</b><br>80 - 100%      |        | 60 - 70% | 10 - 20% |
| <b>Postpartum thyroiditis</b><br>50 - 70%       |        | 50 - 70% | 30%      |
| <b>Cytokine-induced thyroiditis</b><br>30 - 40% |        |          | 10 - 20% |
| <b>Subacute thyroiditis</b><br>uncommon         |        | <5%      | 0 - 20%  |
| <b>Unifocal thyroid autonomy</b><br>0 - 5%      | 0 - 5% |          | 0 - 5%   |
| <b>Thyroid gland carcinoma*)</b>                |        |          | 28 - 65% |
| <b>Healthy</b><br>8%                            |        | 0 - 5%   | 5 - 15%  |
|   |        |          | 4 -      |

**\*)** Additionally examine with thyroid markers tireoglobulin and calcitonin!

## **Diagnosis: Hypothyroidism**

### **(reduced function of the thyroid gland)**

#### **\* Anamnesis**

Reduction of basal metabolism: weight gain

Possible symptoms: obesity, energy loss, fatigue, drowsiness, concentration problems, sensitivity to cold; in women: impaired fertility, miscarriage and premature labor, brain damage during fetal ripening.

#### **\* Laboratory analysis:**

TSH

FT4

FT3

Note: TSH is increased not only in hypothyroidism, but in secondary hyperthyroidism

TSH

FT4

FT3

Therefore, only elevated TSH does not indicate hypothyroidism!

Not only in hypothyroidism but also in secondary hyperthyroidism, TSH is increased, however, due to disorders in the hypothalamus or pituitary gland (possible causes: cancer, inflammation and overdose of iodine), which is why T3 and T4 are increased. Unlike primary hyperthyroidism, where the TSH-value is reduced, TSH levels are increased in secondary hyperthyroidism. therefore, especially for thin people, additional measurement of FT4 and FT3 values is

important!

The physician's fault is that in patients with normal weight or even in those with low weight, the decreased thyroid function is determined only by TSH and thyroxine is prescribed (L-thyroxin, Euthyrox, etc.)!

- Hypothyroidism: How does school medicine treat it?

Hormone thyroid gland-Substitution

L-Thyroxin, Euthyrox, Thyronajod, Eferox

Due to the reduction in the intensity of the self-regulation process chronically: palpitations, arrhythmia, anxiety, trembling, headaches, convulsions, insomnia, weight gain, diarrhea.

In substitution therapy, the thyroid gland values are brought to an artificially induced state: FT4 is higher, TSH is lower!

How long after the withdrawal of synthetic thyroid gland hormone are real values achieved?

- ▶ At least three weeks

What can happen?

- ▶ Weight gain

TSH - Value above 2

About 90% of the healthy population, which does not have thyroid gland disease, have a TSH of about 1 in Western Europe.

When there are symptoms of hypofunction (eg weight gain), the TSH value above 2 indicates a decreased thyroid gland function.

For example, in women during pregnancy, the value bigger than 2 is reason for treatment, in order to avoid abortion, premature birth and brain damage during fetal maturation.

When TSH is above 2, it can also indicate Hashimoto-Thyroiditis, but the TPO-AK value and the value of TAK has to be measured , for the purpose of increasing the safety of the therapy.

# THERAPY OF HYPOTHEROSIS

## Homeopathic remedy HYPO SOLVESTOR TT6 100 ©

Dosage (morning or evening before bedtime):

- Initial stage, primarily the latent, so-called, compensated hypothyroidism (FT3 and FT4 normal, but TSH increased): 1x daily 20 - 30 drops;
- Middle stage, primarily subclinical hypothyroidism (FT3 and FT4 reduced but without symptoms): 1x daily 30 - 40 drops;
- Advanced stage, primarily manifest hypothyroidism (FT3 and FT4 reduced by appropriate symptoms): 2x daily 25 - 40 drops;
- Acute: 2-3 weeks 3x daily 30 - 50 drops.

Ingredients: *Juglans regia*, *Ammonium carbonicum*, *Strychnos ignatia*, *Selenium metallicum*, *Primula veris*, *Ferrum metallicum*, *Fucus vesiculosus*, *Zingiber officinale*, *Ethanol*.

### Example: Christine M., 29 years

Increased hypercholesterolemia, hypertriglyceridemia, lipid metabolism and blood circulation disorder:

#### Reduced basal metabolism

If TSH is greater than 2, it indicates a decreased thyroid function (**here: 2.86**)

| Overview value | Measured value | Reference |
|----------------|----------------|-----------|
|----------------|----------------|-----------|

#### Metabolism of fat

|                       |           |  |
|-----------------------|-----------|--|
| Cholesterol<br><202.0 | 300.8 mg% |  |
|-----------------------|-----------|--|

|                           |           |  |
|---------------------------|-----------|--|
| HDL-cholesterol<br>>64.48 | 45.17 mg% |  |
|---------------------------|-----------|--|

Low risk : > 64.48

High risk : <42.86

LDL-cholesterol 221 mg%  
<189

Triglycerides 171.1 mg%  
<171.0

LDL / HDL coefficient 4.9  
<3

### **Diagnostic of the thyroid gland**

Free triiodothyronine (T3) 4.89 pmol/l 3.67 - 10.43

Free thyroxine (T4) 10.36 pmol/l 7.00 - 22.00

TSH 2.86 mU/l  
0.34 - 4.20

#### Overview:

- Expressed hypercholesterolaemia.
- Latent reduction of the cardioprotective factor.
- Hypertriglyceridemia.
- Dyslipidemia.
- Significant arterial circulation load.
- Hypothyroid metabolism.

If TSH is greater than 2, it indicates a decreased thyroid function.

Thus, e.g. in women during pregnancy, value of 2 is the reason for the treatment to prevent abortion, premature birth and brain damage during the development phase of the fetus.

If TSH value is 2 it can indicate Hashimoto-Thyreoiditis.

It is recommended that TPO antibodies be further determined (thyroide peroxidase-Auto-AK) to increase the safety of the therapy.

### **Adjuvant Kasfero therapy**



For lower cholesterol levels (lowering cholesterol levels) whey powder, sour milk with Lt +) lactic acid and oat-beta-gluten.

**LACTISOL** for lipid balance 450g of powder (Order in Kasfero pharmashop)

2x a day before a meal (morning and evening) 3 spoons (25g) of the powder mix with yoghurt, cereals or 200ml of cold water in a juicer. After a week, the dose can be reduced, 2x daily 2 spoons (17 g) of powder.

Elevated blood lipid levels:

\* **PLEVENT** (Kasfero pharmashop) 50 or 100ml, 3 times a day 20 drops in a little water before meals.

Alternatively: Supporting the digestion (degradation) of fat:

\* **BASIS-CHOL TABLETE** (SYNO - Order in Kasfero pharmashop) 120 pills in the morning and in the evening, 2 pills with liquor.

For activation of arterial blood flow:

\* **CLAUPAREST** 50 or 100 ml (Order in Kasfero pharmashop): 3 times a day 20 drops in a little water before meals.

Alternatively:

\* **PHÖNIX** 100 ml (Order in Kasfero pharmashop): 3 - 4 times a day 20 drops in a little water before meals.

## Therapy of hypothyroidism and obesity

### Homeopathic remedy **HYPO SOLVESTOR TT6 100 ©**

Dosage (morning or evening before bedtime):

- Initial stage, primarily latent so-called compensated hypothyroidism (FT3 and FT4 normal, but TSH increased): 1x daily 20-30 drops;
- Middle stage, primarily subclinical hypothyroidism (FT3 and FT4 reduced, but without symptoms): 1x daily 30 - 40 drops;
- Advanced stage, primarily manifest hypothyroidism (FT3 and FT4 reduced by appropriate

symptoms): 2x daily 25 - 40 drops;

- Acute: 2-3 weeks 3x daily 30-50 drops.

Ingredients: *Juglans regia*, *Ammonium carbonicum*, *Strychnos ignatia*, *Selenium metallicum*, *Primula veris*, *Ferrum metallicum*, *Fucus vesiculosus*, *Zingiber officinale*.

The blood test contains evidence of an irregular diet (eg load of fat metabolism, circulation problem, load of "memory" protein.) Replacement of animal free proteins with dietary supplements in nutrition (vegetarian healthy balanced diet) is an integral part of therapy.

A low calorie diet is recommended with the release of harmful carbohydrates (sugar and white flour products).

## **DIAGNOSIS: Hashimoto's thyroiditis**

### **(Lymphocytic thyroid gland)**

An autoimmune disorder named after a Japanese doctor, Haku Hashimoto.

Due to the wrongly directed immune process, the thyroid gland tissue is destroyed by T-lymphocytes and chronic inflammation of the thyroid gland occurs.

- There are antibodies against specific thyroid antigens
- Initially increased thyroid function (hyperthyroidism)
- Followed by a gradual decrease in the function of the thyroid gland (hypothyroidism)
- Sonography (ultrasound) usually reveals a small, hypoechogenic thyroid gland.

Hashimoto's thyroidism - Anamnesis

- Symptoms: hyperthyroidism, followed by hypothyroidism
- Related symptoms and illnesses: for example. psychological or symptoms of menopause
- Existing therapy: replacement of the thyroid hormone

Initiating and aggravating circumstances:

- hormone therapy with steroidal hormones such as holecals = "Vitamin D3" and Progesterone

- Scintigraphy

\*\* Diagnosis: Hashimoto's thyroidism

\*\* Anamnesis: Symptoms of hypofunction such as obesity, fatigue, apathy, dry skin, brittle hair, hair loss.

\*\* Clinical trials: Sonography (small, hypoechogenic thyroid gland)

\* Laboratory tests

TSH

FT4

FT3

TPO

TAK

## **TREATMENT OF HYPOTHYREOSIS AND HASHIMOTO'S THYREOIDITIS**

### **Homeopathic remedy HYPO SOLVESTOR TT6 200 ©**

Dosage:

- Initial stage: 2 x daily 15 - 20 drops

- Middle stage: 2 x daily 25 - 30 drops

- Advanced stage: 3 x daily 30 drops

- Acute phase: 1 - 2 weeks 3 x daily 40 - 50 drops

Ingredients: Juglans regia, Ammonium carbonicum, Strychnos ignatia, Selenium metallicum, Origanum vulgare, Primula veris, Ferrum metallicum, Fucus vesiculosus, Zingiber officinale, Strontium carbonicum, Argentum metallicum, Ethanol.

\*\*\* Auxiliary therapy - Hashimoto's thyroiditis

## Selenium - Substitution

Basic - Selenium 100 capsules or Enterobact tablets (SYNOMED - Order in Kasfero pharmashop)

EXAMPLE: Monica K., 55 years old

Hypercholesterolemia, hypertriglyceridaemia, dyslipidemia and vascular disorders:

- Reduced basal metabolism
- Known diagnosis: Hypothyroidism Hashimoto thyroiditis, the patient takes L-Thyroxin

Elevated values may be suspected of hyperthyroidism. However, synthetic hormones have a cosmetic effect and therefore they do not correspond to the actual condition: FT3 and FT4 values are too high, and TSH is too low.

| <b>Overview</b>                            | <b>Measured value</b> |
|--|-----------------------|
| <b>Reference value</b>                     |                       |
| Metabolism of fat                          |                       |
| Cholesterol<br><202.0                      | 264.5 mg%             |
| HDL-cholesterol<br>> 64.48                 | 56.37 mg%             |
| Low risk: > 64.48                          |                       |
| High risk: < 42.86                         |                       |
| LDL-cholesterol<br><189                    | 169 mg%               |
| Triglycerides<br><171.0                    | 193.9 mg%             |
| LDL / HDL coefficient<br><3                | 3.0                   |
| Diagnosis of the thyroid gland             |                       |
| Free triiodothyronine (T3)<br>3.67 - 10.43 | 6.85 pmol/l           |
| Free thyroxine (T4)                        | 13.54 pmol/l          |

7.00 - 22.00

TSH

0.15 mU/l

0.34 - 4.20

Overview:

- Hypercholesterolemia
- Hypertriglyceridemia
- Dyslipidemia
- Arterial circulation load

\*\*\* Hyperthyroid state (the result of substitution therapy!) is probably the initial state of hypothyroidism.

\*\*\* The thyroid gland values (TSH in particular) are due to the cosmetic effect of substitution therapy (eg with L-Tyroxin, Eferox, Eutyrox, Thyronajod).

Note: To control the occurrence of Hashimoto's thyroiditis, determine TPO-AK (thyroid peroxidase-Auto-AK))!

To control the occurrence of Basedow's disease, determine TRAK (TSH-receptor-AK) and TAK (thyroidal AK)!

Adjuvant Kasfero therapy:

For lower cholesterol levels (lowering cholesterol levels) whey powder, sour milk with Lt +) lactic acid and oat-beta-gluten:

-LACTISOL for Lipid Balance (Order in Kasfero pharmashop) 450g of powder:

\*\* 2 x daily before meal (morning and evening) 3 spoons (25 g) of powder mix with yogurt, cereals or 200 ml of cold water in shaker. After a week, the dose can be reduced to 2 times a day for 2 spoons (17 g) of powder.

\*\* High blood lipid levels: PLEVENT 50 or 100 ml (Order in Kasfero pharmashop): 3 times a day 20 drops in a little water before meal.

\*\* For arterial circulation: CLAUPAREST 50 or 100 ml (Order in Kasfero pharmashop): 3 x daily 20 drops in a little water before meal.

Blood tests show that there is an imbalance in the diet: (for example, too much fat, problems in

circulation, load of the "memory" protein.)

Replacement of animal free proteins with dietary supplements in nutrition (vegetarian healthy balanced diet) is an integral part of therapy.

Note: Only meat products, but also fish, poultry meat and especially milk may poorly affect lipid and protein metabolism. While hypothyroidism may occur despite balanced diet, it affects basal metabolism and increases blood flow. A low calorie diet is recommended with ejection of harmful carbohydrates (sugar and white flour products).

Therapy of autoimmune thyroid gland disease:

With reduced thyroid function:

#### [HYPO SOLVESTOR TT6 100 ©](#)

Dosage (in the morning on an empty stomach and / or in the evening before bedtime):

- Initial stage, especially for latent or so-called compensated hypothyroidism (FT3 and FT4 normal, but TSH elevated): 1 x daily 20 - 30 drops
- Middle stage, primarily subclinical hypothyroidism (FT3 and FT4 reduced, but without symptoms): 1 x daily 30 - 40 drops
- Advanced stage, primarily manifest hypothyroidism (FT3 and FT4 reduced, appropriate symptoms): 2 x daily 25 - 40 drops
- Acute phase: 2 - 3 weeks 3 x daily 30 - 50 drops

Since November 2015, there is an alternative in the treatment of hypothyroidism and Hashimoto's thyroidism:

#### [HYPO SOLVESTOR TT6 200 ©](#)

Dosage:

- Initial stage: 2 x daily 15 - 20 drops
- Middle stage: 2 x daily 25 - 30 drops
- Advanced stage: 3 x daily 30 drops
- Acute phase: 1 - 2 weeks 3 x daily 40 - 50 drops

Due to the lack of selenium, in order to improve the state of gastrointestinal resorption and in autoimmune diseases, in the diet should be introduced:

\* Enterobact tablets (Order in Kasfero pharmashop):

2 x daily 1 tablet with a little liquor

Alternative:

\* Basis-Selen 100 capsules (Order in Kasfero pharmashop) 120 Kps.

2 x 1 capsule with a little liquor

**EXAMPLE: Marina R., 51 years old**

\* Loss of iron

\* Intolerance to histamine expressed

(patients who are histamine intolerant, may also be fructose and lactose intolerant!)

\* Light hypercholesterolaemia

\* Latent reduction of cardio-protective factor (HDL-cholesterol)

\* Poor blood circulation

\* Reduced thyroid function in Hashimoto's thyroiditis

| <b>Overview</b>             | <b>Measured value</b> |
|-----------------------------|-----------------------|
| <b>Reference value</b>      |                       |
| <i>Hematology</i>           |                       |
| Leukocytes<br>4000 - 9000   | 6300 / $\mu$ l        |
| Hemoglobin<br>12.0 - 16.0   | 12.9 g / dl           |
| Erythrocytes<br>4.10 - 5.10 | 4.61 mill / $\mu$ l   |
| Hematocrit<br>36.0 - 45.0   | 40.3 Vol. %           |
| MCV<br>80 - 96              | 87 $\mu$ cbm          |

MCH 28.0 pg  
26.0 - 32.0

MCHC 320 g / l  
310 - 350

*Differential blood count*

Neutrophils 67.4%  
50 - 72

Eosinophils 3.1%  
0 - 5

Basophiles 1.1%  
0 - 2

Monocytes 7.7%  
0 - 15

Lymphocytes 20.7%  
25 - 40

*Diagnosis of anemia*

Iron 140.4 µg%  
28.7 - 174.5

Ferritin 7.6 g /  
11.0 - 307.0

*Immune status*

IgE 28.2 IU / ml  
< 100.0

Diamine oxidase (DAO) 5.6 U / ml  
> 25.00

<10 U / ml expressed intolerance to histamine

10-15 U / ml low intolerance to histamine

15-20 U / ml latent intolerance to histamine



### *Metabolism of fat*

Cholesterol 221.2 mg%  
< 202.0

HDL-cholesterol 45.95 mg%  
> 64.48

low risk:> 64.48

high risk: <42.86

LDL-cholesterol 150 mg%  
< 189

Triglycerides 128.1 mg%  
< 171.0

LDL / HDL coefficient 3.3  
< 3

### *Diagnosis of the thyroid gland*

Free triiodothyronine (T3) 4.36 pmol / l  
3.67 - 10.43

Free thyroxine (T4) 9.08 pmol / l  
7.00 - 22.00

TSH 3.91 mU / l  
0.34 - 5.60

Thyroid peroxidase TPO 119.8 IU / ml  
< 9

### Overview:

- Mild lymphocytopenia.
- Reduced iron reserves.
- Latent hypercholesterolaemia.
- Latent reduction of the cardio-protective factor.
- Poor circulation.

\*\*\* Suspicion of intolerance to histamine (assumed intolerance to lactose). When the DAO value is below 10 U / ml, histamine intolerance is possible.

When the value is between 10 and 25, mild intolerance to histamine is possible.

The DAO enzyme clears histamine before it is absorbed. The lack or overload of DAO results in a high content of histamine in foods and beverages (eg cheese, ham, salami, red wine) leading to histamine resorption, and symptoms of allergy may also occur.

The cause of the lack of DAO enzyme is the possible immunological insufficiency of the gastrointestinal mucosa.

In order to increase the accuracy of the therapeutic analysis it is recommended to give a sample of the stool (red stool: diagnosis of fungi/dysbiosis and type of fungus, brown stool: alpha 1-antitrypsin and IgA secretion).

Autoimmune thyroidopathy with reduced thyroid function.

Other organ loads are not known.

Adjuvant Kasfero therapy:

To improve blood count:

-PHÖNIX 100 ml (Order in Kasfero pharmashop): 3 x daily 20 drops in a small amount of water before meal.

Alternatively: To activate the resorption of iron:

-FEDON 50 pack. 100 ml (Order in Kasfero pharmashop): 3 x daily 20 drops in a small amount of water before meal.

\*\* In case of histamine and lactose intolerance: diet (reduce the amount of food containing histamine and lactose) and take Allergolact (Syxyl) 90 Tbl. (Order in Kasfero pharmashop) 3 x daily 1 whole tablet with a little water 10 minutes before meal (if necessary more than once a day 1-2 tablets).

TREATMENT OF HYPOTHYREOSIS AND HASHIMOTO'S THYROIDITIS:

[HYPO SOLVESTOR TT6 200 ©](#)

- Initial stage: 2 x daily 15 - 20 drops

- Middle stage: 2 x daily 25 - 30 drops

- Advanced stage: 3 x daily 30 drops
- Acute phase: 1 - 2 weeks 3 x daily 40 - 50 drops

Composition: *Juglans regia*, *Ammonium carbonicum*, *Strychnos ignatia*, *Selenium metallicum*, *Origanum vulgare*, *Primula veris*, *Ferrum metallicum*, *Fucus vesiculosus*, *Zingiber officinale*, *Strontium carbonicum*, *Argentum metallicum*.

In the absence of selenium as a dietary supplement and for improving the state of gastrointestinal resorption (in accordance with autoimmune thyroid disease).

Enterobact tablets (Order in Kasfero pharmashop) 120 Tbl.: 2 x daily 1 tablet in a little water (price for a two month therapy: € 29.50).

Probiotic effectiveness: high dose, gastro-resistant and lactose-free! It contains zinc and selenium as well as four types of lactobacilli, two types of bifidobacteria as well as two strains of enterococci (bioburden in 2 tablets:  $1.8 \times 10^{10}$ ) to stimulate the improvement of the physiological intestinal flora probiotic from the group of fructooligosaccharides.

Alternative:

Primary-Selen 100 capsules (SYNO-Order in Kasfero pharmashop) 60 Cps. or else. 120 Cps. :

2 x daily 1 capsule with a little liquid.

Blood tests show that there is an imbalance in the diet: (for example, too much fat, problems in circulation, load of "memory" protein).

Replacement of animal free proteins with dietary supplements in nutrition (vegetarian healthy balanced diet) is an integral part of therapy.

**EXAMPLE:** Heidemarie T., 76 years old

- Mild polycythaemia
- Lymphopenia
- Mildly toxic load of the liver
- Hypercholesterolemia and hypertriglyceridemia, however, there is no evidence of cardiovascular disorders (not a noticeable LDL / HDL coefficient)
- Significant hypothyroidism in mild Hashimoto's thyroiditis.

Heidemarie T., 76 years old

Laboratory analysis

**Overview**

**Measured values**

**Reference values**

*Hematological status*

|                             |                     |
|-----------------------------|---------------------|
| Leukocytes<br>4000 - 9000   | 6900 / $\mu$ l      |
| Hemoglobin<br>12.0 - 16.0   | 15.8 g / dl         |
| Erythrocytes<br>4.10 - 5.10 | 4.80 mill / $\mu$ l |
| Hematocrit<br>36.0 - 45.0   | 47.7 Vol. %         |
| MCV<br>80 - 96              | 99 $\mu$ cbm        |
| MCH<br>26.0 - 32.0          | 33.0 pg             |
| MCHC<br>310 - 350           | 332 g / l           |

*Differential blood count*

|                                    |       |
|------------------------------------|-------|
| Neutrophil granulocytes<br>50 - 72 | 73.9% |
| Eosinophils<br>0 - 5               | 1.9%  |
| Basophiles<br>0 - 2                | 0.4%  |
| Monocytes<br>0 - 15                | 7.5%  |
| Lymphocytes<br>25 - 40             | 16.3% |

*Diagnosis of anemia*

Iron 77.2 µg%  
28.7 - 174.5

*Minerals*

Sodium 324.6 mg%  
312.6 - 331.0

Potassium 17.2 mg%  
14.00 - 20.00

Calcium 10.00 mg%  
8.90 - 10.30

Magnesium 2.31 mg%  
1.80 - 2.50

Copper 135.77 µg%  
76.24 - 152.48

Fe / Cu coefficient 0.621  
< 1.500

*Metabolism of proteins*

Total protein 6.88 g%  
6.50 - 8.10

Uric acid 4.7 mg%  
< 8.1

Urea 23.8 mg%  
< 56.5

Creatinine 0.8 mg%  
0.44 - 1.0

Residual nitrogen 10.61 mg%  
< 23.18

*Heart / liver / gallbladder / pancreas*

Alkaline phosphatase 71.0 U / l

32.0 - 91.0

Gamma GT 54.5 U / l  
< 38.0

a-amylase 38.3 U / l  
< 100.0

Total bilirubin 0.55 mg%  
< 2.1

CK total 198.5 U / l  
< 145.0

GLDH 3.34 U / l  
< 4.8

Glucose 122.5 mg%  
79.0 - 115.0

GOT 25.5 U / l  
< 31.0

YGT / GOT 2.137

CPK / GOT 7.78

GPT 22.2 U / l  
< 34.0

GOT / GPT 1.15

LDH 226.7 U / l  
< 248.0

Lipase 47.4 U / l  
< 51.0

*Immune status*

IgE 7.0 IU / ml  
< 100.0

*Rheumatic diagnosis / skeletal muscle metabolism*

ASL-Test 20.6 IU / ml  
< 145.0

C reactive protein CRP < 1.0 mg / l  
< 7.5

*Metabolism of fat*

Cholesterol 267.6 mg%  
< 202.0

HDL-cholesterol 90.35 mg%  
> 64.48

Risk low: > 64.48

High risk: < 42.86

LDL-Cholesterol 125 mg%  
< 189

Triglycerides 260.5 mg%  
< 171.0

LDL / HDL coefficient 1.4  
< 3

*Diagnosis of the thyroid gland*

Free triiodothyronine (T3) 3.03 pmol / l  
3.67 - 10.43

Free thyroxine (T4) 1.59 pmol / l  
7.00 - 22.00

TSH 35.45 mU / l  
0.34 - 4.20

Thyroid peroxidase TPO 21.8 IU / ml  
< 9

The test has been modified.

Pay attention to new reference values.

In the previous control, the reference values were obtained based on the previous methods.

*Tumor marker*

CA 15 -3 8.2 U / ml  
< 32.4

CEA 6.31 µg / l  
< 5.00

Overview:

- Mild polyglobulia.
- Reduced blood flow rate.
- Lymphocytopenia.
- Granulocytosis
- Mild toxic load of the liver.
- Suspicion of the muscle metabolic load (blood clot after sports activities and high physical effort)

Attention:

- Increased cholesterol in serum, elevated creatine kinase and decreased lipid levels are the result of the use of drugs such as Sortis and Simvastatin.
- Mild hyperglycaemia (after a meal, without a pathological significance).
- Hypercholesterolemia
- Hypertriglyceridemia
- Lipid metabolism disorder, but no evidence of cardiovascular loading.

Expressed hypothyroidism in mild autoimmune thyroiditis.

- Latent CEA growth (carcinemembrical antigen): Suspicion of the proliferative process. Elevated CEA and inflammatory processes in smokers. Smokers have a CEA value of up to 20. For these clinical symptoms, control tests with differential diagnostic devices are recommended.

Other organ diseases, acute anemia, and allergic diseases are not recognized.



## Adjuvant Kasfero therapy:

Aurum metallicum D30 balls (Order in Kasfero pharmashop) 10.0: 1 x daily (in the morning on an empty stomach) melt 10 balls in the mouth.

- For the activation of liver function, gallbladder and hepatic parenchyma:

HEPATICUM TONICUM (Order in Kasfero pharmashop) 50 ml OR 100 ml:

3 x daily 20 drops with a little water before meal

Composition: Silybum marianum, Cynara scolymus, Quassia amara, Cichorium intybus, Yucca filamentosa, Mucuna pruriens, Veronicastrum virginicum, Okoubaka aubrevillei, Picrorhiza, Phosphorus, Lophophytum leandri, Stannum metallicum, Chelidonium majus, Lycopodium clavatum, Cinchona pubescens, Cyanocobalaminum, Vinum liquorosum.

## TREATMENT OF HYPOTHEROSIS AND HASHIMOTO'S THYROIDITIS

### HYPO SOLVESTOR TT6 200 ©

Dosage:

- Initial stage: 2 x daily 15 - 20 drops

- Middle stage: 2 x daily 25 - 30 drops

- Advanced stage: 3 x daily 30 drops

- Acute stage: 1 - 2 weeks 3 x daily 40 - 50 drops

Composition: Juglans regia, Ammonium carbonicum, Strychnos ignatia, Selenium metallicum, Origanum vulgare, Primula veris, Ferrum metallicum, Fucus vesiculosus, Zingiber officinale, Strontium carbonicum, Argentum metallicum.

In the absence of selenium in addition to nutrition and improvement of gastro-intestinal resorption (caused by autoimmune thyroid disease):

Enterobact tablets (SYNO- Order in Kasfero pharmashop): 2 x daily 1 tablet with little water

Probiotics effectiveness: high dose, entero-resistant and lactose-free! It contains zinc and selenium as well as four types of lactobacilli, two types of bifidobacteria as well as two strains of enterococci (a biological meal with 2 tablets:  $1.8 \times 10^{10}$ ) to stimulate the improvement of the physiological intestinal flora probiotic from the group of fructooligosaccharides.

Alternative:

Basis - Selenium 100 capsules (SYNO - Order in Kasfero pharmashop) 60 Cps. Or 120 Cps. : 2 x daily 1 capsule with little water.

Blood analysis contains evidence that indicates defective nutrition (e.g., changes in fat metabolism, problems with blood circulation, load of "memory" protein).

Replacement of animal free proteins with dietary supplements in nutrition (vegetarian healthy balanced diet) is an integral part of therapy.

A low calorie diet is recommended with the release of harmful carbohydrates (sugar and white flour products).

Explanation:

Preparations for the thyroid gland [HYPO SOLVESTOR TT6 100 ©](#), [HYPO SOLVESTOR TT6 200 ©](#), [HYPER K-STRUMIN D25 ©](#), [HYPER K-STRUMIN M 7.3 ©](#), [HYPER K-STRUMIN P 2.09 ©](#), [HYPER K-STRUMIN MB 5.08 ©](#) i [HYPER K-STRUMIN EO 09 ©](#) are homeopathic remedies produced in the pharmaceutical house ABO & PAINEX GmbH & Co. KG, 07426 Königsee-Rottenbach, according to the recipes of the innovative pharmaceutical company Kasfero Naturmedizin®. Recipes are protected by international copyright (§ 2 UrhG BRD) and finished products are produced in Germany under the Medicines Act (AMG § 38 paragraph 1, sentence 3, HAB Regulation).

The issue of these medicines is exclusively on prescription and delivery only from authorized pharmacies and suppliers: Kasfero Neoremedica KED Group Serbia, Park Apotheke Königsee Rottenbach Germany, IRIS Lekaren Bratislava Slovakia, AURINKO VITAL Xanten Germany.

Delivery within 3 days. Contact information, contact details or information material request by e-mail at [kasfero@kasfero.com](mailto:kasfero@kasfero.com) or by phone at +421940543104 and +381604100557. On the same contacts, experts may also request information on authorization and subsequent education and seminars of qualified persons.

## **Diagnosis: Hyperthyroidism**

## **(increased function of the thyroid gland)**

\* Anamnesis:

Increased basal metabolism: weight loss

\* Possible symptoms: weight loss, nervousness, difficulty in swallowing, difficulty in breathing, fatigue.

\* Clinical examination:

Sonography (Struma, "warm" node)

\* Laboratory tests

TSH

FT4

FT3

Note: TSH is reduced not only in hyperthyroidism but also in secondary hypothyroidism!

TSH

FT4

FT3

Only low TSH is not a sign of hyperthyroidism!

Not only in hyperthyroidism, but also in secondary hypothyroidism, TSH has been decreased, but because of pituitary or because of the failure of the thyroid gland, T3 and T4 are also reduced.

Unlike primary hypothyroidism, where the TSH value was elevated, in secondary hypothyroidism the TSH value is lowered.

It is especially important for people with normal weight to pay attention to weight gain and pay attention to FT4 and FT3!

The doctor's mistake is that in people with normal weight and overweight, they only determine based on the low TSH increased thyroid function and prescribe therapy (Carbimazole, Tiamazole)!

hyperthyroidism:

\* How does school medicine treat it?

Suppressive therapy with thyrostatic carbimazole and thiamazole

Undesirable effects:

- Chronic inhibition of self-regulation process.
- Changes in blood count (agranulocytosis, leukopenia) allergic reaction, struma, fever, edema, gastrointestinal disorders, taste and odor disorders

Overdose with Carbamazole and Thiamazole: Symptoms of Hypothyroidism.

Hyperthyroidism at:

- Diffuse struma: The thyroid gland is enlarged evenly
- Uninodosis / Mononodosis struma: one node
- Struma polynodosa: multiple knots

The difference can only be established by clinical examination:

Sonography, and under certain circumstances, scintigraphy.

**THERAPY: Hyperthyroidism and struma (single node) / mononodosis**

### **HYPER K-STRUMIN M 7.3**

Dosage:

- Initial stage: 1 x daily 10 - 15 drops
- Medium stage: 1 x daily 20 - 30 drops
- Advanced stage: 2 x daily 20 - 25 drops
- Acute: 1 - 2 weeks 2 x daily 40 - 60 drops

Composition: Zingiber officinale, Crataegus, Juniperus communis, Juglans regia, Chelidonium, Hypericum perforatum, Thuja occidentalis, Ethanol.

**THERAPY: Hyperthyroidism and struma (multiple nodes) / polynodosis**

### **HYPER K-STRUMIN P 2.09 ©**

Dosage:

- Initial stage: 1 x daily 20 drops
- Medium Stage: 1 x daily 25 drops
- Advanced stage: 1 x daily 30 drops
- Acute: 1 - 2 weeks 2 x daily 40 - 60 drops

Composition: Chelidonium majus, Juniperus communis, Juglans regia, Crataegus, Hypericum perforatum, Thuja occidentalis, Origanum vulgare, Ethanol.

Example: Janine D., 42 years

- Vegetative and sensitive loads
- Weakness in the circulation of the pituitary gland (low alkaline phosphatase)
- Liver load with streptococcus (increased antistreptolysin)
- Hyperthyroidism

Janine D., 42 years

| <b>Overview</b>               | <b>Measured value</b> |
|-------------------------------|-----------------------|
| <b>Reference value</b>        |                       |
| <i>Hematological analysis</i> |                       |
| Leukocytes<br>4000 - 9000     | 9100 / $\mu$ l        |
| Hemoglobin<br>12.0 - 16.0     | 12.9 g / dl           |
| Erythrocytes<br>4.10 - 5.10   | 4.33 mill / $\mu$ l   |
| Hematocrit<br>36.0 - 45.0     | 40.4 Vol. %           |
| MCV<br>80 - 96                | 93 $\mu$ cbm          |
| MCH<br>26.0 - 32.0            | 29.8 pg               |

MCHC 320 g / l  
310 - 350

*Differential blood count*

Neutrophils 52.2%  
50 - 72

Eosinophils 2.3%  
0 - 5

Bazophiles 2.0%  
0 - 2

Monocytes 7.4%  
0 - 15

Lymphocytes 36.1%  
25 - 40

*Anemia - Diagnostics*

Iron 65.3 µg%  
28.7 - 174.5

*Minerals*

Sodium 324.8 mg%  
312.6 - 331.0

Potassium 17.2 mg%  
14.00 - 20.00

Calcium 9.68 mg%  
8.90 - 10.30

Magnesium 2.09 mg%  
1.80 - 2.50

Copper 89.39 µg%  
76.24 - 152.48

Fe / Cu coefficient 0.797  
< 1,500

*Metabolism of proteins*

|                              |          |
|------------------------------|----------|
| Total protein<br>6.50 - 8.10 | 7.51 g%  |
| Uric acid<br>< 8.1           | 3.4 mg%  |
| Urea<br>< 56.5               | 19.8 mg% |
| Creatinine<br>0.44 - 1.0     | 0.6 mg%  |
| Residual nitrogen<br>< 23.18 | 8.81 mg% |

*Heart / Liver / Gallbladder / Pancreas*

|                                     |            |
|-------------------------------------|------------|
| Alkaline phosphatase<br>32.0 - 91.0 | 29.4 U / l |
| Gamma-GT<br>< 38.0                  | 28.7 U / l |
| A-amylase<br>< 100.0                | 43.0 U / l |
| Total bilirubin<br>< 2.1            | 0.28 mg%   |
| CK total<br>< 145.0                 | 64.0 U / l |
| GLDH<br>< 4.8                       | 1.91 U / l |
| Glucose<br>79.0 - 115.0             | 97.3 mg%   |
| GOT<br>< 31.0                       | 16.0 U / l |
| YGT / GOT                           | 1.790      |

|                  |             |
|------------------|-------------|
| CPK / GOT        | 3.99        |
| GPT<br>< 34.0    | 10.5 U / l  |
| GOT / GPT        | 1.53        |
| LDH<br>< 248.0   | 133.2 U / l |
| Lipase<br>< 51.0 | 36.7 U / l  |

*Rheumatic diagnosis / skeletal muscle metabolism*

|                             |               |
|-----------------------------|---------------|
| ASL-Test<br>< 145.0         | 233.9 IU / ml |
| C reactive Protein<br>< 7.5 | < 1.0 mg / l  |

*Metabolism of fat*

|                              |           |
|------------------------------|-----------|
| Cholesterol<br>< 202.0       | 214.7 mg% |
| HDL-Cholesterol<br>> 64.48   | 70.27 mg% |
| Low risk: > 64.48            |           |
| High risk: < 42.86           |           |
| LDL-Cholesterol<br>< 189     | 122 mg%   |
| Triglycerides<br>< 171.0     | 109.6 mg% |
| LDL / HDL coefficient<br>< 3 | 1.7       |

*Diagnosis of the thyroid gland*

|                          |               |
|--------------------------|---------------|
| Triiodothyronine free T3 | 8.09 pmol / l |
|--------------------------|---------------|



3.67 - 10.43

Thyroxine free T4  
7.00 - 22.00

22.30 pmol / l

TSH  
0.34 - 4.20

0.11 mU / l

Thyroid Peroxidase TPO  
< 9

2.0 IU / ml

Overview:

\* Latent leukocytosis.

\* Latent lymphocytosis.

\* There is a suspicion of light vegetative and sensitive loads (sympathetic tone).

\* Suspected of poor circulation of the pituitary gland.

\* Warning on urinary tract loading (after streptococcal infection and hereditary disease: chronic inflammation: bladder, sinus, tonsils, teeth).

\* Latent hypercholesterolaemia, but there is no evidence of lipid metabolism and arterial blood flow (circulation)

\* There is a suspicion of increased thyroid function.

If the thyroid gland (TSH in particular) is affected cosmetically or by substitution therapy (eg L-tyroxin, Euthyrox), it is possible to alter it using the following therapy proposals.

There is no evidence of autoimmune thyroid disease.

Adjuvant Kasfero therapy:

Psychovegetative disregulation (neurovegetative disorders and depression):

NERVO VITAL (Order in Kasfero pharmashop) 50ml or if you need 100 ml 3 times a day, drink 20 drops with a little liquor before meals.

Alternative:

Psychovegetative disregulation (neurovegetative disorders and depression): "Kasfero Wulgreen Concept":

NERVOELIXIR (Order in Kasfero pharmashop) 20 drops in the morning before breakfast and before lunch,

Kasfero Argentum met. (Order in Kasfero pharmashop) 20 drops in the afternoon, before dinner and before bedtime.

\*\*\* Diet regime in psychosomatic disorders if it is a syndrome of "burning" and depression:  
Neuro L-Triptophan tablets (SYNO - Order in Kasfero pharmashop) 60 Tbl. or 120 Tbl: 2 x daily 1 tablet with a little liquor (morning and evening before bed)

\*\*\* Pituitary Stimulus with gonadotrophic effect:

HYPOPHYS-GON © 50 ml or 100 ml (Order in Kasfero pharmashop):

3 x daily 20 drops in water before meal

Composition: Chelidonium majus, Silybum marianum, Agnus castus, Kreosotum, Pulsatilla, Cimicifuga, Vinum liquorosum.

\*\*\* Chronic urinary tract inflammation:

HABIFAC 100 ml (Order in Kasfero pharmashop): 3 x daily 20 drops in water before meal, in addition:

Sanukehl Strep D6 drops 10 ml (Order in Kasfero pharmashop)

Every other day strongly rub 5 drops into the area of the abdomen

Alternative:

Urinary tract inflammation, detoxification of the lymphatic system;

PURA LYMPHA 50 ml or 100 ml (Order in Kasfero pharmashop): 3 x daily 20 drops in water before meal.

Composition: Berberis, Quassia amara, Conium, Thuja, Silybum marianum, Scrophularia nodosa, Teucrium scorodonia, Juglans regia spag. Zimpel, Fumaria, Calcium phosphoricum, Gentiana lutea, Sarsaparilla, Ferrum jodatum, Boldo, Argentum nitricum, Gauitheria, L (+) Milchsäure, DL Milchsäure, Crataegus, Vinum liquorosum.

### **In hyperthyroidism and diffuse struma:**

#### **HYPER K-STRUMIN D25 ©**

- Struma degree I: 1 x daily 30 - 50 drops

- Struma degree II: 2 x daily 20 - 30 drops
- Struma degree III: 3 x daily 25 drops
- Acute phase: 1 - 2 weeks 3 x daily 30 - 50 drops

Composition: Thuja occidentalis, Cucurbita pepo, Juniperus communis, Trigonella foenum-graecum, Capsicum annum, Hypericum perforatum, Cinnamomum verum, Ethanol.

### **In hyperthyroidism and uninodular struma:**

#### **HYPER K-STRUMIN M 7.3**

- Initial stage: 1 x daily 10 -15 drops
- Middle stage: 1 x daily 20 - 30 drops
- Advanced stage: 2 x daily 20 - 25 drops
- Acute phase: 1 - 2 weeks 2 x daily 40 - 60 drops

Composition: Zingiber officinale, Crataegus, Juniperus communis, Juglans regia, Chelidonium, Hypericum perforatum, Thuja occidentalis, Ethanol.

### **In hyperthyroidism and polynodular struma:**

#### **HYPER K-STRUMIN P 2.09 ©**

- Initial stage: 1 x daily 20 drops
- Medium Stage: 1 x daily 25 drops
- Advanced stage: 1 x daily 30 strokes
- Acute phase: 1 - 2 weeks 2 x daily 40 - 60 drops

Composition: Chelidonium majus, Juniperus communis, Juglans regia, Crataegus, Hypericum perforatum, Thuja occidentalis, Origanum vulgare, Ethanol.

## **DIAGNOSIS: Graves Basedow's disease & endocrine orbitopathy**

Anamnesis:

Symptoms of increased activity: weight reduction, nervousness, anxiety, irritability, sleep disorders, fatigue, tachycardia and cardiac arrhythmias.

- Endocrine orbitopathies (endocrine ophthalmopathy) - exophthalmus, sensitivity to light.

Clinical examination

-Sonografia (struma "hot" knots)

Laboratory tests

TSH

FT4

FT3

TPO

TRAK

THERAPY: Basedow's disease

[HYPER K-STRUMIN MB 5.08 ©](#)

Dosage:

- Initial stage: 1 x daily 25 drops
- Medium stage: 1 x daily 30 - 40 drops
- Advanced stage: 2 x daily 25 - 30 drops
- Acute: 1 week 2 x daily 30 - 50 drops

Ingredients: Juniperus communis, Juglans regia, Crataegus, Trigonella foenum-graecum, Cuprum metallicum, Capsicum annuum, Hypericum perforatum, Ethanol.

THERAPY: Endocrine orbitopathy

[HYPER K-STRUMIN EO 0.9 ©](#)

Dosage:

- Initial stage: 1 x daily 20 drops;
- Medium stage: 1 x daily 30 drops;

- Advanced stage: 2 x daily 20 - 40 drops;
- Acute stage: 1 week 2x daily 50 - 60 drops;

Composition: Trigonella foenum-graecum, Juniperus communis, Juglans regia, Thuja, Zingiber offic., Curcubita pepo, Capsicum annum, Cinnamomum verum, Ethanol.

Example: Cornelia H., 59

- \* Heavily increased TRAK
- \* In a mild increase of anti-TTP
- \* Known anamnesis:
  - Hyperthyroidism
  - Basedow's disease and endocrine orbital disease

Cornelia H., 59 years old

| <b>Overview</b>                       | <b>Measured value</b> |
|---------------------------------------|-----------------------|
| <b>Reference value</b>                |                       |
| <i>Diagnosis of the thyroid gland</i> |                       |
| TSH-Receptor AK<br>< 1.75             | 1191.0 U / l          |
| The finding is under control          |                       |
| Thyroid-Peroxidase-Auto-AK<br>< 9     | 42.3 IU / ml          |
| Thyroid AI<br>< 60                    | 1.9 IU / ml           |

Adjuvant Kasfero therapy:

**Graves Basedow's disease:**

**HYPER K-STRUMIN MB 5.08 ©**

- Initial stage: 1 x daily 25 drops;
- Medium stage: 1 x daily 30 - 40 drops;

- Advanced stage: 2 x daily 25 - 30 drops;
- Acute stage: 1 week 2 x daily 30 - 50 drops.

Ingredients: Juniperus communis, Juglans regia, Crataegus, Trigonella foenum-graecum, Cuprum metallicum, Capsicum annum, Hypericum perforatum, Ethanol.

### **In endocrine orbitopathy:**

#### **HYPER K-STRUMIN EO 09 ©**

- Initial stage: 1 x daily 20 drops;
- Medium stage: 1 x daily 30 drops;
- Advanced stage: 2 x daily 20 - 40 drops;
- Acute stage: 1 week 2 x daily 50 - 60 drops.

Composition: Trigonella foenum-graecum, Juniperus communis, Juglans regia, Thuja, Zingiber officinale, Cucurbita pepo, Capsicum annum, Cinnamomum verum, Ethanol.

In the absence of selenium in the body, as an addition to nutrition and improvement of the condition of the digestive tract, auxiliary agents can be used as well as in autoimmune thyroid diseases: Enterobact tablets (SINO - Order in Kasfero pharmashop) 120tab: 2x daily 1 tablet with little liquor. For a two-month dose, the price is 29,50€.

Probiotic effectiveness: high dose, entero-resistant and lactose-free! It contains zinc and selenium as well as four types of lactobacilli, two types of bifidobacteria as well as two strains of enterococci (a biological meal with two tablets: 1.8 k 1010) to stimulate the improvement of the physiological intestinal flora probiotic from the group of fructooligosaccharides.

Alternative:

Basis-Selenium capsules (SINO - Order in Kasfero pharmashop) if necessary: 120 Cps: 2x daily 1 capsule to drink with plenty of fluids.

## Preparations for thyroid gland therapy

1. HYPO SOLVESTOR TT6 100 ©
2. HYPO SOLVESTER TT6 200 ©
3. HYPER K-STRUMIN D25 ©
4. HYPER K-STRUMIN M 7.3
5. HYPER K-STRUMIN P 2.09 ©
6. HYPER K-STRUMIN MB 5.08 ©
7. HYPER K-STRUMIN EO 0.9 ©

By recipes KASFERO NATURMEDIZIN

Production: ABO & PAINEX PHARMA GmbH & Co. KG, 07426 Königsee-Rottenbach, Tel. +4936738 659240.

Tel .: +49 2802 - 807 319, Fax +49 2802 - 807 318, Email: [aurinko-vital@outlook.de](mailto:aurinko-vital@outlook.de)

-PARK APOTHEKE, owner Markus Born, Bahnhofstrasse 5,07426 Königsee, delivery within three days Red fax 03622-401442 e-mail [online@park-apotheke24.de](mailto:online@park-apotheke24.de) Phone: +49 3 67 38 - 43 403

Slovakia:

IRIS LEKAREN, Ivanská cesta 4337/2, 821 04 Bratislava, +421 917 520 249, Email: [info@lekareniris.sk](mailto:info@lekareniris.sk)

Serbia:

KASFERO NEOREMEDICA KED GROUP, Mramor bb, 18251 Mramor. +381 18 567444, Email: [kasfero@kasfero.com](mailto:kasfero@kasfero.com)

*"This Compendium for therapeutics was compiled based on my own experience and experience of practitioners' therapists in Germany - in this spirit I have provided information on how to use, indication and dosage." - Dipl. Tech. Dacan Mitic*

Interested therapists can request professional information and information on future studies and professional seminars by mail at [kasfero@kasfero.com](mailto:kasfero@kasfero.com), as well as the professional recipe for Kasfero Naturmedizin® recipes.

The selling price of these preparations in pharmacies is the same in all countries. General Information found on

[www.kasfero.healthcare](http://www.kasfero.healthcare) [www.kasfero.de](http://www.kasfero.de) [www.kasfero.com](http://www.kasfero.com) [www.kasfero.org](http://www.kasfero.org) [www.kasfero.info](http://www.kasfero.info)