

**Provocation tests for intoxication with Heavy Metals.**

Patient	Diagnose Year	Intoxication with Heavy Metals Dimaval-test	Pre- / Post-test. Highest level / Lowest level of Mercury nanomol/litre 1 *			Pre- / Post- test. Highest level / Lowest level of Copper micromol/24 hr. 2 *			First date / Last date tested for intoxication		Treatment for Heavy Metal Intoxica- tion	Better health / fluctuating	Medication
DV	2001 PD	Cu +Hg	1	157	27	0,1	9,4	3,1	08.05.2003	23.10.2003	Yes		Increased
SE	2004 PD	Cu	1	26	10	0,5	8,8	3,2	06.01.2005	26.05.2005	Yes	Yes	No med.
PU	2004 PD	Cu + Hg	6	385	60	0.1	11,2	3,8	29.03.2005	14.07.2005	Yes	Yes ?	No med.
KH	1998 PD	Cu + 6*	1	54	16	0,1	7,4	2,2	11.04.2001	22.11.2005	Yes	Yes	No med.
HJ	2001 PD	Cu + Hg	9	109	109	0,1	8,1	8,1	12.05.2004	12.05.2004	No		
FI	2001 PD	Cu + Hg	2	1162	58	0,3	22,6	7,1	31.10.2002	13.07.2005	Partial	Yes ?	Variable
AK	1998 PD+	Cu +	2	97	36	0,1	23	3,4	22.02.2001	02.11.2005	Yes		No med 5 *
NL	1995 ?PD	÷	2	73	73	0,1	2	2	???.10.2004	???.10.2004	No		
KL	1996 PD	Cu + +	2	42	5	0,1	10,8	5,5	15.01.2003	10.02.2004	Partiel	Yes ?	Decreased
JL	2002 PD	Cu + Hg	2	472	58	0.1	14,9	5,1	22.03.2004	06.02.2006	Yes	Yes	Decreased
AO	1996 PD	÷	1	9	9	0,1	1,9	1,9	25.03.2004	25.03.2004	No		
SS	2000 PD	Cu + Hg	4	304	95	0,1	9,6	8,8	24.04.2003	04.03.2004	Partial	?	Unchanged
Patient	Diagnose Year	Intoxication with Heavy Metals Atamir- or DMSA-test	Pre- / Post-test. Highest level / Lowest level of Mercury µg /g creatinine 3 *			Pre- / Post-test. Highest level / Lowest level of Copper g/mg creatinine 4*			First date / Last date tested for intoxication		Treatment for intoxica- tion	Better health / fluctuating	Medication
		Atamir											
OG	1997 PD	Cu + Hg	4,9	3,1	3,1	No	0,413	0,413	01.07.2005	01.07.2005	Yes	?	Decreased
KE	1998 PD	Cu	0,3	0,6	0,6	No	0,575	0,575	16.06.2005	16.06.2005	No		
EY	1999 PD	Cu +Pb	1,6	3,8	3,8	No	0,928	0,928	12.07.2005	12.07.2005	Yes	Yes	Decreased
HL	2005 PD+	Cu +Hg +Pb	4	6,4	6,4	0,009	0,818	0,818	12.12.2005	12.12.2005	Yes		
SEL	2006 PD	Cu +Hg +Pb	1,2	2,1	2,1	0,009	0,424	0,424	26.02.2006	26.02.2006	No		No Med.
		DMSA											
HK	2003 PD	Cu +Hg +Pb	No 10*	7	7	No	0,196	0,196	04.09.2005	04.09.2005	?		

Cu = Cobber- intoxication / -loaded  
Cu + = Cobber- intoxication / -loaded and a discrete Mercury intoxication  
Hg = Mercury intoxication  
Hg + = Mercury intoxication and intoxication / - loaded with other heavy metals.  
PD = Parkinson disease  
PD+ = Parkinson Plus disease  
MS = Multiple Sclerosis

Patients tested with Dimaval are mostly only tested for Mercury and Copper

- 1\* Note: Reference ranges 5-82 [nanomol](#) / litre. 250 [nanomol](#) / litre are absolutely a heavy intoxication. No lowest level is safe
- 2\* Note: Reference ranges 0,1 –1,3 micro mol / 24 hr. (Ref. Range can be discussed).
- 3\* Note: Reference ranges < 4 µg / mg creatinine. No lowest level is safe.
- 4\* Note: Reference ranges .010 - .090 µg / mg creatinine (Ref. Range can be discussed.)
- 5\* Note: Patients with PD Plus (MSA) does not always have benefit of anti-PD-medication.
- 6\* Note: Allergic reaction to some Gold, Cadmium and Nickel tested with MELISA-test. Patient exposed to Aluminium hydroxide
- 10\* Urine samples only collected 6 hours

The level of Mercury or Copper could be fluctuating. This means that the lowest level is not always the latest level. But in most cases the level of the Heavy Metals are decreased when treated.

Note that the patient also could be re-intoxicated.

Copper is chelated before Mercury that means that a high level of Copper could cover a higher level of Mercury than seen.

Males: DV, HJ, NL, KL, AO, SS, SEL, HK

Females: SE, PU, KH, FI, AK, JL, OG, KE, EY, HL