Case report ReStore

B.B., male, 75 years old, type 2 diabetes for 20 years, continuously declining renal function 2018-2019, GFR in December 2019 at 39 mL/min, apoplexy in Q4/2018 with known co-morbidities heart failure, atrial fibrillation, COPD, CHD, AVC and cerebrovascular circulatory disorders. Cardiovascular collapse with hospitalization over Christmas 2019, rapid progression of renal values quickly towards severe renal failure (30.12.2019; GFR: 25 ml/min, creatinine: 2.37 mg/dL), the need for upcoming dialysis treatment was communicated by the treating physicians.



Start of ReStore therapy at the request of the now highly depressed and low-energy patient with the aim to halt the progression of chronic kidney disease with the help of the ReStore protocol.

Even after the first therapy session, there was a clear improvement in renal insufficiency, which subsequently continued.

The course of the GFR in this patient is shown in Fig. 1. After approx. 3 months, the GFR was 60 mL/min and the creatinine level was 1.18 mg/dL. After a treatment break of two weeks, there was a slight deterioration in the kidney values again, but these have now (July 2020) stabilized at creatinine values of 1.3 mg/dL -1.4 mg/dL.

The patient died of heart failure in the summer of 2023 without ever needing dialysis therapy.

(Pfützner A et al., Diabetes Stoffw. Herz 29 (2022) 209-2015)

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