



THE ANTI-CANCER DIET

**The Most Scientifically Validated Diet
for Reducing Cancer Risk**

3 Medical Doctors "Open Up" About The Most Effective Nutritional, Dietary,
and Lifestyle Changes for Healing Cancer

**Nathan Crane,
Dr. Joel Fuhrman MD,
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Dr. Thomas Lodi, MD**



ABOUT THE AUTHOR

Nathan Crane



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Nathan Crane is an award-winning author, inspirational speaker, plant-based athlete, event producer and 18x award-winning documentary filmmaker. Nathan is the Founder of The Panacea Community, Creator of the Global Cancer Symposium, and Director and Producer of the documentary film, Cancer; The Integrative Perspective. In 2005, at only 18 years old, Nathan began his health, healing and spiritual journey, eventually overcoming a decade of brutal teenage addiction, house arrest, jail and challenging times of homelessness to become an international author, filmmaker and speaker dedicated to health, healing and conscious awakening. Mr. Crane has received numerous awards for his contribution to health, healing, and personal development including the Outstanding Community Service Award from the California Senate for his work in education and empowerment with natural methods for healing cancer. With 15 years in the health and wellness field, Nathan has reached millions of people around the world with his inspiring messages as a regular contributor to a number of national magazines, television and radio interviews, conferences, expos, summits and podcasts.



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About

This e-Book is a compilation of 3 inspiring and informational interviews conducted by Nathan Crane, world-renowned and award-winning natural health expert, filmmaker, speaker and author, with 3 world-leading Medical Doctors who work hands on with thousands of patients dealing with a range of chronic diseases from autoimmune disease to cancer.

The interviews were conducted by Nathan for his 2nd annual Global Cancer Symposium, and then transcribed into this ebook to help disseminate this information as widely as possible, helping as many people as possible understand the complexities of the nutritional foundations for dealing with cancer.

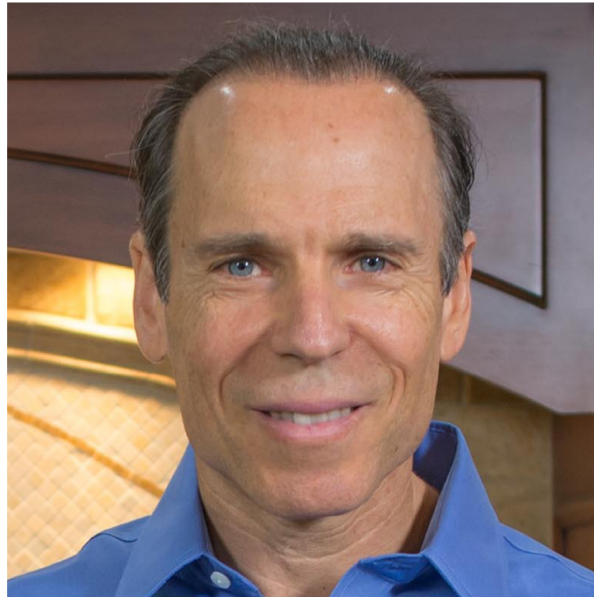
The information in these interviews is presented for educational purposes only and is not intended to diagnose or prescribe for any medical or psychological condition, nor to prevent, treat, mitigate or cure such conditions.

The information contained herein is not intended to replace a one-on-one relationship with a doctor or qualified healthcare professional. Therefore, this information is not intended as medical advice, but rather a sharing of knowledge and information based on research and experience. We encourage you to make your own health care decisions based on your judgment and research in partnership with a qualified healthcare professional.

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Dr. Joel Fuhrman



www.DrFuhrman.com

JOEL FUHRMAN, M.D. is a board-certified family physician and nutritional researcher who specializes in preventing and reversing disease through nutritional and natural methods. He is the president of the Nutritional Research Foundation and author of seven New York Times best sellers: *Eat For Life*, *Eat to Live*, *The End of Diabetes*, *The End of Dieting*, *The End of Heart Disease*, *Super Immunity*, and *The Eat to Live Cookbook*. As one of the country's leading experts in nutritional and natural healing, he has appeared on hundreds of radio and television shows, including *The Dr. Oz Show*, *Live with Kelly*, FOX, CNN, Today, *Good Morning America*, the Discovery Channel, and Food Network. His own PBS television programs directly address the crisis of obesity and chronic disease plaguing America and has raised over 70 million to help support PBS stations nationwide. Dr Fuhrman also operates the Eat To Live Retreat in San Diego, where people come from all over the world to recover their health. To learn more visit DrFuhrman.com, a great resource to make healthful eating easy and taste delicious.



Dr. Joel Fuhrman

Nathan Crane:

Dr. Joel Fuhrman, MD is a Board-certified family physician and nutritional researcher who specializes in preventing and reversing disease through nutritional and natural methods. He's the President of the Nutritional Research Foundation and the author of seven New York Times Bestselling books, and I have some of these myself. We actually made one of the recipes for breakfast yesterday. They are really good books. He has published "Eat For Life," "Eat To Live," "The End of Diabetes," "The End of Dieting," "The End of Heart Disease," "Super Immunity," and "The Eat To Live Cookbook." That's actually the one we just made a recipe from yesterday morning.

I encourage you to take a look at these books on his website, www.DrFuhrman.com, on Amazon, anywhere online, really. He's one of the country's leading experts in nutritional and natural healing, and has appeared on hundreds of radio and television shows, and has his own PBS television programs directly addressing the crisis of obesity and chronic disease that's plaguing America. He's raised over \$70 million to help support PBS stations nationwide. He's helped millions of people around the world, and he operates the Eat To Live Retreat in San Diego, CA, where people come from all over the world to recover their health. My wife and kids and I actually stayed there for a few days doing some filming, learning about the Eat To Live Retreat. It's an incredible place. Make sure you take a look at that after this interview as well. You can go to www.DrFuhrman.com or go to Eat To Live Retreat. It's a great resource to help make healthful eating easy and taste delicious. Dr. Fuhrman, thank you so much for being with us.

Dr. Joel Fuhrman:

Oh, great to be here. Thanks, Nathan.

Nathan Crane:

So, let's start actually by going backwards and then working our way forward. We're going to be talking about what is the best diet for people with cancer. And this is backed in science. This is backed in decades of your own research and experience. But, before we get into the best diet, let's talk about what the worst diet is, so people know. What is really the worst diet for people who have cancer?



Dr. Joel Fuhrman

Dr. Joel Fuhrman:

I guess you could say the Standard American Diet is perfectly designed. They used to say it's designed by ISIS to kill people. Because we want to have all the features. In other words, your diet has to have excess calories because excess calories make excess body fat, and body fat promotes cancer. That's number one. Number two. You want to have a high glycemic load because the extra insulin is pro-angiogenic, which permissively allows cancer cells to replicate. So when I have a high glycemic diet, including a lot of white rice, sweeteners, honey, maple syrup, white potato, white bread... I always say the whiter the bread, the sooner you're dead.

Don't trust things that are too white like cocaine and cigarettes, and white bread. These are, you know, pizza. Okay, and then on top of that high-glycemic sandwich, you have a lot of animal protein which also promotes IGF-1, insulin-like growth factor one. And the insulin IGF-1 sandwich, a hamburger, pizza, macaroni and cheese, the American diet, which mixes a high-glycemic carbohydrate with an animal product cooked at high heat forming heterocyclic amines and other carcinogenic compounds in combination with a high insulin response. You have the perfect cauldron of cancer. Because that's exactly what drives cell replication in cancer. Growth-promoting foods push up the hormones, restrict the antioxidants and phytochemicals, and cancer fighters, and the anti-angiogenic factors in mushrooms, and berries, and things, and green vegetables.

In other words, there are foods that promote fat storage and promote growth hormones, and those foods also promote cellular replication in cancer. And there are foods that have anti-fat storage effects and keep your growth hormones relatively constricted. And those we can say dial up longevity and dial up or your shorten your lifespan. Destroy your telomeres and your STEM cells. Or you can make it the other way. And, what we know and what we're talking about today is the same diet style that slows aging and maximally extends human lifespan. It is most preventative against developing cancers. And I want to make this point really clear. The same portfolio of foods that prevent cancer have been demonstrated in scientific studies to enhance lifespan and reduce the chance of cancer coming back, and increase the risk, the chance of remission. In other words, the same foods that prevent cancer are effective and most protective when you have cancer. There's not one diet when you have cancer and another diet to prevent cancer. It's the same foods that are most effective in both cases.



Dr. Joel Fuhrman

Nathan Crane:

So, talking about the Standard American Diet, for example, and I want people tuning in to really get clear. Be honest with yourself. This isn't about judging. It's not about blaming. It's about education, awakening ourselves to what we're doing that is leading to cancer or chronic disease in our bodies, and then what we can do about it. So, I want people to take some notes, be honest with yourself here. What does your diet currently look like? What are you actually eating? Are you eating a lot of the things that Dr. Fuhrman just mentioned? White rice, white bread, high sugar foods, pastas and pizzas, and cake and sodas, and candy bars, and processed foods that you're buying from the freezer section, like is that 50%, 40%, 60%, 80%, 100% of your diet? What does that look like for you? And be real with yourself. Because if these foods are shown to lead to chronic diseases like cancer, to promote fat growth, as you said, Dr. Fuhrman, to lead to obesity, which we know directly correlates and is associated with high risk of diabetes as well as cancer. Then, we need to know what foods to stay away from, right? And so, one, be honest with yourself. And, two, Dr. Fuhrman, I'd love for you to just expand a little bit more on animal products. You said, animal products have a direct correlation to higher risk of disease. Can you talk a little bit more about that?

Dr. Joel Fuhrman:

Sure. Well, there's a lot of different issues with regard to animal products. Number one is the way animal products are cooked in this country. People like to eat them when they're cooked under high heat. Flame-broiled, barbecued, cooked in an oven. They like the outside to be browned and whatever. And when you're cooking animal products under heat, you're forming certain carcinogenic compounds on the surface of the animal product. Compared to cooking an animal product in a soup or a stew in a water content where you're going to form much less carcinogenic substances. So number one, the way that the animals are, of course, raised and kept, but also the way people like to eat animal products where they're overly cooked, and you form a constellation of carcinogenic substances from the heat on the fat, particularly heat on the fat, and crystallizing and forming different types of acrylamides and dangerous carcinogenic compounds.

Likewise, when you fry potatoes or when you fry other foods in oil, and you cook oil for hours at high heat over and over again, when you get fast food where you're putting potatoes or even a vegetable into a fryer, or a chicken in a fryer,



Dr. Joel Fuhrman

where the oil is being cooked for hours, you're forming lots of carcinogenic and rancid compounds that are so cancer-causing that even working in a fast food restaurant and then handling the fumes from the fryers increases your risk of cancer. So, it's just crazy. But let's just assume that people had a high-quality animal product that wasn't commercially raised.

It was a naturally-raised animal product. You were eating a snake or a lizard or a frog in the woods, or you caught a rabbit out in your backyard. You know, let's just assume that for a minute. And the animal product wasn't cooked at high heat. It was cooked in a stew with a soup with vegetables, right? It's still going to promote cancer in moderate to significant amounts. Especially if your diet is otherwise not perfect. Because as you enhance the animal protein in your diet, as you go up a certain threshold of animal protein, your IGF-1 starts to rise. And IGF-1 is a growth hormone that permissively allows cancer cells to replicate. And IGF-1, of course, what I'm saying right now is IGF-1 is very sensitive to animal protein and not sensitive to plant protein. Plant protein keeps IGF-1 in a favorable range, doesn't let it go too high. And excessive amounts of animal protein goes higher and higher. We know what a person's IGF-1 levels are by measuring how much animal protein they eat. And the more protein they eat, the higher their IGF-1.

And the higher the IGF-1, it means your higher risk of breast cancer, prostate cancer, and colon cancer. And there's zero controversy there. All the studies showing in the levels of IGF-1 in the American diet drives people's levels above 200. And there's no controversy that higher IGF-1 levels are linked to cancer in a proportional level to the height of the IGF-1 level. So, no one could say high IGF-1's are safe and high IGF-1's are not cancer-promoting, because it's just a fact. So, even if you ate good-quality animal product and cooked it right, unless you were eating very small amounts than higher amounts, you're still going to push IGF-1 too high. And this growth hormone IGF-1 obviously is very closely linked with breast cancer and prostate cancer. And because dairy products raise IGF-1 more than other animal products do, it's one of the reasons dairy is so closely associated, drinking milk, with breast cancer, and of course, drinking milk with prostate cancer. It's one of the reasons for the raise of IGF-1. So we're talking about your diet has to be hormonally favorable. And your diet cannot be hormonally favorable as the amount of animal protein goes above a certain level, let's say 5% to 10%. 5% for some people. 10% for other people when IGF-1's starts to lift above 150 to a range that's not ideal.



Dr. Joel Fuhrman

Nathan Crane:

So, that's what I was going to ask you. What is that ideal range for a healthy person? 150?

Dr. Joel Fuhrman:

Yes, I think between like 90 or 75, 80, let's say, and 160 is probably a favorable range of IGF-1. The average American's, I think, is a 225, depending on your age. But basically speaking, we all have genetic susceptibilities. And if your genetic susceptibility to cancer is high, maybe it pays to measure that your IGF-1 is low. Most of the people we don't measure because we just know what they're eating is going to be favorable. The other factor here is that some people, because of decreased protein bioavailability with aging, their IGF-1 can drop too low. And if your IGF-1 gets too low, 50, 60, 40, then your immune system gets too suppressed, and you can also increase your risk of cancer.

Those people need more protein, not less protein. What we find in the Seventh Day Adventist Health Study-2 which was so fascinating, when we give that study such a high degree of credence, because not just the large number of people, but also the fact that they have vegans and near-vegans, and people eating a little bit of animal products, and some people eating fish, and some pescos, and some people, lacto-ovo vegans and some people where they're more animal products, some people, you know. So we have the whole different cohorts eating different diets. And we could see with these large numbers of people, following them for decades how long they live and what they die of. And what they find, which is really fascinating, is more plant protein in the diet extends lifespan. Reduces risk of cancer. And more animal protein increases risk of cancer.

So we're looking at foods like, we're talking about the higher carbohydrate plant-based diets, the outcomes are not as favorable as a higher protein plant-based diet. So, we want that because the IGF-1 could drop too low with aging. Just like animal protein could push our level too high, a vegan diet that's not designed to have an adequate amount of protein could push your IGF-1 too far in the other direction, be too low. So that's where eating things like quinoa, hemp seeds, soybeans, Mediterranean pine nuts, broccoli. That's where eating things that have the protein richness designing the plant-based diet to be protein, especially as we age, to have enough protein is important as we're decreasing animal protein. We just don't want to live on



Dr. Joel Fuhrman

having a macrobiotic diet and just live on rice and potato, for example, because that's not ideal to fight off cancer or to promote or maximize longevity.

Nathan Crane:

So, just to recap a couple of things here when people are tuning in. Ideally, if someone's on a high meat diet or an animal product diet, you want to decrease that as much as possible or get some people that just aren't ready or willing to completely remove all animal products from their diet, 5% to 10% in their diet should be maximum for most people, right? So, that's like, if you have a plate, you have vegetables, you have quinoa, you have some beans, you have some rice or whatever else, your 5% of that with animal products is going to be a very small piece of chicken, right?

Dr. Joel Fuhrman:

Ten ounces a week. Let's say, you're using animal products as a condiment or a flavoring to flavor a dish to put into soup or a stew. You're not eating it as a major source of calories. We're using it as a flavoring, they can be using, let's say, 10 ounces a week. However, I'm saying, if you're going to ask which is healthier, to be a strict vegan with the right supplementation of B12 and DHA and zinc, or to get those from animal products, the answer that the data seems to suggest that a properly supplemented vegan diet is most likely, for most people, more lifespan-enhancing. However, as you just were saying, there are some individuals, even with an ideally-designed vegan diet where you're eating all the high protein plant foods and you're supplementing it conservatively and intelligently, there are still some people whose IGF-1 could drop too low and it might be conducive to longevity to add some animal product to their diet in small amounts. Because those individuals need the extra protein and otherwise they don't produce enough hormones. So there's some adjustment that might have to be made for some rare individual who's not assimilating protein well. I just want to make that clear. It's not necessarily a one-plan-fits-all approach.

Nathan Crane:

Sure. It's going to work for most people, but really getting some testing and working with someone like yourself, an expert in the field, to find out what someone actually needs is obviously ideal.



Dr. Joel Fuhrman

Dr. Joel Fuhrman:

Right.

Nathan Crane:

And, we're talking to a large global audience here, a lot of people who have cancer or are trying to prevent cancer. So, when you're talking about protein, especially getting a majority or all of your protein from plants, what does the data tell us in terms of the adequate amount of protein from plants that we need in general for longevity and for prevention of cancer?

Dr. Joel Fuhrman:

I don't want people to get too hung up on this protein thing because almost any assortment of, if you're eating a healthy diet, especially the type of what I call a Nutritarian diet, which is high in greens and bean vegetables, and includes usually at least an ounce and 1/2 of nuts and seeds, eating hemp seeds and flaxseeds. But in other words, if you're eating all these foods that are healthy in the full variety of plant foods, then you're getting a lot of high protein foods. Like beans, for example, are about 30% of calories from protein. They like, have the protein of meat. But when you consider that almost 25% of the carbohydrate content in beans are resistant starch, which the carbohydrates don't get absorbed into the bloodstream, they pass through into the toilet bowl. Which means that the actual total percent of protein as the amount of absorbable calories from beans is more like 40%.

So, we're talking about when you eat green vegetables which are like 40% protein, and beans which are like 40% protein. That's more than animal products have. And then when you're having nuts and seeds on top of that, which also have a nice protein boost, it's not an issue if your plant diet is designed appropriately. It's only with these sloppily-designed plant-based diets or these diets that are advised by certain gurus that are obviously more using one food too much or not having a good enough design to make sure you have protein adequacy for the elderly, especially. And for the young children, too. I mean, middle-aged people could live a lot on fruit and just live on potatoes and rice and fruit maybe, because their protein assimilation is so high.



Dr. Joel Fuhrman

But for children who are growing, you can stunt their growth and stunt their brain development if the diet's not well-designed on a vegan diet. And likewise with the elderly people as the protein viability and absorption goes down, it has to be well-designed. So, it's the extremes of life. And we're talking about people that are more frail or growing children. Then the attention to the diet is obviously more critical.

Nathan Crane:

Now, is there like a ratio within a range that someone should be aware of?

Dr. Joel Fuhrman:

Well, you get about 30 grams of protein for every 1,000 calories you eat. So, you can design a diet to be a little more protein-rich. Like 40 grams. So, let's just say between 30 and 40 grams of protein per 1,000 calories. Based on how well you designed it. And then, if you're a bigger guy and doing more exercise, and burning more calories, or you're pregnant and you need more calories, and you're eating 2,000 calories, then you might be getting 60 to 80 grams of protein.

If you're a powerlifter or a professional athlete, you're eating 3,000 to 4,000 calories, you're probably getting 120 grams of protein, which is sufficient. So if you're smaller and don't need the calories, you also don't need as much protein. So, the protein goes up, let's say, about 30 to 40 grams per 1,000 calories is appropriate. And if you want to push that up to 40 grams per 1,000 calories, if you're a professional athlete or you want to push the envelope of muscle development, you can do that a little bit.

Nathan Crane:

And, in terms of calories in, calories out. In terms of weight loss, in terms of dealing with obesity, in terms of like, actually, if people are really serious about changing their diet, getting healthy, wanting to reverse cancer more naturally, how do you help people figure out how much food they actually need to eat? Should they be counting calories? Should they be tracking protein and macros and so forth?



Dr. Joel Fuhrman

Dr. Joel Fuhrman:

We don't really have to because what we do is, we are eating somewhat moderate caloric exposure. We don't want to eat excess calories. And we can help monitor that by our body weight to a degree. In other words, what I'm seeing right now is that if you're overweight, you've been chronically overeating food more than you need. And I consider a nutritarian to be somebody at their ideal weight or moving to eating a diet where they're losing at least two pounds a week moving towards their ideal weight. And I use that two pounds a week guideline, or kilogram a week, as the minimum weight loss acceptable to be eating healthily if you're overweight. And we see that as people are losing two pounds a week or more, their IGF-1 goes appropriately, their diabetes, their insulin levels drop, their insulin resistance goes down, their production of angiogenesis promoting goes down, their production of estrogens go down.

The inflammatory markers go down, the white blood cells start to drop. We see all the beneficial effectors that measure inflammation decreasing as they're losing weight. But if they're overweight and they stay at that overweight condition to stable weight, you see these inflammatory markers and these abnormal measurements of bad health don't go down. So an ideal weight for a male should be a body fat below like 12 1/2%. At least below 15% for a female. It actually should be below 22 1/2%, but at least below 25%. Above 25%, you're not healthy. A male above 15% of body fat, you're not healthy. So I'm almost 67. I'm going to be 67 and my body fat is still pretty close to where it was in my 20s and 30s, and I still have close to a 10% body fat. And I'm not saying everybody has to be as lean as a 10%, but I'm saying that you shouldn't be over 15% for sure. So, how much should you weigh? Well, we want to have muscles but we don't want to have extra fat on our body.

So, then you're saying calories, and you're eating so healthily. You're not driven to become a calorie-consuming monster. It's all the oils and the sweets, and the processed foods that drive people. They have to overeat, plus they're nutritionally deficient drives overeating behavior. When you're eating all these healthy foods, you don't have to overeat. And you feel satisfied with less calories and you let hunger be a guide. You eat when you're hungry and you don't eat if you're not hungry. And you can use a scale to help you make sure you're at an appropriate weight for you. We even have one of those InBody tests which measures body fat. Which is very motivational to some people. Well, look, you weigh 110 pounds but you're five foot tall. Or you're five 5'1, and your right weight should be 100 pounds, even though you really



Dr. Joel Fuhrman

shouldn't be 110 pounds. You should be closer to 100 pounds according to the scale. Which says your body fat is still above 30% at 110 pounds. So you need to exercise, build a little more muscle and maybe put on three pounds of muscle and take off seven pounds of fat, you know what I mean?

So, we adjust that accordingly. And so one of my primary principles here is just moderate caloric restriction, just a touch calorically restricted. In other words, that means waiting to eat until you get hungry, not eating after 6:00 at night, going to bed on an empty stomach. Eating enough getting out of the habit of excessive eating and eating for recreation. Because when you just moderately caloric restrict a hair and just undereat a little bit, then it slows your metabolic rate down, and then your body can devote its energy towards healing, repairing, and fighting off cancer. Let me say this one more time.

When you eat excessive calories that cause weight gain, of course it causes all these angiogenesis promotion, high insulin resistance, promotes aromatase, producing high levels of estrogen, it creates inflammation, you spew out cytokines and lipokines. It's dangerous. But, the overweight condition also speeds up the aging process. Aging your telomeres and your STEM cells. Because your body, when you're taking extra calories, it raises your metabolism, so it raises your body heat. Your thyroid function goes up. And your respiratory quotient, the amount of calories burned through breathing, your body tries to burn off those calories, and raising its metabolism, which ages you faster. Raising metabolism is not a good thing. When you just moderately undershoot calories a little bit, the body is resistant to losing the weight. Like I already have a low body fat, I exercise, my body doesn't want to get thinner than this. So when I undershoot calories, it slows down my metabolism to prevent weight loss. And in doing so, it lowers the respiratory quotient, lowers the thyroid function, lowers the body temperature. My body can devote itself to preventing excessive and abnormal growth. It can repair better in the non-feeding state.

It detoxifies and removes toxins better in the non-digestive state. But most important, we're saying when the metabolism is slower, you're aging slower, and it's stabilizing your STEM cells, increasing STEM cell maintenance, and preventing premature aging and shortening of your telomeres. That's the secret, the secret sauce to a nutitarian diet, which people don't understand. It's a complicated issue. I don't know if they are going to get this all but at least they'll start to get an introduction to this.



Dr. Joel Fuhrman

Nathan Crane:

Yes, you covered a lot there. You also made it super-clear. Which I love. Which is overeat excess calories, you're going to have problems. Slightly undereat and do it with a healthy diet, you're going to live longer and be healthier. I mean, that's the gist of it. And, I love how you go into the science and to the understanding, and help us really understand it in much more depth. I do want to encourage people after this interview as well, go listen to Dr. Thomas Lodi, and then Dr. Nathan Goodyear, who were part of this symposium. In those interviews we also go into different tracks in depth in this same topic that'll take you even deeper.

Also, Dr. Fuhrman's books are amazing for giving you much more depth in this subject. So, take a look at those as well. A couple of things came to mind as you were talking I want to share with people because this is a really valuable analogy that's helped me and my wife, and helping explain to others, too, is, if you're talking about calories. And, some people are like, well, I just don't eat that much, but I don't know why I still have all this extra fat, all this extra weight. One potential reason for that, I think, that I've seen, like let's say you eat some potato chips, right? A little handful, 10, 12 potato chips which when you chew them up, they take almost no space in your stomach whatsoever, but they're really high in calories, really high in oil and salt, often sugar, additives, things like that.

So, 150, 200 calories maybe in just a few chips, right? 10, 12 chips, maybe something like that takes almost no space in your stomach and no nutrients. Versus, you take a big plate of broccoli, warm it up in the oven, ready to go, put a natural dressing on it. This huge thing of broccoli has about the same amount of calories as this little tiny amount of potato chips but it fills my stomach with that fiber and with the nutrition. So, now, I'm not craving and hungry for something else. Whereas if you're eating some chips or some ice cream or something that's low nutritional value, high caloric intake, you're going to continuously be hungry. You're not going to be satiated. As you were talking about, you're not getting the nutrition your body needs, and you're going to overeat and not even know that you're overeating.

Dr. Joel Fuhrman:

Well, you bring up a very important point. Because when you take in concentrated calories in that form, the calories rush into the bloodstream very rapidly. . I call it a bolus of calories into the bloodstream all at once. When you eat beans or vege-



Dr. Joel Fuhrman

tables, the carbohydrate in beans will come in at one or two calories a minute. When you have the chips with the oil or the french fries, the calories come in at 100 calories a minute, not one or two calories a minute.

Nathan Crane:

Wow.

Dr. Joel Fuhrman:

When the calories rush into the bloodstream so rapidly, it signals dopamine receptors in the brain that make you addicted to that food and can't stop eating it now. It drives overeating behavior. So what I'm saying is, there's lots of mechanisms. Dopamine is one of the behaviors we're talking about. But also it launches fat storage hormones that now stimulate angiogenesis. And so from the rush of calories, we're talking here the fact of when you pour olive oil on your food, because of the caloric richness, and how fast the oil is absorbed, it's an appetite stimulant.

But, it also stops you from losing weight. It sends a signal to the body, don't burn fat and break it down, take this fat, get it out of the bloodstream, and store it away into your fat storage. And we say from the lips to the hips in five minutes flat. Because the body stores fat very efficiently and rapidly. And your body's not storing fat and trying to break down fat simultaneously. That turns off fat breakdown for the next few days. When you're talking about people who are cutting back on calories and trying to lose weight, they can't lose weight, because they keep giving their body signals. They're promoting dopamine. They're promoting angiogenesis. They're promoting fat storage hormones.

They're taking in high-glycemic carbohydrates like pizza or bagels that are producing high insulin which is an anti-fat storage, fat breakdown. It's a fat storage hormone. Or they're taking in oils or high concentrated fats. Or I say, that caloric bolus in the bloodstream, I call it fast food. I wrote about that in the book, "Fast Food Genocide," how we're defining fast food as not just food you buy in a fast food restaurant, but food that's accessed fast and absorbed into the bloodstream fast. It's that rapid flux. It's not just it doesn't take up space in your stomach. It's that it goes into your bloodstream so rapidly, it makes the brain want to make you eat more food. It turns you into a food addict, and you become a calorie-consuming monster.



Dr. Joel Fuhrman

Nathan Crane:

And then all the chronic health conditions that come along with that. That obviously you're not going to see right away, but you're going to see an accumulation of it over months and years and decades. So you were talking about fat, fat storage, fat burning, etcetera. So, that brings up in my mind the ketogenic diet. There's so much information out there now about keto and the ketogenic diet. And you see even health experts recommending people do ketogenic diet for cancer, ketogenic diet for diabetes, ketogenic diet for weight loss, ketogenic diet for longevity. And, I won't say anything about it. I'd love to hear what you know about ketogenic diet in regards to cancer and longevity. What you know about it in terms of the science and the data, and what you know about it because you've been working hands-on with people dealing with these chronic health issues for decades.

Dr. Joel Fuhrman:

Absolutely. It's important to learn about this because it helps clarify and crystallize how you're thinking. First of all, it's very important that people understand the difference between a short-term study looking at soft end points versus a long-term study that goes on for decades with hard end points, with large numbers of people. What I'm saying, is that short trials that go on for six months to two years can generate a hypothesis when these look positive. A ketogenic diet, a person lost weight, the cholesterol looks better, their diabetes numbers looks better, those are soft end points, not hard end points.

Like we can give you a cholesterol-lowering drug that makes your cholesterol go down in a year, and that's a soft end point. We don't know for sure if you're going to live longer because the cholesterol went down. Maybe if we took 100,000 people on the cholesterol-lowering drug, compared them and followed them for two decades, and looked at their hard end points. How old they were when they died, and whether they reduced cardiovascular death or not. Then when the long-term studies with the hard end point corroborates the short-term studies with the soft end point, then we have more definitive data. We don't have that.

There's no long-term data on the ketogenic diets. So, in a lot of ways, you can have a cookie diet. Just eat cookies or eat Twinkies and you lose weight if you eat lower calories. There are all kinds of crazy diets that look better in short-term. People eat just meat or just eat bacon, they'll lose weight short-term, but you know you're not



Dr. Joel Fuhrman

going to sustain a healthy, long life on that. And that's what their studies show. It shows the chronic acidity from the keto diets and the high meat from the keto diets lead to shorter lifespan. And we can measure that with excessive telomere shortening. When people are on the keto diets, they're aging more rapidly. And then, do we have studies long-term looking at hard end points?

Yes, we do. We have studies show with high meat-based diets, especially the keto diets, show the most we could say harm at preventing extreme longevity. Living to the possibility of 90 to 100 years old. You don't get any of those people with extended lifespans. It accelerates aging of the body. It takes away your possibility of living a long life. Okay, that said, we know that cancer cells are fueled by excess glucose and excess insulin. And we know that cancer cells are also fueled by excess protein. And that methionine is a limiting factor for cell replication. What I'm saying right now is the studies we have which have the most definitive effects against cancer, is that putting the foods that have the most anti-cancer benefits that, and we have a lot of studies on flaxseeds and chia seeds producing 71% decreased death when tracked, when women with breast cancer were tracked for 10 years. We have studies on green vegetables being, suppress genetic alterations and extend lifespan in cancer patients. We have that data on mushrooms.

We have that data on onions being reducing risk of death from cancer when people already have cancer. We have all the data on these foods. Putting together the portfolio of a high antioxidant plant-based diet without the negative of the animal products seems to afford people the opportunity to prevent and reverse cancer much more effectively than a keto diet would. Except, there's a few exceptions here. One exception may be brain tumors. The studies on brain tumors are that they don't respond to methionine restriction, they do respond to, there's studies showing that you can shock it by not having too much glucose or insulin response to a brain tumor. So, I have had some patients with brain tumors we put on a plant-based keto diet. We made the diet very strict, avocados, nuts, green vegetables.

It apparently looks like the person got tremendous lifespan enhancement because they were predicted to be dead. And we're seeing some response in the advancement of the brain tumors. But for most people, we see a much better response with cancer. For example, believe it or not, in the few advanced ovarian cancers that I've seen. Now, I'm not an oncologist. I'm a family doctor specializing in nutrition. So the point I'm making is that I see a limited number of people with advanced ovarian cancers.



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And the limited number I've seen were given three to six months to live. Where ovarian cancer had spread to their, they had fluid in their lung or spread to their body. They've all survived. And now it's like 15, 20 years later. One woman, Pam, she's now, I think, 19 years. She was given three months to live. She was four liters of fluid, of metastatic fluid taken out of her lung and now she's still alive 17 years later. A friend of mine, Karen, had metastatic ovarian cancer. She's alive almost 20 years later. And, another person. It's just remarkable. And likewise, I've had people with breast cancers that metastasized. It left the breast. They were given very short... and I even had one person who had actually bone lesions, metastatic lesions in the bone that disappeared. That was just, what, disappeared? That's unbelievable. I was shocked, had to repeat it. Well, they mixed up the test? They messed it up or something.

But including people in my own family. My sister-in-law had an advanced cancer that left, a very aggressive cancer. She's now doing great decades later. And I have so many people who were given such little time to live that they couldn't be helped any more, and they've done super-well. So, I'm saying, there's limited data. You know. We don't have lots of studies on the nutritional treatments of cancer. But what we have, especially looking, we know that the emphasis on chemotherapy is misguided and people were given false hope. We know, for example, out of the 75 drugs approved by the FDA for cancer in the last 15 years, the average lifespan enhancement that's documented in the scientific literature from those drugs which cost on the average of \$36,000 a pop. Their average lifespan enhancement is 2.4 months of advanced lifespan. I mean, so we know that what doctors can do is very limited, and we're not living long. The war on cancer that was started by Nixon and the \$105 billion spent on the National Institute of Health on producing drugs to fight cancer has failed. We've lost the war on cancer. Drugs don't work to fight cancer. And, what I'm saying right now is, nutritional excellence is where the money is.

It gives us control over our health destiny. And you don't have to get cancer. And the answer really is vegetables. But people don't like that answer. They want a different answer. They want a magic pill they can take so they can eat donuts and pizza, and hotdogs and bagels, and not get cancer. But life is not a fairy tale. That's nonsense.

You can't put cancer-causing foods, go out and eat white bread and bagels, and pizza and burgers, and think you're not going to get cancer. You can't disallow the biological laws of the way the body functions. You know, if you want not to get



Dr. Joel Fuhrman

cancer, you have to eat a healthy diet. Which I call the Gold Standard of Healthy Diets designed to maximally extend lives and prevent cancer is called a nutritarian diet. Because it includes the full portfolio of foods that have been shown to be most protective against cancer. And they are easy to remember by the acronym GBOMBS. Greens, beans, onions, mushrooms, berries, and seeds. The combination of these foods put together in the same dietary portfolio is when the magic happens.

Nathan Crane:

I just have to say that the fact that you brought up these 75 drugs that have been designed in the last 15 years for treating cancer, they're so expensive. And an average lifespan enhancement of 2.4 months on average in general, honestly, should be criminal. I mean, I know the doctors prescribing these drugs, you know, they have good hearts, good intentions, many of them. Unfortunately, many of them are misguided because they don't understand what you know. You are a medical doctor that looked at the research. Went down the path of understanding, what can we actually do that's better, that enhances longevity, that helps people heal?

And you have become an expert in this field and have been for a long time. I think this is so important for people tuning in. I mean, I'm never encouraging anyone don't do conventional therapy. If that's what you want to do, that's your choice. What I do encourage people to do is learn as much as you can about this subject before choosing any kind of therapy, conventional or otherwise. Because the more you know, the more empowered you are. The more you know about diet, about exercise, about lifestyle, about what actually prevents or reverses cancer as well as what causes cancer.

That's what this symposium is about is giving you that education. The more you learn about it, the more empowered you'll be to actually act in the best interest of your health and longevity. I know the biggest study ever done on chemotherapy which has hundreds of thousands of people in it, and it was both Australia and the United States, they found that the effectiveness of chemotherapy among all of these people was only 2 1/2% effective. Which means, it has a 97 1/2% failure rate, right? And that is one of the number one things that is being recommended for people with cancer.



Dr. Joel Fuhrman

Dr. Joel Fuhrman:

And you have to know what kind of cancer you're treating. In other words, most common cancers are post-menopausal breast cancer and prostate cancer which are slowly-growing cancers. And chemotherapy is not effective for cancers that are replicating that slowly because they mostly only kill cells that are replicating more rapidly, because they open their DNA up to be killed by the chemotherapy. But there are pre-menopausal breast cancers that are more aggressive and multiplying very rapidly. The more deadly cancers that grow fast are going to kill you.

Those are the ones most susceptible to chemotherapy. So in other words, when you're a child and you have acute plasmacytic leukemia or an acute leukemia, maybe chemotherapy might be useful. It's the common everyday garden variety cancers that where, the later-in-life breast cancers, the later-in-life prostate cancers, where they push chemotherapy or most chemotherapy is used where you get very little benefit.

But there are some earlier-life cancers that are more aggressive and replicating more rapidly when we do recommend chemotherapy because it's a more deadly cancer, and because chemotherapy works better for a more aggressive and deadly cancer. Because it's spreading rapidly and the rapid growth of the cancer makes the cells more susceptible to the chemo agent. So we have some knowledge, and when a person, say the doctor, is recommending chemo, you want to say, okay, let's look at the data with your type of cancer, with the staging and with a number or the type, and let's see what the data is on large numbers of people using this methodology of treatment and how much extended lifespan they get. And then people can make an educated decision. We always say, okay, well, what does the data show on this? But most of them just go straight forward to doing whatever is conventional, and they don't really look at what the data shows or what's best for them.

Nathan Crane:

You talked a lot about what we should not be eating. You talked a lot about what we should be eating. People want to go deeper and actually learn how to eat, and learn more about this subject. You have a lot of great books and resources, obviously, but what would you say is your number one or number two books people should read if they have cancer or they're trying to prevent or reverse cancer?



Dr. Joel Fuhrman

Dr. Joel Fuhrman:

I really think that my latest book, "Eat For Life," because it is most recently written. It has the most great examples of people with great success stories who got rid of cancer. But also it gives the anti-cancer portfolio. Certainly my book, "Super Immunity" is an earlier book that is another New York Times Bestseller. So, it would be one of those two books. I certainly recommend my most recent book, "Eat For Life." Because whenever you have the updated research and the more support, it's like it becomes a reference tool.

And you can teach a college class with that book with more than 1,000 medical references. And people can do their homework, and they can go and pull the references. And they can see exactly all the years of work and research that went into the book so it's not just a person, why are you believing what this person says? You know. The exhaustive amount of research, the cumulative evidence, not just using one study to support a position, but using 100 studies to support a position, seeing where the preponderance of evidence shows, and teaching people how to be able to read studies, and give studies more credence versus less credence. So, otherwise you can just believe what anybody says. There is really enough data and you know how to interpret the data.

Nathan Crane:

So, the books are a great place for people. A great resource to start diving in deeper. Obviously, if you're very serious about this change in your own life, you can go to the Eat To Live Retreat and learn hands-on from Dr. Fuhrman and his team. Get deeper education, understanding, actually learn how to cook and make your meals in a way that is following a nutritarian diet. I know just how hands-on and extensive, comprehensive that whole program is when people come and stay at your retreat for weeks or even months at a time. Totally changing their lives, right? So, I just want to mention that to people because that option is available for you. You don't have to go to some clinic in Mexico or Germany looking for what you really want in this regard. He's right in San Diego. So, check out the Eat To Live Retreat.

Dr. Joel Fuhrman:

Right here, right outside the window where you can see the beautiful mountains and how beautiful it is here. I'm very lucky to be able to have a positive effect on



Dr. Joel Fuhrman

people's lives and really show them that eating healthfully is fun and delicious. And to watch people get well is so rewarding, and I've been really blessed with having such a rewarding career to be able to work with people and help them, and give them information that really can transform their lives permanently.

Nathan Crane:

Well, I have to say, I've been studying and researching, and experimenting with diet, nutrition, natural health, healing, lifestyle, etcetera for over 15 years now. And, I've studied most nutritional experts out there and have done hundreds of interviews. There is a lot of good people out there and there is a lot of misinformation out there as well. And I have to say, you are the number one person I recommend to anybody nowadays if you want to learn about nutrition for health, and healing and longevity. I've studied dozens and dozens of the world-leading experts, learned from them directly, interviewed them, etcetera. I want to say thank you so much for the amazing work you do. I feel honored to get to spend this 45 minutes with you because I learn something new with the incredible wisdom, experience and research that you share with everyone. You're truly changing people's lives for the better. So, thank you.

Dr. Joel Fuhrman:

You're welcome. Best of health, of course, to everybody.

Nathan Crane:

And, I want to thank all of you for tuning in to the Global Cancer Symposium. Make sure to share this with anyone who needs this life-changing information. Make sure to visit www.DrFuhrman.com. You can learn more about working with him, attending his Eat To Live Retreat, and obviously pick up a copy of his books. Also, take a look at www.HealthandHealingClub.com. You can learn more about the global membership dedicated to helping people get and stay healthy. Again, I'm Nathan Crane. I wish you ultimate health and happiness. Take care.



Dr. Nathan Goodyear



www.AnOasisofHealing.com

Docēre rāphè: Docēre is Latin for doctor which is translated, teacher. Rāphè is Hebrew for physician which is translated, healer. Dr. Goodyear’s passion for Wellness began with his own 100-pound post-college football career weight loss. Dr. Goodyear is dedicated to disease prevention, disease resolution, and to the Wellness Lifestyle through a solution-based, Integrative Medicine approach founded in science. Dr. Goodyear received his Bachelor of Arts from Louisiana Tech University and his Doctor of Medicine from LSU Health Sciences Center. He is Board Certified in Obstetrics and Gynecology and served as the Chief Resident in Obstetrics and Gynecology at the University of Tennessee. Dr. Goodyear has practiced Integrative Medicine since 2006. Dr. Goodyear is a Fellow in Functional and Regenerative Medicine and served on the board of the American Functional Medicine Association. Dr. Goodyear is licensed by the Arizona Homeopathic and Integrative Medical Board in the State of Arizona. Dr. Goodyear is a published author, Man Boob Nation—an Integrative medicine approach to low Testosterone published in 2014, and Total Testosterone Transformation published in 2017. Dr. Goodyear has spoken across the country on various topics in Wellness Medicine. Dr. Goodyear’s passion is to bridge the science of Wellness medicine to the clinical application of Wellness medicine to restore medicine to its original purpose of teaching the body how to heal—Docēre rāphè.



Dr. Nathan Goodyear

Nathan Crane:

Dr. Nathan Goodyear's passion for wellness began with his own 100-pound, post-college football career weight loss. He lost a hundred pounds after college football. That is huge. Dr. Goodyear is dedicated to disease prevention, disease resolution, and to the wellness lifestyle through a solution-based integrative medicine approach founded in science. Dr. Goodyear received his Bachelor of Arts from Louisiana Tech, and his Doctor of Medicine from LSU Health Sciences Center. He is board certified in obstetrics and gynecology and served as the chief resident in obstetrics and gynecology at the University of Tennessee.

Dr. Goodyear has practiced integrative medicine since 2006, and is a Fellow in functional and regenerative medicine. He served on the board of the American Functional Medicine Association. Dr. Goodyear is licensed by the Arizona Homeopathic and the Integrative Medical Board in Arizona. He is also the medical director at An Oasis of Healing in Mesa, Arizona. Dr. Thomas Lodi, who is in Thailand most of the time, is also a part of this symposium. Make sure you go check out that interview right after this one. Or if you already did, I'm glad you're reading through this one as well. You can find Dr. Goodyear at www.AnOasisofHealing.com. Dr. Goodyear, thank you so much for joining us.

Dr. Nathan Goodyear:

Thank you, Nathan. Thank you for what you do.

Nathan Crane:

It's my pleasure and my honor to have you here with such a prolific background of experience in science and integrative medicine, and functional medicine. I think what you're going to share with us today is going to be really helpful on a lot of fronts. I'd love to dive right in. Based on all your years of training in disease prevention specifically, what have you found to be some of the top causes of cancer? We're talking about prevention. We need to know what we are preventing. Cancer is an end result, right? It is a symptom if you will. So, what causes that?

Dr. Nathan Goodyear:

Well, if you look at everything from a cancer perspective, you know up until



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about 20 years ago, it was a purely somatic genetic mutation disease. So, basically you're born the cards you're dealt. It's like you're born to be 6'2". You're born to be 4'8". Cancer is the cards you're dealt. Now, what we didn't recognize at that point was that our DNA, our genetic code, was influenceable. It was malleable. Now, you can't change the genetic code per se, instantly, but you can change the genetic expression instantly.

And so things that were born out through history about, you know, diet, exercise, activity, weight. All of these, quote, "lifestyle, manners" that we grouped together as lifestyle changes. What we've discovered here recently is, what they're really doing is they're working in changing the genetic expression. So, in terms of preventing diseases, you acutely said, is that a lot of the same therapies that we'll use in the treatment of cancer. Obviously more aggressively, more targeted. We're going to use them to prevent cancer. Perfect example is, there was a study from earlier this year, looking at three groups of people and their basal body temperature. First was around, it was Civil War veterans, then it was the mid '70's, and then it was 2000's. And what they found in these three people groups, amazingly enough, they actually found some thermometers back from that post-Civil War era. And they were able to calibrate them and make sure they were accurate.

But what they were able to find was that in these three groups, the basal body temperature of the adults decreased. Decreased predictably, consistently. But, decrease from 98.6 degrees in the post Civil War to 98 degrees in the year 2000. So, when we talk about 98.6 degrees, the basal body temperature average, well, that was correct 150 years ago. It's not today. So basically, lifestyle changes and all these metabolic things that integrative medicine talks about, they are the driving forces to prevent chronic disease like cancer. They're also the driving forces to prevent other diseases like diabetes, hypertension, cardiovascular disease. But, they are also the means to attack, to work to heal the body at the same time.

So, lifestyle choices like nutrition, like exercise, like stress, like hormones, thyroid. Everybody talks about thyroid. But, what I'm talking about here is how it actually generates heat through the mitochondria. And that's probably what we've seen over that 150 years is that we've seen a decline in the basal heat production. And out of that, we've seen an inverse increase in things like cancer. And in many cases, for example mistletoe. Mistletoe is a treatment, it's been around for 100 years. Standard of care in Europe, not so much here in the US, they just haven't read the science yet.



Dr. Nathan Goodyear

That's all. But, that therapy is a therapy born out of generating warmth. Out of generating heat. When you look at what I think is one of the many very important answers to cancer prevention and cancer treatment, is the immune system. And one of the cardinal symptoms of the immune system and its effects is heat production. So, lifestyle changes that we just discount and look at them as it relates to being overweight or not, those are the same ways that we can attack the prevention of cancer, but also the treatment of cancer.

Nathan Crane:

So, what you're saying is, this is the first I've actually heard this, which is pretty mind blowing. Is that our average body temperature, since after, you said the Civil War?

Dr. Nathan Goodyear:

Yeah, it was Civil War veterans.

Nathan Crane:

It has decreased 0.6% and that's directly associated with an increase in cancer risk.

Dr. Nathan Goodyear:

Well, it's decreased points, 0.6 degrees but it's a consistent decline. But, when you look over that same timeframe, what you see is an inverse increase in diseases like cancer. And what we know about cancer is that it's going to be associated with a lower metabolic rate. It's going to be associated with a lower energy output. I mean, there's many different causes of cancer that have to come together, like a 5 billion piece jigsaw puzzle. But one of those is metabolic dysfunction. And out of that, and mitochondria, you'll get lower energy and heat output.

Nathan Crane:

So, I want to go into more depth in that in a moment. I want to go back to what you said earlier about genetic expression because this is such an important thing, I think, for people to understand. Because you have these oncologists...



Dr. Nathan Goodyear

that a woman has a BRCA1 gene and they're saying, "Cut off your breasts to prevent cancer," right? Or they're saying, "Oh, you know what? You have a cancer gene, you're going to get cancer." And people have this thought that, "Oh, it's because it's in my family. Oh, it's because it's genetic." But what the evidence actually shows, at least what I've found, and I love for you to expand on this, and correct me if I'm wrong, but actually most cancer is, you know, less than 3% genetic. Meaning that 97% of cancer can all be related to lifestyle choices and lifestyle habits.

Dr. Nathan Goodyear:

I think the good way to look at it is this. It's an assessment of how your genetic code and the expression of it is interacting with the environment that's in your body. When you talk about lifestyle. What you're really talking about is affecting the environment in your body. You know, when we talk about toxins, and toxicants we're talking about how they're changing the environment of the body. And in the changing of the environment in the body, with that context of a small percentage that is actually genetic mutation. Somatic. But, that'll vary from cancer type to cancer type. Some of the earlier manifestation of cancer.

Maybe a childhood cancer or a teenage cancer. You have a little bit more of a stronger genetic component. But most middle-age and later adult cancer types, you're looking at actually an environmental, a terrain, a body change as a result of lifestyle over the years, that interacts and changes genetic expression. When you look at cancer, it is really interesting. Cancer is going to manipulate its environment for its own survival. It's like a parasite in a way. It behaves like it. It's like a virus in a way. It behaves like it. But, what it's doing is, it's taking its environment and using its environment to feed itself and support its own survival. And, ways that it will do that, are through changing genetic expression.

So getting back to prevention. Diet. We all know that, hey, eat your vegetables. There's a study out there that they actually looked at what's called microRNA. So it's a small fraction of RNA which comes from DNA. They followed that from broccoli through the gastrointestinal tract and were able to show that this actually gets into the bloodstream and turns on and off certain estrogen metabolism genes. So don't be surprised if you eat Twinkies, and drink Cokes, and ding-dongs, if you start to look and feel like one. We talk about food being, you know, soul food, really, it's DNA food, but it is expression of your DNA. So, when you eat greens, and we do a plant-based diet here in An Oasis of Healing, when you eat a plant-based diet, it's



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a love language with your genetic expression. It's what it really is. And so it is intimate to the prevention of cancer and any other chronic diseases of aging. But, it's also intimate and necessary in the treatment.

Nathan Crane:

Well, we were emailing back and forth a little bit about today's interview ahead of time. And one of your responses to something I'd mentioned was, "Immune system, immune system, immune system," right? And that's both in regards to people who have cancer, as well as people wanting to prevent cancer. And you talked about plant-based diet. Can you talk a little bit more about how the immune system plays its role in the prevention of cancer and how the plant-based diet supports that?

Dr. Nathan Goodyear:

When it comes to cancer, the way conventional medicine, and I'm conventionally trained, and it's really interesting when you look through the science. The science is what drives us practitioners to the natural. I mean, the science is what drives us there. It's not that we go there and the science catches up with us. But when you look at what the body does. The body is created to heal itself. The body is created to protect itself. And, one of the key components of the body's ability to promote its survival is the immune system.

The immune system is designed to protect the body against foreign invaders, bacteria, viruses, parasites. But it is also designed to protect us against domestic enemies. And that is things like cancer. So, when you look at the immune system, most people probably heard that, "Well, everybody has cancer cells." Well, why do we not all have cancer? Well, it's because our immune system is identifying, is tagging these cells, and it's eliminating them. When cancer develops, the problem is that cancer co-ops that defense mechanism, and uses it to support itself. It actually turns the immune system on itself so that it can actually survive, thrive, and spread. It is key to the prevention.

And it is key to the elimination. I tell people that the best answer for cancer is never get it. Never get it. Lifestyle changes, all of these things that we talk about are important and key to that. But, even in taking those steps, we see people all the time come in and they go, "I did all these things. I've eaten healthy. . I've exercised. But I had this stress, I had this, I had that." You can't live in a bubble. It is life. The answer



Dr. Nathan Goodyear

there when you have cancer is the immune system. It's not chemotherapy. It is not surgery. It is not radiation. Now, you have a tumor that's impending on a life-vital organ, you have to do something, okay. But, the answer is the immune system in prevention and in the treatment of cancer.

Nathan Crane:

So, you mentioned already a little bit about the immune system's role in identifying, and targeting, and basically removing these cancer cells, right? It happens a lot through the lymphatic system. Also through our microbiome and so forth. We've done a really great talk with Dr. Tom as part of this series. I encourage people to go listen to "All About the Microbiome," and its role in immunity, and in helping to prevent and reverse cancer. But maybe you can talk a little bit more about how, and which plants, are more effective. All plants have some role. But, maybe in terms of a plant-based diet, what do you guys teach your patients there at the center to help the body basically do its natural function of eliminating these cancer cells.

Dr. Nathan Goodyear:

There's a lot of different plants. Plant-base therapies that can be used in diet. Obviously everybody focuses on things like curcumin, rightly so, first. It's a spice, actually been in an Ayurvedic medicine for thousands of years. It actually turns off inflammation but it does more than that. In cancer there is a very significant chronic inflammatory response that is turned on that never turns off. Inflammation is not bad, and I think that's really important. I think because so many people talk about inflammation and cancer, they get lost that inflammation is necessary. If you've ever had a paper cut, you understand why. But, curcumin comes in and really turns off this chronic, aberrant inflammatory process. So, there'll be this genetic coding called NF kappa B, gets turned on. Curcumin comes in there and turns that off. But then as cancer starts to establish itself, curcumin can actually be used as treatment. But as a prevention, it's key in controlling that chronic, and out of control inflammatory process. So it's great, great, great in prevention, but it's very effective in the treatment.

Nathan Crane:

How do you take it? Because I've heard that, if you've taken turmeric, for example, your body only absorbs often like 30% of the curcumin from the turmeric, is that accurate? And how do you have your patients take it?



Dr. Nathan Goodyear

Dr. Nathan Goodyear:

The bioavailability of turmeric is the source of curcumin. So, it's a root. Its bioavailability gastrointestinal is very poor just like vitamin C. Very poor. So, you want to dose it frequently. You want to dose it aggressively in dose. And typically if you can get a lipophilic form that will help.

Nathan Crane:

Like that liposomal technology, basically.

Dr. Nathan Goodyear:

Exactly. It helps. But, just like with vitamin C, what you have to do is you have to dose frequently. When you actually look at the studies, there's a lot of studies on curcumin, and its anti-cancer effects. But if you actually just take the dosing required, based on the studies, based on the weight. At one point in my career, I was giving people 32 capsules a day just of curcumin, eight grams a day. It is what the literature was showing was an effective treatment. So obviously there's limitations that the delivery method provides, so through the gastrointestinal system. So, what you can do there is just the best you can. What I tell people is definitely take curcumin supplements. If it's lipophilic, that's going to help. But, just put it on everything. You have a salad, just put curcumin all over it. So, for me, I just put it on everything that I eat. Everything.

Nathan Crane:

Tinctures as well? Because obviously if you overdo it on the capsules, you're loading your gut up with all the plant cellulose capsule stuff too, right? Which is not ideal.

Dr. Nathan Goodyear:

However you can get it in. And the frequency. That's the other thing with its poor absorption, and bioavailability. It's just the regular delivery.



Dr. Nathan Goodyear

Nathan Crane:

Like five times a day? Or what does that look like?

Dr. Nathan Goodyear:

When I was giving these patients 32 pills a day, boy, that upset their stomach quite a bit. I had them take them four times a day. Just so that they could get in. So they were taking eight capsules four times a day. I don't encourage people to do that. So, please don't get me wrong there, but it's trying to get it in at a frequency that you can tolerate. But yes, tinctures would be great, too.

Nathan Crane:

I have a powdered tea that I make in the morning. And it's just powdered organic turmeric. Put it in and then I've got a liposomal CBD, turmeric combination that's really powerful. I love what you're saying. Just as many different forms as you can. I take it and some capsules as well even though I'm reducing capsules just because I've been taking too many in general.

Dr. Nathan Goodyear:

That's why I tell people just put it on your food. Or put it in your nut milk in the morning. You know, nut milk in the morning, or in the afternoon. So lots of different ways that you can do that. I prefer people to eat their medicine.

Nathan Crane:

Yes. Can you talk more about that? Because often we find, you know, if we're trying to prevent cancer, or even someone who has cancer, it's like, we're often looking for that magic bullet. That one pill. That one treatment. That one thing. Though, diet and nutrition is a lifestyle change, right? It's like if you want to eat a plant-based diet, a vegan diet, a raw food diet, you have to learn how to do it. And how to change what you're eating, and also understand the underlying principles of what actually makes that diet healthy for you or not. Do you still have classes there with your patients?



Dr. Nathan Goodyear

Dr. Nathan Goodyear:

Oh, yes. Curcumin is just one of those. Obviously the cruciferous vegetables, the brussels sprouts, the broccolis. You know, these are a mainstay in our diet. Brazil nuts, selenium. People go, "Well, why the broccoli, why the Brussels sprouts?" Well, these greens turn off oncogenes. Oh, people go, "Oh, oncogenes, I think I've heard that." That is when many cases in cancer, through this morphology, and transformation that these cells will undergo, they will turn on these oncogenes. In many cases it is because it is an adaption to its environment that is within the body. So, things like broccoli, and brussels sprouts will turn these oncogenes off.

They will also turn on what are called tumor suppressor genes. Roughly 70% to 80% of cancers are p53 positive cancer types. Meaning, that's a tumor suppressor gene that gets turned off. But more than just interacting with the genetic expression which in and of itself is mind blowing that what we eat is actually telling our DNA to express something or not. It's actually looking at things like breast cancer, and colorectal cancer. It's interacting with the estrogen and hormone metabolism. I mean, everybody knows that as it relates to breast cancer. And they go, "Well, I'll go take a capsule of DEM, or Indole-3-carbinol."

And those are all great. But it's like, you know, it sure tastes a lot better if you just eat brussels sprouts. If you just eat broccoli, cabbage. Those are the vegetables that will give you what you get in that DEM, and Indole-3-carbinol, but it just tastes better. Now the problem then comes in, when you have cancer, your stomach can't hold enough broccoli, and Brussels sprouts to give you what you need. But if you're talking about it from prevention, oh, absolutely. That is the way to go. But it's paramount in the treatment. We just typically have to add more on top of that.

Nathan Crane:

And, you're doing that through fresh green juice, through IVs, through what other forms?

Dr. Nathan Goodyear:

Yes. We still have the courses that we do every morning. Interactive with our patients. We actually have them prepare some of their own food. Of course, nutrition is key. I talk to them about that. Our, naturopath talks about that. People in the kitchen.



Dr. Nathan Goodyear

do that. We do some green juice every day. We want them to do one to two quarts fresh, very important, fresh. And then what you put in there is very important. And then where we identify based on testing, that they need extra support specific to their cancer type. Then that's where we'll come in with very specific supplements, herbal extracts, tinctures, to really take it to that next level. But yes, we do IVs as well with those where we need to, and where indicated, to just take it to a whole other level.

Nathan Crane:

So, what does the science say about some of the most toxic foods that people should avoid if they want to prevent cancer?

Dr. Nathan Goodyear:

I think people inherently know. They know that if they drive 120 miles an hour on a windy road, that's not a good, smart move when it's snowing.

Nathan Crane:

Let alone, if it's not snowing.

Dr. Nathan Goodyear:

Yes, that's right. Yes. Because we sure don't get that here. But, people inherently know the foods that are healthy and those that are not. It's interesting, we have a fast-food hamburger sitting in our didactic, so in our teaching room for our patients where they have classes every morning. And it's been there for several weeks now.

Nathan Crane:

Geez.

Dr. Nathan Goodyear:

And so we're going to leave it there as long as it needs to stay there before it starts to degrade. But, you can see the cheese, you can see the bread, you can see the meat. It hasn't changed in two weeks.



Dr. Nathan Goodyear

Nathan Crane:

Oh my gosh. That is scary.

Dr. Nathan Goodyear:

But that's not even food, okay. But if it grows out of the ground. If it's from the earth. Then it's something that's healthy. Our bodies were designed to interact with this historically, epigenetically, our jaw structure, all of this is born out of our surrounding environment. Not just inside but outside. So, if it grows out of the ground. If it is from the earth, that's something that we need to be eating. And the more plant-based we do, the better. Things like, you know, like I mentioned earlier, Twinkies, Ding Dongs, Cokes, look throughout nature. What do they drink other than water, and milk at birth? That's it. What do we drink? No water. Coke, tea.

It's everything else. So, we are a product of nature just as they are a product of nature. And so looking at us and saying, "Well, we can not drink water, and drink Coke, and have wine every night," and think that that's not going to affect us, we're just playing ourself for a fool. So look at what animals do. Now, we're not completely plant-based but for the treatment of cancer I advocate that. And I advocated for the prevention of it as well. Eat a plant based diet. The foods that are inerrant that are going to lead to disease and cancer are going to be your fast foods. It's going to be your heavy red meat production intake. It's going to be the sugars, the high simple carbohydrates, the trans fats. Everything that we get through the TV. Through the fast food restaurant. That's what we shouldn't be eating.

Nathan Crane:

I grew up on steak and potatoes in Bozeman Montana. We'd go hunting and fishing. And from that to actually eating a lot of fast food growing up as well. My mom cooked from time to time but then a lot of times we'd be eating at McDonald's and Burger King, and Taco Bell for lunch every day. And all of this fake processed food which over time made me quite sick and unhealthy. And it was right around the time my daughter was born in 2010 that we decided to go to 100% plant-based diet. We did 100% raw food for a year as well. Because all the data, all the research and all my own internal experimentation. And my own intuition, and reasoning, and so forth said, "Look, this is the best diet for living long and healthy."



Dr. Nathan Goodyear

We're not a hundred percent raw anymore but we've been a hundred percent plant-based, primarily vegan. And you know, my daughter is 10, my son is 5, and my wife. All of us have been plant-based since that time, and are healthier, and feel better, sleep better, digestion issues healed, all kinds of things. But, someone who grew up in Montana on meat and potatoes, you know, I hear this argument for paleo, this argument for Hunter-Gatherer, this argument for, "Yeah, but we're supposed to eat meat because our ancestors ate meat." And, maybe you can talk a little bit more about that, and what the science tells us about eating meat.

Dr. Nathan Goodyear:

Well, it's interesting they say our ancestors ate meat. And they did. Not denying that. But, they didn't sit on their backside for 8 to 10 hours a day. They slept when the sun went down. They woke up and worked very hard when the sun came up. Yes, they had stress, but like a gazelle running from a lion, they either became dinner, or they got away. So the stress was short. It was intense but it went away.

So, you can't look at that and say, "Well, they did this." Well, I'm sorry, the environment we live in is different. They didn't deal with the environmental toxicants we have. So, you can't say, "Well, they did this. So, thus, we should be able to do this." We're having to counter all the other things that we deal with on a day-to-day basis. You don't sleep well, your melatonin doesn't normalize, your immune system is compromised. Your cancer rate goes up. Studies on nurses working night shifts, flight attendants, and pilots flying transatlantic flights. We know that that is a key cancer-causing agent.

Not sleeping at night. Low melatonin. That's why we do high dose melatonin as a part of our therapies. Well, when the sun went down for them, they would sleep. So they weren't dealing with that context. So, we're trying to counteract all these other changes in our environment. And that's really what the plant base, and you're exactly right about the raw. And that's what we do for our patients when they come in here. That plant-based raw diet is to really, very quickly to use these therapies as really medicine. To counteract a dysfunctional body. So we have to push very hard.

We can't just say, "Well, let's just reduce our red meat." No, we have to push hard in our patients that come in here. So the plant-based diet is key, the raw is key. But it has to be taken in the context of the whole of the environment. You know, they weren't 350 pounds. You're talking about food. Talk about fast food in high school.



Dr. Nathan Goodyear

I can remember, I'd go with three of my offensive line buddies. We'd go to McDonald's, I hope I could say that, and they had 99 cent Big Macs. And this was when I was 16. Young and stupid. We'd buy four. We downed those puppies in about 15 minutes.

Nathan Crane:

And then you were sick for the next two hours.

Dr. Nathan Goodyear:

Oh, I didn't know what I was doing to my body. But, when I got through with football, because I played at about 290. Two of the guys I played football with, died within seven years from massive heart attacks. And so I knew that I had to make a change there. And the move to the plant-based diet was natural. Honestly, it was what I was craving. You know, people think that cravings have no bearing on your health status. No, your body is going to make you go crave the things that it needs. So, yes. The raw food, the plant-based diet is interacting, and countering all that other crap that we're dealing with our environment that they didn't have to deal with. So the argument is correct, but it's out of context.

Nathan Crane:

I love how you presented that. And, it made me think of a couple of things as well. If you look at a lot of our ancestral communities that date back thousands, tens of thousands of years. You know, a lot of them, at least what our science is saying today, is many of them didn't live past 35, 45 years old anyway. So that's one take-away, right? That I think we should learn something from. And, if you were Hunter-Gatherer at the time, there's not enough hunting, I think, to go around where you're going to be eating lots, and lots of meat all day long, every day, right? Because it's really hard to hunt animals that run longer, and faster than you do. Whereas, gathering, and even now, there's a book that Gregg Braden wrote that I read a few years ago. I believe it's called "Deep Truth."

And there's a scientific discovery in there of an ancient civilization that was newly found in the last, I believe 15 years potentially, that dates back somewhere around 15 or 17,000 years old. It was really fascinating about this that has made me think more about, and confirm more about, yes, plant-based diet is the ideal diet for human beings. They never found a single weapon, or hunting tool of any kind in this



Dr. Nathan Goodyear

quite advanced civilization that had built their own lodgings. And they believed even were growing food and things like that. Agrarian. 15 or 17,000 years ago. Which they believed until now our historians and scientists didn't believe that people didn't become agrarian and grew their own food. And they were a Hunter-Gatherer until much later than that. So anyway, that's just really, I think, just another confirmation, validity to the point that you're sharing.

Dr. Nathan Goodyear:

History will teach us so much if we'll listen to it. I mean, it really does. You brought up an interesting visualization. I was thinking of just like the average adult male today chasing a gazelle, you know, trying to hunt it, and I was like, "Yes, our ancestors probably would have done a much better job. We would all end up with heart attacks." But they also did a lot of fasting. And that's also a big part of what we do here. I mean, if there's a therapy that's more effective than fasting, I'm not aware of it. But they did it because food sources weren't available. There were famines, there were regular fasting just because of crops, because of not being able to access game that they were hunting, or whatever.

So what we try to do also is reincorporate that component of diet into their daily living. Now we'll use it very aggressively as therapy as well. I mean, for days and days on end. But you can't really do anything else there. If that's all you're doing. And I wouldn't advocate people to do water fasting without a physician guidance beyond just a day. Because it can be incredibly hard on the body. But one of the things that they did, not intentionally, was that fasting. And that also too is incredibly powerful in helping the body to clean itself up. Scavenger, get rid of all the junk, and then renew itself. And it actually has a name called autophagy. This is where the body just goes in and says, "I just don't need this anymore. I'm going to clean it up and get rid of it." So it's like a good spring cleaning every week or so. And that is critical to prevention and the treatment of cancer.

Nathan Crane:

Yes. I was going to ask you, what does an ideal fasting regimen look like for somebody wanting to prevent cancer?



Dr. Nathan Goodyear

Dr. Nathan Goodyear:

There's a lot of different ways to do that. If you've never been exposed to the process of cancer, and I hope nobody wants to be exposed to that but be exposed to the process of fasting. I'd recommend people start off with just kind of like intermittent fasting. So, taking about six hours of the day to put your eating in to 12:00 to 6:00. And then take the other remaining hours of the day and just drink water. So I think that's a good way for people to start off and experience it. If you can't do the six hours, you know, an 18 hour fast. Then do 10. Just find your happy spot and just slowly build your way up. Many different cultures, fasting's already a part of their environment. And so I can tell them, "Hey, do water fasting 24 hours, once a week." No problem. But if you take the typical American and say, "I want you to do water fasting one day a week," they're going to go, "Wow, you mean don't eat anything?" It's like, "Yeah, just drink water." They're like, "Is that healthy?" Oh, you bet.

I recommend people start off in a prevention standpoint if they're not really used to that. Use it in the intermittent fasting and then build yourself up to a one day of fast a week. Cultures have done this for thousands of years. They would water fast regularly as a part of religious ceremonies. And so build yourself to intermittent fasting to once a once a week, one day a week. And then build into once every three to six months. We can do a three-day water fast. Obviously I think it's important to have a doctor involved and make sure there's no unknown issues in your body. Kidney dysfunction, etcetera. But you can really be doing some regular spring cleaning throughout your body by just doing that alone.

Nathan Crane:

Intermittent fasting is huge, right? And I think that the data is like, 12 to 14 hours is kind of like minimum to start really getting the detoxification benefits and some of the ketosis benefits and so forth, right? But, as you said, that can be really hard for people at first to go 12, or 14, or 16 hours. But, try it. As you're saying, just start doing it. I've been doing fasting and cleansing for over 10 years. Well, 12, 13 years, 14 years. I've done all kinds of cleanses and fasts up to 21 days. And one of my favorite things, I'd love to hear your thoughts on this is, to go for a week or two weeks, kind of 10 days I find is like a sweet spot, but I've gone up to three weeks of like green juice feasting, right? So, you're fasting from everything else. But you're loading your body.



Dr. Nathan Goodyear

Dr. Nathan Goodyear:

Have you been a patient here?

Nathan Crane:

I've been a student of Dr. Lodi and a student there. I've actually visited your amazing healing center and I've learned a lot. So, I love juice feasting, green juice feasting.

Dr. Nathan Goodyear:

Yes, juicing is incredible. First of all, if your bowels tend towards constipation, it's going to definitely help take care of that. It's going to basically get the lead out, if you will. Yes, I think mixing in the juicing with the fasting. Oh, that is like, you know, people want to take vitamins. That is like the ultimate vitamin. Not just for your physical body but for your soul. I mean, I drink a quart every day, a quart every day.

Nathan Crane:

That is fresh green juice?

Dr. Nathan Goodyear:

Fresh green juice.

Nathan Crane:

What's one of your favorite recipes?

Dr. Nathan Goodyear:

Well, of course we have our recipe on our website. So, go to our website and check it out. Little shameless plug there. I like to, my wife is from Louisiana, so I like to spice things up a little bit. So, I like to take that and add some jalapenos to it. So that's my favorite recipe. We got the little green apples, the cucumbers, the kale, spinach. And then I like to throw some jalapenos in that. Sometimes I like to add some ginger



Dr. Nathan Goodyear

in there. I like things spicy. So, that's kind of my favorite recipe.

Nathan Crane:

So, fresh green juice every day. Intermittent fasting at least once a week. Work up to a one day water fast or green juice fast every week. These are all great. And the other prevention protocol you've shared is plant-based diet, right? Adding more and more fresh plants to your diet. You shared a lot about turmeric, curcumin, adding that in higher doses. As we wrap up here what other, maybe one or two, top prevention protocols would you recommend to people?

Dr. Nathan Goodyear:

Yes. These are going to sound, "Oh yeah, I've heard that," but it's very important. Cancer is a state of dysfunction but also a state of deficiencies. Vitamin A, vitamin D, vitamin C. These three very powerful vitamins are always deficient in cancer. Always. And so what I would say is make sure that your vitamin A, vitamin D, and vitamin C levels are adequately supported in your diet and your lifestyle. So, obviously, vitamin D, get out and get in the sun. You know. Talking about our ancestors, my father-in-law is 88 years old. He doesn't have skin cancer and he worked outside every day of his life. He never had skin cancer. So, we need to expose ourselves to the sun. But, we also have to recognize that there's a limit and a time that we need to protect ourselves against that.

So, vitamin D, vitamin A, you get that in your diet. So, get that in your diet through the green and non-green vegetables. Obviously, you eat a plant-based diet? You're going to get all these vitamins there. You're going to get it by exposure to the sun. And in vitamin C, cancer is essentially metabolic scurvy. Your vitamin C levels are going to be depleted, and that is going to compromise your immune system just like with vitamin D will. It's really interesting if you look at the COVID issue, vitamin D, and vitamin C have both been shown to be effective in counteracting the inflammatory response in the cytokine storm that happens. That same process happens in cancer.

That same immune burst happens in cancer. So, vitamin D, vitamin C are critical. Obviously, vitamin C, you get that through your diet because we don't make vitamin C. Our bodies cannot make it. We lack an enzyme to do that. So, we have to eat that in our diet. A plant plant-based diet. Some fruits are going to help us to achieve that.



Dr. Nathan Goodyear

Nathan Crane:

Well, that's the thing. You can't get those essential vitamins that you need from animal products, right? You don't get them from meat. You have to get them from plants.

Dr. Nathan Goodyear:

That's right. That's the foundation. If you look at it, the plant, it's like the foundation of a home. And our body is the two story home. If you have a weak foundation, it doesn't matter how beautiful that kitchen or second story balcony is. It's going to collapse. The foundation is that plant based diet. That's the foundation. That's where all of these critical minerals, vitamins, and we haven't even talked about zinc and selenium. How they are what build our immune system, keep it strong so that our bodies can fight off enemies, both foreign and domestic.

Nathan Crane:

Well, Dr. Goodyear, I just want to say thank you so much for sharing all this great knowledge and wisdom for us. Thank you for the great work you do. I do encourage people to check out An Oasis Of Healing. It is an incredible center. If you're looking for a truly integrative approach to not only transform your lifestyle habits, but maybe help a loved one through cancer. Look them up. www.AnOasisof-Healing.com. Dr. Goodyear, thank you so much. Appreciate all that you shared with us here today.

Dr. Nathan Goodyear:

You bet. Thank you for the opportunity, Nathan.

Nathan Crane:

My pleasure. I want to thank all of you for tuning in here to the Global Cancer Symposium. Make sure to share this interview with anyone who needs this life-changing information. Make sure to visit www.AnOasisofHealing.com. You can learn more about working with Dr. Goodyear and his team there in Arizona. Also, I encourage you to visit www.HealthandHealingClub.com to join the global membership dedicated to helping you get and stay healthy. Again, I'm Nathan Crane. I wish you ultimate health and happiness. Take care.



Dr. Thomas Lodi



www.AnOasisofHealing.com

Thomas Louis Vivante Lodi, MD, MD(H), CNS Dr. Thomas Lodi has been practicing medicine for over 34 years. After graduating from the University of Hawaii, School of Medicine in 1985 Dr. Lodi served as a visiting Clinical Fellow at Columbia University College of Physicians and Surgeons in New York City where he also underwent training in Internal Medicine. For the first ten years of his medical career, he worked as an internist, urgent care physician, and intensivist in ICU and CCU departments of various hospitals. In New York (2002), he established one of the first integrative oncology centers and in 2005, founded An Oasis of Healing in Arizona, which is still active. He has been licensed as a Medical Doctor (MD) in the state of New York since 1987 and as a Homeopathic Medical Doctor MD(H) in the State of Arizona since 2002.

Dr. Lodi is a founding member of the International Organization of Integrative Cancer Physicians (IOICP), an active-allied member of the American Society of Clinical Oncology (ASCO), a certified instructor in Insulin Potentiation Therapy (IPT), oxidative and chelation therapies. Since 2012, he has founded and served as the Chief Integrative Oncology Consultant for several cancer centers in Bangkok and Phuket, Thailand, Malaysia, India, Vietnam and Dubai. Dr Lodi founded and is CEO of the Institute of Integrative Oncology in Singapore in 2014 and is currently the founding member and CEO of Oasis International in Phuket, Thailand.



Dr. Thomas Lodi

Nathan Crane:

Dr. Thomas Lodi has been practicing medicine for over 34 years now. For the first ten years of his medical career, he worked as an internist, urgent care physician, and intensivist in ICU and CCU departments of various hospitals in New York. In 2002 he established one of the first integrative oncology centers, and in 2005, founded An Oasis of Healing in Arizona, which is still active today. I interviewed the current medical director there in Arizona, Dr. Nathan Goodyear. As part of this series, we talked about the most important aspects of the cancer healing diet they're implementing there. You should go listen to that interview right after this one as well. Their website is www.AnOasisofHealing.com.

Dr. Lodi has been licensed as a medical doctor in the state of New York since 1987, and has been a homeopathic medical doctor in the state of Arizona since 2002. Dr. Lodi is a founding member of the International Organization of Integrative Cancer Physicians, and an active allied member of The American Society of Clinical Oncology. Since 2012, he founded and served as the chief integrative oncology consultant for several cancer centers in Bangkok, Thailand, Malaysia, India, Vietnam, and Dubai, and is currently the founding member and CEO of Oasis International in Phuket, Thailand, which is actually where he is joining us from.

Dr. Lodi's work is so instrumental in integrative care for helping people with cancer so let's dive in. The most simple but profound question I think I can start with is, what actually is cancer?

Dr. Thomas Lodi:

That is really a great question. I think once people understand what it is, some of the mystery, of course, goes away. We have to understand that a lot of fear is just based on ignorance. So, knowledge brings the knowledge, shines the light on things, and you understand it. Cancer is actually a very simple natural homeostatic. In biology, homeostasis is the processes and qualities of an organism to maintain its functional integrity no matter what. Like, you get pushed, you have a biomechanical homeostasis. Your leg goes out to hold you up, so you don't fall. Or you are eating too many cheeseburgers and pizzas and your arteries are getting clogged up, but you know you need to keep the flow of blood to your heart and your brain. So, how do you maintain flow with clogged up arteries? You increase the pressure. You go to the doctor and you have high blood pressure. He says, no, no, no, no. The problem is the pizzas and the kabobs and things like that. The same thing with diabetes and cancer.



Dr. Thomas Lodi

Nathan Crane:

Right. I just want to mention that you go to the doctor and they say, “you’ve got high blood pressure. We need to give you some medication to lower your blood pressure.” And what you’re saying is... no, that’s not what you’re trying to do. You’re not trying to lower the blood pressure. You’re trying to get rid of the things that are causing your high blood pressure.

Dr. Thomas Lodi:

Exactly. Because what we’re identifying here, what we’re focusing on, and this is very important, we need to eliminate the myth of disease. There’s no such thing as an entity called a disease that gets into you. Like you have diabetes, where is it? You know, is it in my elbow? Did I catch it? In other words, what I’m saying is that the body is always, and it’s designed, and not just our body, dogs’ bodies, cats’ bodies, elephants’ bodies, trees, are designed to maintain functional integrity, regardless of what happens. It’s called adaptation. It’s called homeostasis. So, if I’m eating all this stuff, and my arteries are clogged up, I need to keep the blood flow. My body will naturally increase the blood pressure to keep me alive right now. That’s not a long-term solution, but it’s the only thing that could be done at that time.

If I go to a doctor and I take drugs, and those drugs actually dilate my arteries artificially so that the blood pressure goes down, what’s happening now? I’m not getting the blood flow to where my body intended it to go so my brain is not getting it. So, I have a low-level hypoxia or low oxygen. I have a low oxygen level in my heart all over. And what we know now about people that have been on antihypertensives for 20, 30, 40 years now, is that they have a higher incidence of cancer. Why? Because they’re continually, even though it’s low-level hypoxia right around the body. In other words, whatever symptoms you have, your body is already adapting to a situation. You need to just change the situation and then your body no longer needs to do that adaptive dance. It doesn’t have to do the high blood pressure dance. The cancer dance. So, what is cancer?

The fundamental process that all cells need to do, whether they’re bacteria or elephants is produce energy. In fact, 50% of the energy that our cells produce are required just to keep the cell function. We have what are called, sodium potassium gates, and we have all these other things that keep the cells intact. Now, if the cells are going to do any work, and then have to adapt to something, it is going to need



Dr. Thomas Lodi

more energy. So, energy is the fundamental requirement. It's paramount. In our cells we're not like bacteria, but in our cells and all the higher organisms, there are these little organelles inside the cells called mitochondria. They produce the energy. They grab glucose and they grab oxygen, six oxygens, one glucose, and they produce a total net of about 36 to 38 ATP. ATP is the currency of energy. And you can imagine, we have 100's of 1000's of these little mitochondria in ourselves. It depends on the organ. Like the heart needs more to cause its beating, right? In one day, let's say, you thought you did nothing all day. You sat on the couch all day. Your heart was beating 100,000 times. That's pretty amazing, right?

Nathan Crane:

100,000 times a day. Interesting. About that as well, I'm a CrossFit athlete. And I use something that kind of tracks my heart rate and my rest, my recovery, my sleep, my calorie expenditure, all that stuff. And I can be on a total rest day on a Sunday and do nothing. Just lay around all day and my body is still burning over 2,000 to 2,500 calories in a day and I've done nothing, right?

Dr. Thomas Lodi:

Right.

Nathan Crane:

The body is expending all that energy, just processing, regenerating, doing all these things that you're talking about.

Dr. Thomas Lodi:

Well, I'm a 10 with 36 zeros after it. That's a big number, right? That's the number of chemical reactions that are going inside of our bodies every second, every second. So, if you think about that and then you realize there is like 60 to 100 trillion cells, you realize that this is an incredible thing. The question I ask is, who is running the show? Certainly not me. You know, if I had to be responsible for my digestion after eating, I'd be stuck in the room all day, just focusing every ounce of energy and thought trying to digest food. It's just not possible.



Dr. Thomas Lodi

Nathan Crane:

Yeah. And we'd be dead if we had to be responsible for any function in our body.

Dr. Thomas Lodi:

Right. Can't do it. It's pretty amazing. Now, these mitochondria, because they use oxygen, because oxygen is necessary to get this high yield of energy from the glucose that you get. What are called, reactive oxygen species. They break up and they're called free radicals. Well, we, in the process of getting the energy, those free radicals are necessary. They're useful. The electrons from those free radicals are used and that's how we gather energy. But what happens is, they begin to accumulate and they also produce damage. It is kind of like a double-edged sword. It is like oxygen, really, really important at 21%.

But you put a mask of oxygen on at 100% and within three weeks you've got emphysema. Without it you don't live for five minutes. With too much of it you're going to get really sick. I'm now talking specifically about oxygen. In the mitochondria you wind up getting those reactive oxygen species which are like free radicals. Now because of that, those mitochondria are the most vulnerable to whatever kind of unfortunate situation happens. Now, if you consider our lifestyles and you can't say what caused my cancer, well, it's not one thing. It is everything. It's diet. It is the time you go to bed. It is the amount you exercise. The amount of alcohol you drink. It's the relationships you have. It's your ability to forgive. Love.

I've learned a lot in the last 10 years about how important the mind is. All of these things conspire to challenge the cell and the most vulnerable parts of the cell or the mitochondria. When 40% to 50% of them become dysfunctional through a myriad of things, including EMF and now 5G, now the cell needs to survive and, what does it need to do? It needs to produce energy. So, it reverts back to the only primordial way of making energy. That is called fermentation. Fermentation of glucose is how you make wine and cheese, and that is a way of making energy but it's clearly extremely inefficient. Whereas, with what we talked about before, the mitochondria produce 38 ATP for every one glucose.

With fermentation, one glucose produces only two. Which means, it is nineteen times less efficient at energy production. Therefore, in order to survive, in order to



Dr. Thomas Lodi

keep this multi-trillion celled organism functioning with enough energy, all of those cells that lose their mitochondrial function and have to ferment, signal to the nucleus to now turn on and turn off genes. So, you can have a new program for the cell that supports this new metabolism. This new metabolic requirement we're now going to deal with instead of a mitochondrial oxidative phosphorylation metabolism. We want to deal with what they call fermentation. I'll just call it a fermentation metabolism. It turns on certain things. One of the things that turns on is the receptors that upregulate the production of insulin. Why? Because cancer cells need more sugar. Need more glucose.

They're nineteen times less efficient. You can't change what is inside. You can't change the mechanism. You have to give it more fuel and so you give it more. It's like those old trains. Those coal trains where the guy was shoveling the coal into the train. Well, the more he shoveled into the engine, the faster we'd go. And that's the same kind of thing the cell needs to get all that. It upregulates this enzyme and that enzyme. It down-regulates all these things all those genetic expression changes or what we call uncle G. In the end, when you're sitting there and you say, aha! You have whatever your p53 or whatever it is. All these things are really done to support fermentation. So what cancer is, is a chronically fermenting cell. That's it. Nothing more and nothing less. The other question I don't think I want to jump into is that whether you have cancer in the brain or the breast or the pancreas, the only difference is the first word. Location. The second word is cancer. Pancreatic cancer. Breast cancer. Brain cancer. Colon cancer.

Now, I want you to understand that you don't have a different kind of cancer. There is no different kinds of cancer. It is all the same. And it is the location that would make one more serious than another. I mean, serious. More has a worst reputation like pancreatic pain because of its location. If it grows even a half a centimeter, it is already in another organ. You're in stage four. You're compromised. Whereas a breast tumor could grow several centimeters and still be a stage two or three. So that's without affecting physiology. So really, I want people to understand that. So, when you say, oh, I have this really rare cancer. Rare means they haven't found it beginning in this particular cell type often. That's all it means. But it is still the same, which is why the therapies to reverse don't have to change. They're the same as well.

Nathan Crane:

And that is true for whether it is lymphoma, blood cancer, a tumor, or bone



Dr. Thomas Lodi

caner. It doesn't matter. It's the exact same process. It's just that one might be a worse experience, or faster, or whatever than the other.

Dr. Thomas Lodi:

Exactly.

Nathan Crane:

So, I want to see if I understand this correctly. If I followed along correctly. The fermentation process is almost like a built-in redundancy to keep us alive, right? So that's like, we're not feeding our cells what they need. They're being depleted. They're being damaged through oxidative stress, through mental, physical, emotional stress, WiFi, you already named a lot of the causes. Diet or diet too much, not enough exercise, etcetera, etcetera. The cells, the mitochondria start dysfunctioning and they go into the fermentation process basically to keep us alive. But the fermentation process is actually what is turning those cells into cancer cells, right? But they're producing some energy to keep us alive. And so cancer is actually prolonging our life. I believe that's what I heard you say?

Dr. Thomas Lodi:

Yes, exactly. It's an adaptive response. And let's say, a tumor in the breast. If that didn't happen, if it didn't adapt, it would've become dead. It would have died. The tissue would have died, and dead tissue is called the necrotic tissue and dead tissue becomes a nest for bacteria and other micro-organisms. They love it. They would go there. You would get a horrible infection. They would probably get into the blood and you would die. You have to absolutely understand that about cancer. It's not only the affirmative.

It happens every day. When you exercise, let's say, you sprint up to the corner, and you haven't been doing this in a while, by the time you get up to three quarters of the way, your legs are starting to ache. What happened? Well, because you are not in shape, or even if you are in shape, then it might take a little longer to get to that place. But you will get to the place where you will have exceeded your ability. Your oxidative ability. And now, you start to ferment. Your cells start to ferment. It's called glycolysis.



Dr. Thomas Lodi

Nathan Crane:

I was there. I did that this morning.

Dr. Thomas Lodi:

And then the glycolysis, the end result is a lactic acid. And that lactic acid is what makes your legs sore. When you're feeling that soreness, you realize that your body is fermenting and then you blow off the carbon dioxide which equilibrates, then you're okay. Well, with cancer, you can't do that because even blowing off the carbon dioxide, you don't have the mitochondrial to begin that really efficient process again. So, you're stuck in permanent. We can live in cancerous, permanent, or not permanent, but at least chronic fermentation. And by the way, it can be turned around.

Nathan Crane:

Going back to the exercise analogy. If our bodies didn't have the ability to release that carbon dioxide and then allow our system to flush that lactic acid out, basically, that would all become cancerous. Is that what you're saying? But it doesn't become cancerous because we're a little bit flushed out?

Dr. Thomas Lodi:

No, we would have to destroy the mitochondria to get cancer. Because that's the thing.

Nathan Crane:

It's like an initial fermentation process. It's not the full...

Dr. Thomas Lodi:

Right, and it is fermenting. Not because it lost the mitochondria, but because your cells got overworked, they're not quite efficient. So, they temporarily had to start fermenting, and then you have to slow down and get rid of the carbon dioxide. And now you can go back to being.



Dr. Thomas Lodi

Nathan Crane:

And now your body has just adapted and you've increased a little bit. So, the next time you do it, you can go a little bit harder. A little bit further.

Dr. Thomas Lodi:

Exactly. Training.

Nathan Crane:

I love how you explain that. A couple of questions have come up. Why then are all these cancers? You say that cancer is cancer. But why are they so different in the terms of where they show up and why they show up in these different areas and these different types of cancer?

Dr. Thomas Lodi:

Right. Well, depending on the insults or the challenges that the cells had will determine whether or not it becomes cancer. So, let's say that a woman is living a lifestyle, and I've got her from the beginning, acknowledge the fact that there is another thing about cancer too. Sometimes we don't understand it. Not all, most people, they have what has happened in their lives. Some people come to me and say, God, I grew up on an organic farm and I was active and all of this and everybody is surprised how I, why I got cancer. A lot of times we cannot identify what happened, and for the same reason, there's a small percentage of people who do all the right things and it doesn't work. But those are very small. You have to understand when I'm talking right now, I'm talking about the vast majority of people, 95% plus of the people. There's a small percentage that we just never understand it.

Nathan Crane:

Well, I've found with people who I've talked to like that sometimes if you dig really, really deep, even somebody says, oh, I had a great childhood. And you dig deeper, and it's like, oh, there was this huge traumatic event that they forgot to mention. That's still with them subconsciously today that has been an underlying stress for 35 or 40 years, right? So, there's those things too, that aren't really clear.



Dr. Thomas Lodi

Dr. Thomas Lodi:

Absolutely. If you dug down and if we have a chance to, let's talk a little bit about the mind later. Anyway, if a woman, let's say a woman is exposed to the normal lifestyle that we have here in the 21st century, and her hormones are not balanced, she's got too much estrogen and not enough progesterone. She's even got too much prolactin. Let's say she wears a bra all the time. She doesn't take it off except for when she sleeps which pre decreases the breasts ability to move as lymphatic. We know there's actually a correlation between the number of hours a woman wears her bra during the day and her risk of breast cancer.

This is relatively modern invention. It came about actually when Howard Hughes invented the bras, that women wear today, for Jane Russell in a movie called, *Gentlemen Prefer Blondes* with Marilyn Monroe and Jane Russell. And in fact, Jane Russell was given a contract. If you wear this bra in this movie, you will get \$1,000 dollars a week for the rest of your life. And you know, in 1948, or whenever it came out, that was a ton of money. It's still not bad. If you got \$1,000 a week for the rest of your life, but anyway, that's where the new bra came and this bra actually decreases a woman's breasts. Because normally in a healthy, natural setting, as a woman walked, her breasts would bounce.

And as they bounced, the lymphatic system would circulate and all that's natural. It reminds me of the Hawaiians, back when the white men first came, the Hawaiians weren't wearing bras and they were surfing, and they were healthy and large. And we said, no, you've got to wear bras. It's terrible because you know why? In Hawaii they didn't think of the breasts as sexual objects, they thought breasts were for the babies, not for the men. They had a whole different perspective on it. So, now we've got really sick Hawaiians.

If a woman has that constellation of exposures and the hormonal imbalance, then it could show up in the breast. It's more likely to happen in the breast, right? That's where it'll happen. For example, pancreas cancer. We know that pancreas cancer seems to happen with people who, not always, but often eat a lot of cooked carbs. If you're eating a lot of cooked carbs and you've got all these kinds of stresses, and there's other things too that we might not be aware of. For example, microorganisms, we know that we have a dysbiosis. We're dope. One of the things about probiotics that is really important for everyone to understand, is that you can take probiotics all day, every hour. "Oh, I take my probiotic." ■



Dr. Thomas Lodi

But if they let those bacteria don't have the food they need to eat, once they get into your system, they're going to pass right through. In other words, the bacteria that exists in your gut will survive based on the food. If you have a fast-food diet, a certain set of species will exist in there. If you have healthy diet, if you eat a high heavy meat diet, you'll have a certain set of certain species that survive in there. So, you don't have to worry about the bacteria. Worry about the environment. Your job is to take care of the environment.

Nathan Crane:

And that's where prebiotics are probably more and more important than taking probiotics, Right?

Dr. Thomas Lodi:

Right. Because remember, you've got more bacteria in there than you do cells in your body.

Nathan Crane:

Right.

Dr. Thomas Lodi:

You know, they're going to replenish themselves. You can't knock them out.

Nathan Crane:

We are talking about anything with inulin fiber, right? When we're talking about prebiotics, and that's pretty much fruit and vegetables to make it simple?

Dr. Thomas Lodi:

Exactly. The more that you eat, the more of the kinds of species that we need for our health will survive. Now, some are eating a different diet. It'll be good food for a different sort of species which are actually pathological. Which would cause us all sorts of problems. And we know that the gut and the brain are connected. In terms



Dr. Thomas Lodi

of thinking and feeling. Imagine you're eating a certain diet. It's going to affect the way you think, the way you feel, and the way you respond. It's all very, very important.

Nathan Crane:

Just to wrap up here, the reason these cancers are going to show up in different parts of the body is, and we're still learning some of those things, but like you said, hormones out of balance more often than not, it's going to be in the breast. If it's a lot of good carbs it could be pancreas. Different reasons are causing it, show up in different places.

Dr. Thomas Lodi:

A lot of meat is in the colon.

Nathan Crane:

That is kind of where I want to go next which is this whole craze about the carnivore diet. Like, talk about that for a couple of minutes.

Dr. Thomas Lodi:

Well, it's astonishing to me that it even became, well, I guess I shouldn't be astonished because people are always looking for ways to justify their vices. They love to justify their vices, right? You know, clearly, it's not a sustainable diet. First of all, when you want to say, what is a proper diet for any organism on the planet, you have to understand organ, organisms, anatomy and physiology. So, you've got an elephant with this anatomy, and physiology will tell you exactly what it should eat.

You've got an ant eater with the long nose and the long tongue, you know what it's going to eat. The reason we have to debate about this is because we were forbidden by our parents to be instinctual. We were not allowed to follow our instincts. Our parents insisted. And then we insist our children to be culturally appropriate. So, all of our responses are cultural. We've been enculturated. So, we don't know what our natural diet would be. Because if you're in Thailand, you're eating one kind of food. If you're in Germany, you grow up eating another food. If you're in Africa, you grow up eating another food.



Dr. Thomas Lodi

And then each country thinks that their food is the best, and the only one that people should eat, and it becomes your appetite. It's what you crave and it's your emotional things. And that's what happened with food. Our anatomy and physiology is such that, we look at gorillas. If we look at chimpanzees, these are our cousins. Why do I say cousins? Well, we may have, what? 67%, 65% percent same DNA as a dog. Whereas we have 99% same DNA as a chimp, right? It doesn't mean we came from dogs. It doesn't mean we came from chimps. It just means that we were designed on a similar structure. We have four chambered hearts, so do they, they have four chamber hearts, right? The heart/lung apparatus, the whole thing of the kidneys. That's a good system. Why would God have to make several systems. Our cousins aren't enculturated. So they eat out of instinct.

Think about it. Let's say you had a 14-month-old child. Or you had one from every country. One from Ethiopia, one from Afghanistan, one from Kansas, one from Australia, one from China. And you put them each individually in this little playpen with an apple and a rabbit. None of them are going to eat the rabbit. They're all going to be attracted to the roundness, the redness, or the greenness. They're going to like what's got the round, the shape, it's something that's intrinsically attractive to a young human, right? And they're going to lick it and taste it. And they're going to play with the rabbit. That's instinctually. We're instinctually there to do that, but we're forbidden that. Our mothers saying, and fathers, no, stop, don't. No, stop, don't. By the time we're three, our appetites are formed. And you know this as a father, you can tell a two-year-old what to eat. You cannot tell a four-year-old what to eat. So, by three years old, appetites are formed, and that's the tragedy. You have until three to get it right with your kids. If not, you're going to spend the rest of your time trying to fix it.

Nathan Crane:

It's a really good point you brought up because my dogs who I have trained as puppies to, or not even trained, allowed them to eat instinctually. If I put a rabbit in front of them, they will kill the rabbit and they'll eat it. Raw bones, skin, everything. When we're out running, they will hunt rabbits. I never taught them to hunt. I didn't teach them anything. I just gave them meat, raw meat from time to time and never stopped them from trying to catch a rabbit when we're out running and they'll catch it, they'll kill it, and they will eat it. All of it. They'll pop the intestines open and the stomach filled with crap, and that smells horrible and they'll eat all of it. And they love it, you know? That's a true omnivore, right? Now, if we were true omnivores, like



Dr. Thomas Lodi

you're saying, if we were meant to eat quite a bit of meat and maybe some plants. I think we would crave that raw meat, the bone, all of it just like my dogs.

Dr. Thomas Lodi:

Exactly. You're exactly right. All omnivores have to be capable of killing an animal because of the fact that they're an omnivore. What does that mean? Well, that means that for mammals, they pretty much need to have a snout. What are the famous omnivores that we know of? Dogs, rats. And who is the big guy? The bear. I mean, you know that the bear is like 80%, 90% vegetarian, right? This big, massive thing. But it's got the snout and it's got the claws. It's designed so when it needs to kill, it will. Dogs are scavengers. They're omnivore scavengers. If you've got a twelve-year-old dog and it's kind of losing its energy, you can change it, switch it to a vegetarian diet. You'll get another four years out of it. Because they'll live longer. Because they'll be getting less garbage. I've done that two times with dogs.

Nathan Crane:

Oh, now that's just not feeding them the dead dry dog food. You're giving them fresh food, plant, vegetarian. What about putting them on a, like a raw meat diet with some plants?

Dr. Thomas Lodi:

Right. That's what I've seen now, is that that's the best. Put them on a raw meat diet. Especially from early on and they'll live long. Just like it works for them, works for us as well. First of all, if we were carnivores, if we were omnivores, like you just pointed out, we should be attracted to, I mean, we could see a cow walking in the pasture and go, (lip licking) No, we don't do that. We're not excited by that. We're excited by the steak. It's been removed. It's cooked. It's got a smell. It has sauces on it. We're not excited by a piece of bloody flesh. Instinctually we're not like that. Now, some guys that want to beat their chest, yeah. There are some bizarre people that will do anything but that doesn't mean that's where humans are. Humans in general are not attracted to that. And I think the origins of cooking came from meat because, when we were eating broccoli and apples, you would just eat it, right? You just eat it. It's good. But when it came to flesh, it is kind of disgusting. So, you've got to do something to it.



Dr. Thomas Lodi

Nathan Crane:

And our bodies, are really designed like an herbivore, right? Our long intestines, our teeth that are made for chewing, grinding plants and vegetables and things like that. Isn't that true? I mean, if you really look at carnivore, omnivore, herbivore, our bodies are much more like an herbivore than either of the other two.

Dr. Thomas Lodi:

Well, we don't have a snout, right? These (pointing at canines). You can say these are canines. They're only in the canine position but they don't come below the inside here. So, they function as an incisor. They're not piercing. Dracula has that but not the average... Vampires have it. The vampires can eat meat, right? Anyway, the omnivore doesn't chew, they gulp and their jaws only move vertically. Their teeth are sharp. Their tongues are thin so they can lick you, you know? They're long and thin. Their digestive tract is short and straight. Their livers produce a lot of uric acids, an enzyme that breaks down uric acid, which is a by-product of protein, because they have to have that. They don't sweat. They pant.

Those are just some of the qualities or aspects of the omnivore and carnivore, whereas the herbivore just goes horizontal and vertical. We have full cheeks, remember dogs and cats don't have cheeks. They don't have lips. That's why when they're chewing something, it'll fall out. They have to pick it up. We have the cheeks with the lips, and we have flat teeth for grinding. And our tongues are thick and muscular. We have an enzyme in our mouths to digest starch, not to digest protein. What is starch? Starch is fruit, right? Starch is in vegetables and stuff like that. Glucose. How do you argue with that? Now, that goes into a long, I mean, it's 10 meters or 30 feet from mouth to rectum. 30 feet, okay? So, it's what, six times, five times the size of your whole body. But when we look at carnivores versus herbivores. The torso, right? In a carnivore or omnivore, the torso is three times the length.

The intestines are three times the length of the torso. When we look at what we are, herbivores, it's six to nine times. You figure on me, this is probably about almost a meter, maybe three, maybe two and a half feet, right? And 30 feet of intestines. There we go. The problem is when you eat meat. When you eat foods like that. That don't have feet and hands, like if you're eating broccoli and cabbage and things like that, it's got cellulose. Undigestible. It kind of moves its way through the intestines and it brushes it, and cleans it. Whereas something that doesn't have that just gets pushed



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along and it's harder to digest. If it sits around too long, it begins to putrefy in your body, and then putrefaction produces these chemicals that are carcinogenic, that are all kinds of problems.

And maybe even the most important thing is, is that it's food for a different species of bacteria. And so our microbiome changes. So, now we've got putrefied flesh sitting somewhere in that long, 30-foot tube with a different kind of bacteria and we're going, oh yeah, that was great. Right? And, we have gas coming out of both ends. I mean, no wonder.

I've got a guy here actually at our center. He and his father have YouTube channels. They are carnivores. We're not. You can pretend you are a carnivore and you're going to see what happens. Your body was not designed for it. And it's not a long-term solution. It's just like ketogenic diets. Ketogenic diets work really well in certain circumstances and can be used, but they're not sustainable. You can't stay on a ketogenic diet. Let's say you do it for medical purposes, you might.

What I tell people with cancer, we've been able to develop a vegan, ketogenic diet, raw vegan. It's very difficult, but you do it for four to six weeks. And you have to keep your glucose to ketone ratio at less than one point zero. If you can do that for four to six weeks, then you eat for two to three months, a healthy diet, then you do it again for four to six weeks, then you eat a healthy diet. It's not a sustainable thing because in order to be keto, in order to produce enough ketones, you have to have an excess of these nutrients and not enough of those nutrients. So, it won't work. Really. Our diet is the variety.

Nathan Crane:

Yeah, plant-based diet. Variety of vegetables, fruits, nuts, seeds, legumes, herbs, berries, all of it, right? The reason you're doing a short term, raw organic plant-based ketogenic diet is just to reduce inflammation quickly? So, is that the reason why you're doing it in those extreme cases?

Dr. Thomas Lodi:

Right. That, and also by reducing the glucose. The cancer has a hard time living, right? Now, remember, cancer has one other fuel source. It's called glutamine which is an amino acid. So, it can switch to glutamine. And that's the problem. And that's what



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you see. In fact, there are some cancers that don't show up by PET scan. PET scan is where they inject the radioactive glucose. There are some cancers like that, and those are mostly glutamine. What's the only diet in the world that eliminates glutamine and glucose? It's called H₂O. Water.

Nathan Crane:

Water fasting.

Dr. Thomas Lodi:

Water fasting. And I have to tell you, I had a lady come here, stage four breast cancer, and she was told she didn't have six months. She did a 41-day water fast. Went back to England two months later to get a PET scan. It was absolutely clean.

Nathan Crane:

That's incredible. And water fasting is like really intense. So, you need to be with somebody like yourself, professional guidance to help you through it, right?

Dr. Thomas Lodi:

If you're going to go past two weeks.

Nathan Crane:

Yeah. I wanted to say too, we do have an interview with the founders of mastering diabetes. I'm just going to mention here, but I do encourage everyone to go listen to that interview. One of the things that all the research shows and what they talk about is that one of the reasons I think, as you're saying keto diet is not sustainable, is because that's the exact diet you would do if you want to create diabetes in the body, right? A high fat diet is one of the fastest ways to actually make your body diabetic. So, these people that are just promoting ketogenic diet, like as the life source, the best healthiest diet on the planet, actually all the research is saying the opposite. Like you're saying, it can be good for short term for some of these chronic health conditions for short periods of time, but not sustainable.



Dr. Thomas Lodi

Dr. Thomas Lodi:

It's got some really important therapeutic uses like for fasting too. Just really quickly, all nature, fasting was built into it. No animal in nature eats every day. They might eat one day or two days and then they run out of food for a week. Now, that is intermittent fasting. I want to really correct the term. Most people keep saying that if you eat once a day, you're intermittent fasting. That's not intermittent fasting. A fast is when you have not eaten for 24 hours. If you're eating once a day, it means you're eating healthy. If you're eating twice a day, it means you're eating healthy. So, what I tell my people is since insulin and glucose or the dynamic between insulin and glucose are very fundamental to pathology, whether it's heart disease, liver disease, or cancer. Remember we talked about insulin and glucose and cancer.

To be healthy you should have a fasting insulin of three or less. Fasting insulin of three or less. Most Americans are 12 to 18. Some go up to 25, right? It has to be three or less. So, the best way to manage that is to put a minimum of 18 hours between your last meal and your first meal every day. Now, that's not intermittent fasting. That is eating healthy. So, you stop eating at 6:00 PM. You eat again at noon.

Then you eat again at 5:00 PM done at six, and you've done it. You've got all your nutrition, but you have 18 hours where your body is able to clean up. Because when you're not eating your body is cleaning and your insulin requirements go down. Because remember, cancer needs insulin to push the glucose in. So, all of that is very, very, important. But it's not intermittent fasting. When you fast every third day or you fast on Sundays, that's intermittent fasting.

Nathan Crane:

So, the intermittent fasting you're saying is when you do a fast every Sunday or every third day or whatever it is. Versus just eating in a six-hour window.

Dr. Thomas Lodi:

Right.

Nathan Crane:

You're being healthy. You're allowing your body to do what it needs to do to clean itself out and heal itself.



Dr. Thomas Lodi

Dr. Thomas Lodi:

Otherwise, you can say, look, I do intermittent fasting. I stopped eating between breakfast and lunch. And then I stopped eating between lunch and dinner. So, I'm eating three meals a day and by it, I'm intermittent fasting.

Nathan Crane:

You know what's funny about that? You're in Thailand, right? Which is primarily Buddhist country. We were talking beforehand. I used to spend a lot of time at a Buddhist monastery in Escondido, CA. And I don't know if that's how it is there for a lot of the monks at the monasteries, specifically where you are in Thailand, but at this monastery in Escondido I was learning meditation and learning from the monks and just enjoying and being around beautiful, healthy, happy, funny people.

They only ate once a day. They ate lunch and that was it. And it wasn't based on some scientific research that it's good for you to only eat once a day. It was like, they knew for however many hundreds or thousands of years that one of the healthiest ways to be, and also detached from having, I mean, there's also the philosophical side to it and so forth but somehow intuitively they knew, like, yeah, eat once a day. I haven't been able to do that yet, but they certainly were very successful at it. I just find that fascinating. Science is great, helps us understand things more clearly. But if you look at our ancestors for hundreds of years, a lot of the wise people figured out a lot of this stuff on their own without our modern scientific tools. Right?

Dr. Thomas Lodi:

Yeah. If you're eating food that hasn't been processed, that still has all of its nutrients, it is nutrient dense, and if it is the proper diet for your particular species which is human, you have a nutrient dense meal. You've done it. You've taken care of your nutritional needs which is the purpose of eating. The purpose of eating is not to pleasure the tongue. Although, that's a nice side benefit. But the real goal is to keep your nutrients coming in for energy and for structure. That's what we need. If you can do that once a day and you have all that time. I was in Myanmar, Burma when they had a flood and I was up there helping them. I was up in the mountains and I went to a monastery. Way out there. I had to take a boat for hours. It's amazing, beautiful, incredible. Everybody on the monastery were monks, right? People over there don't wear shoes. They don't have devices. It's not this century. They eat the food that grows



Dr. Thomas Lodi

around there, and they eat once a day.

So, I was there examining the whole village to see how everybody's health was. And here I am examining these 70, 80-year-old men monks. And they had the bodies of the 30-year-olds. They were amazing. They had no fat, their bodies were tight, their muscles had definition, they weren't bulky, but they had definition. Their heart rates were, I mean, it was amazing. And it's because they eat once a day. And the other secret about eating is, if you're under 30, you have to stop eating three hours before sleep. Under 40, 4 hours and 50 and above five hours before sleep. The reason for that is because one of the greatest benefits of sleep is autophagy for our body to eat up and get rid of the debris.

It won't do that if it's still absorbing food that has glucose. Because it doesn't need to. So, auto fascia gets turned on by the light cells in the system when there's no more glucose coming in. But if you eat a meal an hour before, you're still absorbing it while you're sleeping. You're not going to get that benefit. The reason there is three, four and five hours is because digestion slows down as you age. Since you should go to bed at the very latest 9:00 PM. If you're 30 and under you have to stop eating at six. If you're 40, stop eating at five. 50, stop eating at four. And then 18 hours is great. Four times a year, do a two-week fast. And that's it.

Nathan Crane:

So, 50 and older which is most people who are tuning in here to the symposium, you're saying at least five hours. And that's whether you're 60, 70, 80. It doesn't necessarily keep going up. You're 80 years old, you need to stop eight hours before, or no?

Dr. Thomas Lodi:

It would be. But think about what the monks are doing. The monks eat, depending on what country they're in, either 11:00 AM to 12 or 12 to 1:00 PM around there, right? So, they all have eight, 10 hours before.

Nathan Crane:

So, that window of time, you're allowing your body to finish processing the glucose from the food. So, now it can start cleaning the debris out while you're sleeping.



Dr. Thomas Lodi

Dr. Thomas Lodi:

And your night will be fantastic. And if you're going to bed with the sun, as the sun sets your eyes close. If you're doing that, which is a natural life, you set up a whole system of hormones and your circadian rhythm. You're in sync with your nature, your bio rhythms. It's amazing. In fact, it is the most important thing you can do. More important than eating right. And the reason I say that is because if you go to bed early, you will then have something that you don't have when you go to bed late. And that's called willpower. Going to bed late, you wake up in the morning, you're on your third cup of coffee, you're driving by the donut shop or you're driving by McDonalds, whatever it is. And you're going to say, okay, just one. But you woke up. You went to bed early. You did your meditation. You did your reading. You did your exercise. You're out the door. There's no way you're going to mess with that beautiful, wonderful feeling. You're going to say no way. I'm not going to do that.

So, what I always let people know is that the train you will be on tomorrow is the one you get on at the time you go to sleep. You go to sleep at 8:00 PM. You're on the A train. You go to sleep at 11:00 PM. You're on the F train. And it's only because you're not going to get restorative sleep. You're not going to restore your body. Right? You're going to get a lot of dreams, so you won't be crazy but you're not going to get restorative sleep.

Nathan Crane:

The deep sleep that you need. You have a 20% plus a deep sleep at night which is beyond REM sleep. A lot of people think REM sleep is the most important. It's not the most important. It's that deep restorative sleep.

Dr. Thomas Lodi:

Right. There are two cycles. Before our set point which is around 1:00 AM. Before that set point, we have 90-minute cycles. The majority of the cycle is restorative and a little bit of REM. After that set point at 1:00 AM or whatever time it is for that particular person, is reversed. The majority is REM and a little bit of restorative sleep. So, if you went to bed at 11, you only got maybe a half a cycle or one cycle of good restorative sleep. And you've got a lot of REM. If you don't get REM, you'll go crazy. You'll kill people. You'll be angry. Right? So that's what REM is for. REM is kind of like steam. Letting off psychological steam. The restorative sleep is what you



Dr. Thomas Lodi

need to stay healthy and young, and your immune system and all that. And most people are not getting it, ever. I mean, how many people go to bed early? Very rare. Most people go to bed at least at 10, 11, 12.

Nathan Crane:

Yeah. We recently just started going to bed earlier here now. Especially since it's winter here. Well, at the time we're recording this, it's winter. The sun's going down earlier. So, we're like, all right, it's time to start going to bed earlier. Now we're going to bed an hour earlier than we were. And you know, it's kind of hard initially to... for the body to start getting used to that cycle. But once you do, then it's beautiful. Listen, I know we could go on for hours. You are such a wealth of knowledge and information and inspiration. We've probably covered 20 things that we never even intended on covering. I'm grateful to you for unloading all of these nuggets of wisdom. I know we could do three or four or five different interviews on different subjects. I told people tuning in, make sure you're taking notes because you're going to learn a lot. And I think people really learned a lot. Dr. Lodi, thank you. It's always a pleasure. I just appreciate you sharing and doing everything you do.

Dr. Thomas Lodi:

You're welcome. My pleasure. Absolutely.

Nathan Crane:

I want to thank all of you here for tuning in to the Global Cancer Symposium. Make sure to share this with anyone who needs this information. There's so much wisdom here, and I encourage you to go back and listen to it again. Take notes. Review. Because you start doing these things that Dr. Lodi has been talking about, it's going to change your life. Go listen to that interview with Dr. Nathan Goodyear. We go into a lot of depth there. Some other really good nuggets of wisdom there. And visit An Oasis of Healing. It's www.AnOasisofHealing.com. You can learn about their center in Arizona. You can learn about the integrative treatments that they offer. You can connect with Dr. Lodi who's over in Thailand. They have a lot of good resources for you. So, go visit their website. The online global membership to helping you get and stay healthy again. I'm Nathan Crane. I wish you ultimate health and happiness. Take care.



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