Combine Natural Therapies With Your Oncology Plan Safely Transcript

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Introduction to Dr. Eric Schoen

Well, today I am so excited to have my friend Dr. Eric Schoen here and we are going to be talking about something extremely important that I know is on the heart for a lot of cancer patients.

Thank you so much for joining me at the segment. Yeah, absolutely. It's a blast. I'm glad we're doing this. For everyone out there. Dr. Eric Schoen is a naturopathic doctor and operates his concierge practice in Bellevue, Washington.

He's a well-regarded expert in integrative oncology, where he collaborates with experts around the world, especially in facilities in Mexico and Germany, advancing protocols for the Photodynamic therapy area that I love and stem cells.

He's also an educator and researcher and frequent speaker at medical conferences where he lectures on intravenous blood irradiation, sort of by modulation and IV therapy formulation and safety.

Yeah, we we've had the pleasure of of standing up there on the podium by each other, a number of times, and it's always been an honor. Yeah, absolutely. Likewise.

It's always fun to collaborate and spread the good news of what both of us are doing. So one of the challenge and that people are dealing with and I know this this is a common, common scenario.

You know, I have cancer patients. They work with their medical oncologist and they are on these and these protocols. You know, they do chemo and radiation do surgery, and they talk to their oncologist and colleges, says, you know, please don't do anything else because I don't want you to interfere with the treatment that we are doing.

I mean, what what what do you tell your patients when they come with that type of discussion? Yeah, absolutely.

Navigating Integrative Care with Oncologists

So it's it's kind of front and center in most of our first interactions we ever have with our patients. I'm sure you're very equipped at navigating these conversations, too.

And it's and it's a big piece, I think, for anybody who is getting their feet wet, whether this is for themself on their cancer journey or for a loved one or a family member, that you are having a good, solid conversation with your oncologist as well as any integrated providers about what it is that you do and you don't do.

And in that space, there's a lot of myths about what is permitted and what's not permitted. And frankly, I feel like it's and maybe you can reflect on this, too, it kind of goes down to the oncology system that you're participating in.

I work with some amazing oncologists who give a lot of collaboration with me, and then there are some oncologists that are very hard nosed about there's nothing else that should be brought into the conversation.

And so this is highly variable and not standardized at all. And I think you experience much of the same cycle where if a person is really wondering about this, the answer kind of bluntly is it depends on who you're talking to.

And this is also just a reality that I think a lot of patients are unaware of as far as how many people are asking the same questions that they are. And this has actually been studied too, which is fun.

Where, you know, I think it's about 35 to 44, depending percentage of people who are actively seeking treatment for cancer are incorporating integrative therapies, some of which with their own colleges, you know, knowledge.

And some of them are completely hiding it from them. And that's more or less, I think, what we're supposed to be talking about today, which is kind of how do you navigate that space and which things are safe, which things are not safe?

So I think that's that answers your question. So with and frequently I think what the patients sometimes need to understand is kind of that the empowerment recognize that they are the one in charge of their own treatment.

And so how do you when when an oncologist saying, you know, this this cancer, I mean, this patient really could benefit from X, Y, Z type of treatment.

And the oncologist, you have one of those hard nosed oncologists that says, you know, don't do any of this. And the patient is confused. You know, I really want to.

But my colleges tells me not to do it, you know. So I guess I'm I'm not allowed to do it, you know, how do you I mean, I think that is kind of the space that's really hard to navigate.

And how do you communicate to those patients? Yeah, absolutely. Sometimes it can be a simple matter of just providing your patients. So I have like a repository of all the research that I collect and and why I'm using what I'm using and that it's safe to be used at the same time.

And so I always make it available that if an oncologist wants to, you know, collaborate with me, they're more than willing to have that conversation with me.

And then I'm also providing the information. Usually that is not often the case that there is that much of butting of heads. There's a handful of things where we have clear lines that we don't combine certain therapies together, you know, during radiation or certain chemotherapy because there's absolute contraindications.

And so I do a pretty good job of screening to make sure that those things are not included, that we're not interfering and where there is confusion or where an oncologist is basically articulating concern about something that's happening in the treatment plan, that's a place where we either are providing the patient with information or always just offering that.

You can speak from provider provider at that time, because if you're if you're really doing this work well, there's synergy with what we're doing and there isn't that butting of heads.

And so where there is butting of heads, usually it's just an opportunity for education. I kind of like to say, you know, like I have a doctorate in integrative and complementary medicine.

This is my domain. And so when I am advocating for my patient and advocating for certain types of therapies, it's with reason. It's not because it's an anecdote.

And so it's not a difficult piece to navigate that space with an open minded oncologist, right? When it is extremely hard nosed. And I really do feel that it is going to be beneficial for my patient.

That's where, you know, it's it's ultimately about the patient's choice, about what they feel comfortable with. And if all members can be on the same page, sometimes it's really about finding a second opinion.

I'll be very blunt. Right. Some of these things we have really, really good research that they are synergistic and actually give you better outcomes. And so in instances, very few, by the way, where an oncologist has kind of said, no, this is dangerous.

Do's and Don'ts During Cancer Treatment

It is a very, very quick way to, you know, present the research and let them know that actually it's the exact opposite or you don't have to have concerns about this or that's a misunderstanding about how this works.

And we have you know, that's a way that we used to orient to something like, say, for instance, hyperbaric 20 years ago. It's just it's an opportunity to reeducate.

And I'm and I'm seeing and I'm sure it seems like from from what you're saying is that the butting up heads is becoming less and less and the oncologists are much more favorable.

You know, like I've had several patients, new patients today, cancer patients. And they mentioned to their oncologist that they're looking for integrative care.

And the oncologist was very excited about it. So so I think with that, with oncologists being open, I think it's important for us practitioner then to really kind of respect that in their their space and then come with with therapies where they feel confident in that.

What we're doing is is beneficial and supporting the care that they're offering. So, so with that, obviously there's a lot of then it's important for patients then to go to individuals that specialize in this field and that recognize the do's and don'ts.

What what should you do? What shouldn't you do? You know, like you mentioned in radiology, you know, where radiation and when somebody's going through that type of therapy, what what are some of the do's and don'ts that people you know, some kind of guidelines that are out there that that people can kind of recognize.

And this should take place. It shouldn't take place. Yeah. Yeah, absolutely. And, you know, I think just to go back to what we were talking about before is answering that question that you just asked of me is operating on an assumption that a person is working with an integrated provider.

Right. And so that's a piece of that that's probably the biggest don't is trying to navigate this space yourself. Right. You know, it's part of part and parcel of the cancer journey, too, that somebody gets this diagnosis.

They hear from their oncologist about like all the things that they should be doing. And then it's a phenomenon where people come out of the woodwork.

Right. Friends and family and people you haven't spoken to in two decades, you know, that are saying, oh, did you try this? Have you spoken to this person?

There's 1,000,001 things that are suddenly bombarding the patient about what they should and shouldn't do. And that's for integrative things. That's completely for conventional things.

It can be very, very overwhelming for a patient and sometimes you feel like you just are going to only do one thing or you're going to do everything and you can drive yourself crazy trying to navigate the space yourself in.

So that's probably the biggest don't, which is that you really don't know because it's it's it's complicated cancer's complex and sometimes even seemingly innocuous suggestions like take vitamin C or take this mushroom or drink lots of green tea can, depending upon the person, sometimes be actually something you don't want to do or could interfere with your chemotherapy or radiation.

And so that's probably the first thing that I would heavily, heavily advise. We're going to go into kind of foundational supplements, I think, in a little bit here.

But that's that's probably the biggest thing is, is navigating it alone. It's one of my and I'm sure one of your greatest privileges and greatest joys in working with folks is to kind of take that burden off of their shoulders and really go over what their options are and talk about how we're going to support them no matter what their preferences are.

A second maybe, don't is to only operate your decisions off of the opinions of one person. And I know you and I both agree on this heartily that there is a wide and vast world of what you can do in a variety of situations.

There's what standard of care is providing and says could be best, and there's also what the center is capable of even providing. Right. We often talk about people being in like food deserts, right?

And I think some people are in health care deserts, right. Where you sort of have to seek out the care that you think you deserve. And sometimes that means going across state lines or, you know, getting on a zoom appointment with somebody that's qualified and capable of answering your questions.

And so that's that's a big thing, is not seeking out multiple opinions and feeling pressured that you have to make certain decisions. Of course, there is often some degree of urgency, especially with cancer, right?

But there usually is space for people to collect their thoughts, really align themselves with what their values, their preferences are and make appropriate decisions based upon that and some other don't.

I don't we'll get into dos, but the other don'ts are lying to your oncologist. This is definitely something you don't want to do is kind of just hide and withhold any of the things that you're collecting or amassing or what aren't Bertha told you to do or the things that you're rubbing on, you know, different parts of your body lifestyle.

I'm sure you've seen this go bad and I have also seen this go bad where, you know, a certain relative or so and so or you get horror stories that come into your office about or people are telling you that they can do.

And that's absolutely something you don't want to do. It really, really is critical that you are being fully open with all of your providers on what it is that you're doing and and this is this goes into lying as well as just kind of conveniently omitting certain pieces.

You know, I tell this story often to my patients about sometimes even innocuous things like green tea. There is a patient of mine where she had an advanced breast cancer and she was was doing great.

She was she was really, you know, going to her oncologist, doing the things that she needed to do. She was following my recommendations and she was a distance patient of mine.

So I didn't get to see her so often. And so it was about a six weeks period. I come back and unfortunately her her breast tumor had had swollen massively.

And this was beyond what we would expect with normal progression. And so there were some serious questions we had to ask about what was going on and nothing had really changed.

She was completely compliant with the exception of she had this canteen that she was she brought right into the office and it was this container of just tons and tons of green tea as green tea is good for cancer.

Right, right, right. Michael and I was like, what's it? What are you drinking? And she was like, Oh, it's green tea. And so her green tea, she was drinking two gallons of this a day.

And so this is where things can be complicated. More of something that's good isn't always better. Right. And so, you know, when we actually break down what was going on with her genetics and how that wasn't maybe the wisest thing, you know, I'm sure as well that green tea, the primary constituent it is something called Epigallocatechin, Gallate or Egcg.

And so that's really pro you know, it's helpful for cancer, right. But it's also broken down through the same pathway ways that break down her estrogens, its outcome t pathway.

And she had an especially sluggish pathway. And so this basically allowed for all of this stress molecules and all these hormones to bio accumulate because they're being backed up because of this excessive consumption of green tea.

And so this was not something that was part of her plan. It wasn't something she was communicating to her

ecologists, but it was something that was well intentioned.

And there is some research to suggest that that's really appropriate. But the finesse of how to administer it and the degree of even including it period was was not discussed.

And so this is, again, a piece where I don't want to make your viewers afraid to take green tea, but I hope you see that this is about scale, it's about nuance.

And navigating all of this is sometimes complicated, doesn't always have to be, though. So yeah. And that's the thing is to recognize, you know, so I talked to another patient earlier today and said, well, so in essence, naturopathic treatments, integrative cancer care is is mainly just to boost your your immune system while I do these other things.

And I said, well, you know, there's so many factors involved. I mean, you're you're you're looking at the drivers. You look at inflammation, mitochondrial, you're looking at genetics, you're looking at detox pathways, you're looking at what kind of supplements are interacting with the chemo, what what supplements will complement.

Also, you look at the adverse reactions of the chemo and how do you mitigate that and how, you know, what do you do to put more oxidative stress? So it's this this huge complex picture that, you know, people like yourself, you know, are looking at that people are recognize.

Foundational Supplements for Cancer Support

And so that's why it's so important to bring all those factors in onto the table so we can look and see what what should be on the table, what shouldn't be.

And then somebody that's able to manipulate all these different pieces because of huge amount of experience. It's so vital to have that that person by your side as you're walking through this journey.

So, yeah, I couldn't agree with you more. And these areas. Mm hmm. Yeah, absolutely. And it it speaks to, you know, to kind of get into the more of the treatment space, you know, what are the goals of, you know, even bringing in integrative and complementary therapies into kind of a cancer journey and and I think that's where we have a lot of license to actually do really powerful interventions that people may not orient to as as maybe directly anti-cancer.

Right. Because forgive me, you know, I say this is probably every single day with new patients when I'm trying to explain what it is that, you know, we do.

And, you know, in conventional therapies, you know, we see that there's this diagnosis of cancer, there's this lesion somewhere in the body, or maybe it's systemic, who knows?

And we tend to be very myopic where we go, look at this thing, let's try and kill it. Kill, kill, kill, kill it. Kill it can kill it, kill. And we forget that there's a whole person surrounding that.

And so in that space, there's a lot that can be done to really build people up that isn't so focused on, you know, killing something, whether using integrative tools or our conventional, you know, cut burned employees and kind of tactics.

And so in that space, there's, you know, so much of what you just mentioned about supporting your immunity and making sure your metabolism is really taken care of.

And so there's a lot that a person can do by themself with out much oversight that they're probably going to be making quite wise decisions while they're in an information gathering stage, while they're finding that provider.

And or if they can't find a provider or they're they're really going it alone, there's still a wealth of information that is available. And perhaps we can go into that, too.

Yeah. Yeah. And and I want to highlight another point that you made, which is really important. And I, I hear this frequently from, from, from the podcast people that in view on my integrative cancer podcast is that everyone, you know, the pressure that they feel to make a decision quickly without taking the amount of time that they need to gather the information, the information gathering process.

You to recognize that frequently you have much more time than you think. You don't have to immediately jump into something. You have the time to just can absorb the information.

Take a little step back. Obviously, there are scenarios where, you know, you got to just gas pedal and kind of and go after it. But frequently that is further down the treatment line rather than kind of right and the diagnosis component.

So yeah, so I really wanted to kind of highlight that piece of information that you gave because I think that's so important for people to recognize. Yeah, absolutely.

There's, you know, just to reiterate, yeah, there really is sometimes time to think about these things and also sometimes it's okay to pivot to people, you know, can they direct their own health care?

You know, you always want to remember to advocate for yourself, never stop advocating. Sometimes my patients, they pester me with questions and I say pester because they think they're pestering me and they're like to pester you. Dr. It and I go, No, no, no, no.

I will never be angry at somebody who's advocating for themselves. And so I try to train and encourage my patients to do the same. And so so the question is, and I feel we've kind of highlighted this in a way, you know, so can a person during while they're they're going through chemo radiation.

Is it okay to take supplements during that time? So broadly, yes. And again, making certain assumptions hopefully or working with a provider who can give you definitive answers on, yes, you know, this is safe.

This is maybe not so safe. And when we say things that are, you know, not safe, you know, in the integrative cancer space, I mean, you have to be trying really, really, really hard to hurt somebody, to actually hurt them.

Right. And so more or less what we're trying to do in that space is maximize the effectiveness of whatever it is that you're going through. Right. If you're doing chemo, let's make sure the chemo is worth it and protect the rest of your healthy cells.

At the same time, if you're doing radiation, let's make sure the radiation is worth it. And so we don't want to counteract anything that your body is doing.

And, you know, there's some pretty typical guidelines for, you know, going through radiation, like what would be helpful and what's the things that you should absolutely avoid and, you know, that's that typical.

And I'm sure you've talked about this with other people. It's you know, you don't want to use lots of antioxidants whenever you are going through radiation therapy.

And this is one of those battles that I'm just sick of fighting. We have pretty good clinical data that you can use small amounts of antioxidants during radiation therapy.

But I tend to want patients to really just make sure they're communicating with their oncologist about what it is that they're doing. And then there are some things that I like to emphasize with my patients that are some things that they should pretty much beyond all the time that really, really help them.

And that goes into kind of more terrain elements. You know, how do we generally support your immune system and how do we help people really deal with some of the causes of maybe what got this in the first place?

And so what I think is very appropriate for people to be focused on while they're going through any phase of their cancer journey is detox strategies.

And so there's a number of things that can be really helpful in the supplemental stance. Probably my favorite one, like 100% of my patients are on it is modified citrus peptides, right?

It's it's sort of this new thing that's kind of popped onto the space within the last, you know, at least ten, 11 years. And modified citrus pectin. This are foundational because they are really one of the most well validated and supportive therapies that we have for stalling progression especially and being an active, supportive agent throughout all of your treatment, whether that's with radiation or following surgery or during radiation.

And for your viewers who are not familiar with modified citrus patterns, it's basically a product that allows your body to absorb small, small pieces of pectin, which are just like the things that we find in citrus fruits, like in oranges.

But this is highly processed and really, really tiny. And so most pectin that we take through our diet, it doesn't get absorbed systemically, so it doesn't have the same effects.

So this really is a product that you want to make sure you're getting the right kind. And when this is taken and systemically, it binds to this this element that is known to proliferate not only cancers, but a lot of chronic illnesses.

And that is something called Galectin three. And so Galectin three is something that I screen on all my patients just to see, like how, how deep in the woods.

RB And if were really high, which for most lab values that's pretty much higher than 10 to 12. If that's high, then my patient is on modified citrus factors and that is something that binds to collecting the three, which is a marker of fibrosis.

So cancer allows itself to invest into other tissues and grow whenever it has this lattice work by which it can just accumulate and create new blood vessels around it.

And so when you are able to bind to that and pull it out of circulation, you prevent that pathway from being activated, which is a really big deal. You don't really have anything else that does that.

So modified citrus patterns is kind of unique. It's very prescriptive where, you know, if we see your levels are really high and sometimes even if they aren't highest still give it to people because it's such a powerful defensive strategy and then that is something that is pretty much consistently on people no matter what their decision is.

So even if they never see me again, I'm like, I want you to stay on this. And this is also something that a lot of my colleagues who don't focus on cancer, they ask me all the time, like, what should I do?

And I'm like, just get them on pack on a modified citrus pack. That is right. If you can get on that, you're doing a good job. Some of the other things that I find to be really, really helpful are supplements that help with people's nervous system response and that are helpful for down regulating things that are hallmarks of cancer.

So things that promote angiogenesis or this creation of new blood vessels. And so those are sometimes things like Magnolia Extract. I'm a big fan of tassels and ecology and the eco Gen-X is Hono PUA and that's a very, very high percentage extract of magnolia bark, and that is decreasing angiogenesis.

It's also helping with people's nervous system, which is a big, big, big, big part of kind of how people get to this space because if we're in fight or flight for years and years and years, sometimes decades, this is something that brings that down.

And so those two are pretty much standard for almost all of my patients. But there's a handful of other things that are really critical that people are on that are pretty darn safe no matter where they are.

And that's vitamin D, right? Vitamin D is pretty darn critical. If you don't have sufficient vitamin D, your immune system is not going to be working.

And so I tend to be pretty aggressive with getting that up for most people. And just sort of periodically where where would you like that level to be, you know, how so people they they see I'm within the norm and I'm fine.

I mean, what what is your optimum level of vitamin D for somebody going through cancer? Yeah. So I like it pretty high and I think you do as well. So deficiency is like less than 30 nanograms per milliliter if we're in America and we pretty much want to be 50 like at all times.

So that's like a bare minimum for for me as far as a functioning immune system and it's associated with, you know, preventing other types of things like autoimmune conditions.

We heavily know that it's correlated with preventing things like multiple sclerosis. And so for everybody, I want you higher than that. If we're actively dealing with like a cancer in process, I'm pushing it to sort of be upwards of around 80 or so.

Now, a lot of folks will get a little anxious if it's really, really, really high because it's going to increase calcium absorption or lead to hyper vitamin doses.

D, your levels have to be very, very, very high and you have to sort of be trying to get to those levels or just being willfully not measuring your vitamin D to get to that level, like taking 50,000 I use for, you know, weeks on end.

So that seems to be pretty rare. So most people are typically fine getting a good dose of vitamin D on a consistent basis. And so that's your 2000 to 10000.

It varies from person to person, but that's very easy to get on people on board with. Yeah, well, thank you. I apologize. And then what was was the next one?

Lifestyle Tools and Closing Remarks

I mean, what's the next one you feel is extremely safe. Yeah. That that anyone can. Mm hmm. Yeah. Trace minerals. Yeah. Everybody needs to be on minerals.

And that's your with certain exceptions, right? We don't want to super dose things like selenium or manganese or copper, those things. We want to actually keep somewhat low.

So you have to kind of look at the trace mineral complexes that you're on, but making sure you're getting good amounts of, especially things like zinc is is very, very important.

Most of my patients are on tons of zinc, and that is for good reasons, not only because zinc is really powerful for steroid or genesis and for hormone production, but it's also vital for your metabolism.

But perhaps one of the most powerful reasons we bring it on board is because it directly inhibits the absorption of copper in the body. So copper is a hallmark of angiogenesis.

So I talked about that was the magnolia bark extract, but it's also something that is necessary. It's a requisite for creating blood vessels. And so when you take zinc with food, if you take it on empty stomach, you probably won't be able to because you get such horrible nausea.

But if you take it with food, it's inhibiting your body's ability to absorb copper. And so naturally those go down. Over time, you can overdo the zinc, both from a nausea perspective, as well as getting your copper to low.

But that's something that you're going to be monitoring again, hopefully with a patient or with your provider. And so that's one of them that is also really, really critical.

And then there's a couple other things that are really, really powerful, and that's mushrooms. We love mushrooms. Mushrooms are one of the other most well validated and supportive therapies.

We have a lot of support from our conventional colleagues on bringing mushrooms into the conversation, and there is a fair bit of discussion about, you know, which one is good for X-Y-Z cancers, right?

And I tend to give people like all of them all at once just to cover our bases, because I'm making the assumption that these things are going to appear to be beneficial for multiple cancers if we don't have quite the evidence base for them, because we do have a pretty substantial ones.

That's your turkey tail duration especially. And then I also use cordyceps a fair bit. Partnerships are really good for people who are experiencing fatigue and for experiencing brain fog or chemo brain.

And I don't want to give people a general adrenal support because sometimes that can push up blood sugar too high or it's messing with hormones too much.

And so cordyceps is a really nice in-between space. And so that's really, really powerful. And then probably my other one is fermented wheat germ extracts, so don't let the name fool you.

There is no gluten in fermented wheat. Herb extract. This is a very, very highly processed chemical and it is derived from wheat germ, but it has really powerful, almost pharmaceutical like qualities to it.

It's been studied by itself as a therapy in a variety of cancers. It's been used alongside traditional chemotherapies and has proved to be a very powerful synergistic and making them work better.

And so it is typically safe for most people to be on and it is an easy, easy win for short. Yeah, that, I mean that those are powerful tools. Yeah. With I mean by controlling and the, the, the modified citrus packed and the obviously controlling galectin three and then controlling that, that inflammatory signaling that that's taking place, you know, which you can do then with, with the modified citrus pectin, your, your chemo's going to work better, your radiation is going to work better because your your cancer is going to have less of a defense mechanisms that it can throw at, you know, at the body to protect itself against the chemo.

And then a love with a fermented wheat germ extract. You know, if you can also work on starving the cancer, which is what that one does beautifully kind of blocking that that you know, the production of energy, that fermentation cycle that that cancer cells do, then then it's like a starving kid, you know, that always sudden have a boxer that's coming after it with with gloves, which is what chemo will be, you know, and you just kind of surround it that way.

So those those are some powerful tools. Yeah, absolutely. And there are also tools that seem to build on each other, meaning they get better over time.

Right. And there are things that you sort of kind of got to keep with, because all of these are largely trying to correct serious imbalances, often in people's metabolisms or serious levels of kind of toxic burdens.

I want to go back to kind of the practical, because that's one of these things that is it's not only preventing that latticework from being formed, but it's also binding to these kind of toxic buildups that people have in their body.

And if you kind of keep at it over time, you're getting more and more improvements. And so sometimes people will, you know, they'll come to you and they'll just be sort of a mess.

They'll be, you know, just in pain. They'll have lots of kind of high blood pressure. The metabolism is all over the place, but you get them on an integrative protocol and some of these really simple and gentle things over time, they're noticing that, hey, my blood pressure is going down because we're kind of eating away at some of these plaques that are formed in the body or their joint pain kind of subsides because they're getting rid of some of these kind of bioactive relations spaces in the body that collect in the three kind of is wrapped up in.

And so those are really powerful again throughout somebody's course of treatment. And also as a prevention speaks to a lot of people I get that are just as terrified because it's like what are the statistics now one in every two people gets a cancer at some point in their life.

So that's something that, you know, even personally, I'm taking on a consistent basis just because it's gently pulling these things out and some of the other things that are not supplemental, like sauna and exercise and fasting, these are such powerful and useful tools that just go so well with a lot of these things that we just discussed.

Yeah, I love it. Well, Dr. Schoen, it's fascinating. And I always love kind of hearing your chat and bring and your research out and all the training that you do for docs in regards to, you know, the photo dynamic in regards to and all these different fields, you know, it's always fascinating you bring so much information to to the table for so many people.

Thank you so much for our chat today. And I truly, truly appreciate it. Absolutely. Thank you for having me. Thanks.