Introduction to Doug Kaufmann and the cancer discussion

Well, Doug Kaufmann, it is such a pleasure and honor to have you on this segment of cancer breakthroughs. This is going to be revolutionary for a lot of people to understand what we're going to be talking about today.

It's really nice to be on again with you. You know, we've never met, but we've met indirectly. We talk a lot. My goal, now that I know and I watched your interviews is to get you on my TV show and really get people more interested or more aware of what you are doing.

Well, thank you, I Mean, this is such a such an important subject since, you know, we're seeing the numbers in cancer just skyrocketing. And we really need to to turn every stone and look in every corner just to kind of see what is it that we're missing?

How can we better be better at what we're doing? And you truly have worked hard in this arena. I just want the audience to to kind of know a little bit more about you.

You've been in this field for a long, long time. Doug Kaufmann, you're the host of popular TV show Know the Cause and it's airing in how many countries did you say?

100 to 200 countries to two. 100 countries. And it's. So fabulous. Michael To get these calls from people in Africa and Peru and so forth in Africa, they corn and they eat peanuts and corn and peanuts.

In my humble opinion, often our carcinogens, the mold that grows on them. So we'll we'll talk about that today and to change a whole family's mind that maybe we should not eat that eat something else and lower our vulnerability to hepatocellular cancer.

That's what some of these molds cause. So it's exciting. This is incredible. And then you you're the author of a lot of books. 12 books. I, I have I had the pleasure of having a number of them.

And I love these as the references you have. You know, you're your cooking books, you eat the right food. And all these are powerful tools for people that are battling cancer.

And so I highly suggest everyone to, to go to your website, knowthecause.com and really access these these different books and also access all the information that you have.

So you're really, you know, really been a pioneer and this arena. So this is going to be exciting what we're going to chat about. Good, good. Yes. Thank you.

So one of the things and your book here, you mentioned that that cancer is one of the most misunderstood diseases pretty much out there.

Cancer as a misunderstood disease

What what makes you say that? Because it is not a disease. Just as we dissected the human body here, you take the ear, nose and throat. You take the reproductive system, you take the bones, you take the eyes.

We have discovered that cancer isn't a disease. It lends well with the pharmaceutical industry if it was over a hundred diseases. And so it is we have a pill for this and a chemo for this and so forth.

What if cancer were induced by poisons, invisible poisons made by fungus? This is what I've begged for years. I think it is. We now know that half a dozen, according to Cancer Institutes, that a half a dozen of these poisons

made by certain fungi that we are commonly exposed to Aspergillus, you know, Candida, Penicillium, etc.

make invisible poisons. What if there aren't 100 types of cancer? What if there are 100 poisons that are manifesting or enabling, enabling certain tissues to grow lumps and bumps and sores that don't heal, and so forth.

And that's been the nature of my work. It was 53 years ago now that I landed in Vietnam. We were trained as a hospital corpsman, like nurses in emergency medicine, and then each of us was given a battalion of Marines in Vietnam.

Michael Sometime off the air. What a year that was for me. What a growing experience. Emergency medicine out in the field. I came home and I was sick and I wasn't the same.

Doug Kaufmann that I left in 1970. I came home in 71 with bizarre symptomatology, and today we blame much of this on Agent Orange or other factors, stress and so forth in Vietnam.

None of us look at the fact that those of us who were out in the field were chronically wet. Every month they drop off a new pair underwear and new socks, and we'd be dry for a whole day.

Then the monsoons would rain on us again, and I ended up with jungle rot and all sorts of problems that I never equated to mold. But when I got home, I realized that tuberculosis and jungle rot were both, you know, fungal conditions they call a mycobacterium.

They respond more to myco Part of that myco denotes fungus than bacteria. So I got a library book. I worked with Dr. Everett Hughes at USC Medical School back in the seventies.

And we didn't have a, you know, hey, Siri, we had to go to a library with a card. And I checked out an old parasitology book because Dr. Hughes said, Didn't you eat raw fish in Vietnam? Maybe.

Maybe the reason you're having the brain problems, the weight gain, the skin problems has to do with raw fish. Maybe you have a parasite. The book opened to one of the 1953 parasitology.

It opened to a chapter that said Yeast and fungi, parasitized man are the weight of man. I'm covered with yeast all over my body. Could that get transdermal into my bloodstream?

So that was 52 years ago or 50 years ago now. And it's been a learning experience that has been so exciting. I worked in your nose and throat. I worked in dermatology for years.

And as you help people get over their psoriasis with these doctors allowed me to use antifungal drugs and my diet. As they got better from psoriasis, they began telling the doctors, When I go in for a two week follow up, does this have anything to do with lymphoma?

Because remember that not that I had on my neck. Look at it now it's 50% of the size. We'd send them to their oncologist. They do the tumor markers. And lo and behold, their cancer was responding favorably to an antifungal program.

Serendipitously, we discovered something huge. And it's been my work, you know, on television the past 24 years to teach people to always have a plan B when you hear those words, you have cancer.

I've always found it fascinating that the standard of care for cancer is surgery, chemo and radiation. And two thirds of those are themselves cancer inducing carcinogens.

So I've given people a lot of hope to go back to their doctor. I've written this up in 2013, a couple of physician friends and I wrote a paper in published in Oncology News on how common fungal infections are and how they mimic cancer.

We now know pulmonary cancers aspergillosis write a mold called Aspergillus can grow in your lungs and look on radiologic findings and exams exactly like cancer.

So that's been the nature of my work is giving some good news to people who have cancer and diabetes and autoimmune diseases, as you're well aware of.

I'm familiar with your work. New hope. Maybe there's a germ involved in this. And when we talk about cancer, we have like the auto Warburg, where, you know, the cancer cells are then shifting more towards a fermentation style of of energy and then we're looking at fungus.

It's it behaves very similarly. So, I mean, can it then be that, you know, like you're mentioning that some cancer that we're looking at in reality isn't cancer, that it's actually just fungus?

Here's a published in the Journal Lung in 2013. Issue 191 is this a case series was presented with 27 patients initially diagnosed both clinically and radiological with primary or secondary lung cancer.

Fungal links, Vietnam, and early observations

These later proved to be fungal infections and all 27 patients responded favorably to antifungal therapy. These patients were diagnosed via biopsy. So that begs a huge question.

And then they were later found. Fortunately, they probably got a mycologist in that hospital and he said, Well, let's put these patients on Amphotericin B or some antifungal drug.

And all 27 responded favorably. But you ask a good question, the similarities. So I took understand that fungi can grow in a lump formation. Remember the paper on a nasal polyps?

They found ten different kinds of fungus growing in those polyps. So I set out at a meeting I gave to a group of oncologists in San Diego many years ago, 2016.

I think the similarities between cancer and fungus each thrive in a SAC formation, each metabolize nutrients in the absence of oxygen. Hence Warburg work, each generate a caustic poison called lactic acid.

Each depends on their host for sustenance proliferation and reproduction. Each thrive in the presence of sugar and die in the absence of sugar. Both the sac fungus and the tumor emit volatile organic compounds that dogs can sniff out.

A dog can find mold in your home and cancer both respond to antifungal medicines. In 2006, seen just an epic paper came out where they had repurposed the toenail fungus drug.

All it does is kill toenail fungus and it's now a well-accepted FDA approved cancer drug. I don't think that's coincidental at all. And they have their reasons.

You know, you go deep with these guys and they're wonderful doctors. Well, it's interfering with the hedgehog pathway. I'm sitting up on the podium. What a world.

I picture a hedgehog going down in or apparently cancer travels through a hedgehog pathway and four nuts inhibits that. And I said, Can I ask you guys now that we're friends yet?

I'm sweating up on the podium. My knees are knocking. Could it be that the reason sports works for cancer patients? The very reason it works for toenail fungus.

It kills fungus. And you could have heard a pin drop in that room. But afterwards they crowded around me and congratulated me. And I think what I've done is very much your history.

Also, I think you and I are farmers. We're planting seeds, and just like every farmer, a few of them fall by the wayside. But many of them sprout, and many doctors are now prescribing antifungals.

Thanks to your work. In my work? Yeah, I love that. And so what what have you what have you seen? I mean, you mentioned people are dealing with psoriasis and, you know, all of a sudden they take an antifungal psoriasis clear.

But also this lump disappears, you know. And so what have had you I assume you've seen a lot of those effects by people doing the type of diet, the antifungal diet, where you're then clearing out the different foods that are less likely to have fungus in them.

And then also then I'm sorry, clearing out the foods that have, you know, a likelihood of fungus and also doing antifungal type of treatment. So have you seen people then really have an impact on cancer wise?

You know, what's been so wonderful about this is a fellow came in to be on my TV show here maybe three or four years ago, and he was a pulmonologist and internal medicine specialist.

And he read one of my books and he called me and he said, this is unbelievable. And I'll tell you why I do Bronx. I put the tube down the person's chest looking for cancer, what's causing their cough and so forth.

And he said one time my nurse said, When you pull that tube up, it smells like bread. Isn't that interesting? And he said, Doug, the bottom line is I put I'm duty bound to put 100% of these patients on antibiotics.

You see, we pulmonologist believe that all bronchial problems are bacterial because they end in itis bronchitis, you know, and then itis means an antibiotic and swelling, you know, edema.

And he said, I've got to wonder if I did 100 broncs, how many of them I would call trout yeast. And so we did he actually did a couple of hundred and 80 to 82% of them weren't bacterial problems at all.

And yet understand antibiotics fuel, yeast and fuel from this. So we take an acute cough from a 13 year old in school and we assure its chronicity by throwing fuel at it because it was a fungal cough, not a bacterial cause.

This pulmonologist learned that you should open the patient's eyes immediately and ask the right questions. Do you live in a moldy home? Are you allergic to penicillin?

I think most people allergic penicillin are up to here with mobile. One more pill when they can get sick. When you were younger and I was when I got back from Vietnam, I don't remember my twenties that were a blur.

Alcohol was my best friend. Could you handle one or two beers? My friends would pick up a keg and drink it like that. I drank one beer and I was loopy.

I think that's an indicator that we're up to here with mold exposure. Any more mold or yeast in our bodies and wham! So a couple of doctors I worked with, I hired one of them and we wrote books, as you know and so forth.

We work clinically. They began to ask the patients psoriasis, Alzheimer's, gut problems, all sorts of gut inflammation problems, dermatology, etc. a questionnaire I put together and was basically, as you were a kid when you were a kid, did you grow up in a moldy home?

When you get out of the shower, do you itch horribly, whereas you didn't when you went in mold seems to be activated by heat. Just have you taken a lot of antibiotics and why do you ask these things?

Doug We now know that the most common forms of cancer, colorectal, lung, prostate, breast, etc. are linked to an increase in antibiotic intake. We have known for decades that antibiotics themselves mold metabolites.

Remember the mold that Dr. Fleming discovered was called Penicillium and the poison it makes we hand out like candy to kids today. It's called penicillin.

It has to be poison to kill bacteria. But we shouldn't be taking the huge doses that we're taking for limes and everything else, throwing antibiotics at people like it's going out of style.

So we put together a questionnaire and we began asking the new patients who would come into the clinic these six or seven questions, and we'd suppose from that, okay, Doug, maybe you're justified in putting this patient with psoriasis and headaches.

Maybe you're justified in putting them on diet. You can a bloodstream anti yeast and they stabbed in the gut anti yeast. But most importantly, what all these doctors have said on TV and we made a tape of this that we show on occasion on TV, all these doctors said, I think it was diet, you know, what you've talked about for decades and it was diet.

There are two kinds of food. The people with fungal problems should meet carbohydrates because fungi and thrive on carbohydrates. People don't know that means sugar.

Anything that becomes glucose when you masticating it up mixes with enzyme, you swallow it. It's sugar, things like a potato, starch, rice, grain, etc..

Evidence of fungus in cancer and antifungal responses

And the second one is not only foods that feed fungus, the foods that are a fungus. Earlier we talked about the South Sahara area in Africa where maize is their primary food.

Corn is intimately linked to hepatocellular carcinoma and AIDS. Do you think that's amazing that a food is linked to AIDS? Is it HIV or is it a human immuno fungus?

As I've argued for years and years? So we put these people on a diet and basically they could eat more proteins. This is before I knew, you know, all these diets and I was in I was in trouble.

I used to have lunch at the cafeteria with Dr. Hughes at at USC Medical School. And I was broke. You know, I'm a 25 year old guy working clinically in an allergy clinic.

And we had a tree. I bought this old house and I had two avocado trees in the back. So every day I'd take my sack lunch, I'd open to avocados needed. And this very nice woman who sat across from us every day said, You know, I'm a little worried about you.

And I said, Oh, y you know, hi, my name is Doug. And she said, I'm a dietitian here and I've seen you eat an avocado Monday through Friday. And I said, Yeah.

I said, okay, no way too much fat. You'll have heart disease, atherosclerosis and so forth. And it would take 50 of those moments for me to get it twice my IQ people, but they only learn what they're taught and they better not veer from that.

I think the last few years we've seen that you don't veer from what your honorary medical school taught you. And the more I began questioning it and studying it, the more I realized what if cancer grew as an end result of a fungal infection or infestation?

These fungi are, you know, several hundred species. Now we know off gas, poisons, allergists say, no, no, you know, fungi can cause a little sniffing.

And I say, wait a minute, that's mucous membrane, secretory iga tissue. What if they get trapped? What if they grow? Reproduce? What if they grow in a lump? We call it a polyp.

What if you have no idea? When you snare it out, you just throw it away. You don't test it for anything. What if many of the cancers they grow in lumps?

What if many of these lumps and bumps and sores that won't heal are intimately linked? Fungus, and I'll be candid with you, you probably saw this, right?

This is this a paper? I made a copy of it. The pan cancer analysis reveal cancer type specific fungal ecology, 35 different cancers. This came out of the Weizmann Institute in Israel Science Institute.

Man, these guys are rocket scientists. I had a study this came out of Cornell, UCSD and San Diego. All these hospitals collaborated, took old cancer tissue, 35 breast lung leukemia, 35 different kinds of cancer.

They said we found fungus or fungal DNA in that. I'm jumping up and down hi fi and the guy at the liquor store, you know, I'm so excited about this. It was absolutely amazing.

But they were careful to say now, although our data do not establish a causal relationship behind these clusters of fungus, they do suggest that fungi are sparse but immunologically potent organisms huge for me because I've been putting people on a diet and when I could, when the doctor would prescribe a couple of antifungals, I'm not a drug guy.

I recommend that doctors use these antifungals experimentally for two weeks. In two weeks, along with the diet, the patients would come back and Dr. Weekley out of Johns Hopkins ordered his nurse, Linda, who's still a friend of mine, 40 years ago, to put Kleenex in every exam room.

The patients would come back after two weeks and they'd emote. Look at my skin. Does this have anything to do with the chronic diarrhea I've had? You know, I've had headaches all my life in the last three days.

I haven't had any they emote, I think incredible. Incredible science has been totally overlooked. And that's where I come in before I die. I hope to make a dent in that before I die.

You truly do in that. So just to kind of reiterate, so people really understand. So they look at all these different cancers, they looked at the tissue and they found cancer and they found fungus in all these tissues.

Extracellular or I'm sorry, extra nuclear or or within the nucleus. Now understand these mycotoxins we've talked about when I give these lectures, these mycotoxins breach, the human white blood cell, they breach the nucleus.

They then genetically fuze with our DNA and you end up with what we call a hybrid. And I have written on this and written on this. I think cancer is a hybrid and they've come so close to making my discovery.

Yale University. 13 years ago, Dr. Elizabeth, I wrote her and wrote her. And, you know, they do they're off. They go on to a new project. But she was so close to figuring this out.

Yes, I think not maybe in everybody. But what this discovered was in 35 different kinds of cancer. Can you imagine the meeting in the room or on the phone or the zoom call with all of these specialists out of these major colleges?

And the first thing they said is, well, remember what we learned, medical school. We're not smart enough to understand the car cancer, so we treat the cancer.

How do you take 180 IQ, guy or gal, 26 years old and say, now you just back off the cause of ulcerative colitis, you just give them these drugs? I would have been a horrible doctor.

I would have lost my license on the 24th hour because I, I want to know not only that, I'm sick, but why I'm sick. And you're not allowed to ask that unless they walk into a doctor's office like yours, you're not allowed to ask, why is this going on?

So thank you. All. Thank you. I want to go back a little bit to the antibiotic again because I think this is important for some people to understand. So people, they have an infection to take antibiotic.

They feel better when they take the antibiotic and then all of a sudden they have something worse or the infection comes back, you know, it keeps reoccurring.

So then they think in their mind, well, it's got to be bacterial because I feel better when I take that antibiotic. But in reality, you are when you are immunosuppressed, when the fungus is there, then yes, there's going to be some bacteria that will grow and you will then kill that.

You will feel a little bit better. But then the next step you're then fueling more fungus and you're then, you know, you're creating more problem as you're going through that vicious cycle where you, you feel a bit better, but then it just gets worse and worse.

And then after a while, the antibiotic doesn't work. I was the subject of that in 2016. I think it was Ty and Charlene Bollinger. The truth, my cancer.

I lectured at that, hopped on an airplane, did a lecture for maybe 400 physicians that was in St Louis, got on another plane, went to Florida, where the Academy of Complementary Medicine invited me to give two lectures, and I went off my supplements.

I ate what they had in the cafeteria. And I'm telling you, I paid the price. I came home knowing knowing I had pneumonia after about three days. And I drove myself, got my little pickup truck and drove it over to one of these emergency centers in my little town here in Texas.

I knew exactly what I had. I knew exactly what I wanted. And the guy was totally cool. And he said, Okay, I'll prescribe that for you. Two days later, I felt so much better.

Yes, antibiotics are lifesaving agents. It was a serendipitous discovery. First of all, you know, it was a god discovery, not a man discovery. Penicillium Penicillium is now the base of so many antibiotics.

We antibiotic stewardship has been called upon by the American Academy of Pediatrics, internal medicine, general surgery. They're all screaming. For the past 15 years.

Hey, minimize your antibiotic use. And I hurt for these people.

Antibiotics, immune suppression, and cancer risk

I'll tell you why. Someday they're not going to give a patient to give an antibiotic to a patient with super devoted US media, you know, an ear infection and that child's going to have his tympanic membrane break.

There's going to be a lawyer that sues the doctor. We have reached the point. So I understand this. We have reached the point where we become crazy drug companies.

Our laughing this. But I understand a physician who doesn't give an antibiotic to a patient, but my prayer is that they will look at goldenseal. It can make a beta glucan everything you've studied for decades and they tell me, okay, take it easy, take a few days off your fiber, you got a little fever, your 101.

And you know what I would do if I was a doctor? Just sign here that you've refused the antibiotic and do. I'll start breathing with the with the humidifier, you know, get clear your lungs out and so forth and get back with me.

Just call my number and leave a message. You know, this is the way I would practice medicine, but when you see 50 patients a day, you can't do that. It gets crazy.

There is no doubt in the scientist you should have heard when I gave this lecture to these oncologists and I had breast, colorectal, lung, lymphoma and prostate, and then I referenced from the scientific literature how elevation of intake of those antibiotics induced actually induced these cancers.

You could have heard a pin drop. You don't learn this. And antibiotics are being grossly overused. Doctors know that the Center for Disease Control said two years ago only about 60 to 70% of are needed.

And yet we're throwing them at everybody. Now, you and I are different kind of guys. Most doctors, it's no big deal. Antibiotics don't hurt anybody. Billions of people have taken them.

Yeah, millions are dying. And that you zoom right over their head. And so I'm trying to educate the general public. I do a podcast couple of days a week where I can actually talk and not a podcast, a live show on Facebook where I can actually talk to my audience.

And they have a lot of questions. I tell them, Look, I'm not a physician. I have hundreds of testimonials. I don't request them. People say, you know, my tumor markers now are down, way down just because of your diet.

Could that be when you begin starving pathogenic organisms, you'll see changes in all sorts of markers like cholesterol and like a PSA. All these things that you and I know about diet is everything, and we can't get America to understand that because their health care workers have no concept how to get back to the basics. Yeah. Yeah.

And then food obviously is our greatest drug. I mean, that that that someone would take, you know, 2 to 2 plus times a day. So, I mean, to to know what you're eating, the impact of what you're eating, it becomes huge.

And I want to get back to that in just a little bit. But I wanted to also kind of equate, you know, we're talking about the antibiotic and then go then to people taking given the chemo drug so and so people can understand kind of a little bit of the correlation.

So you take the antibiotic, you feel better, and then after that, you've, you know, you create more problem. So you have then, you know, people do the chemo drug that the lump shrinks and, you know, they declared, you know, no evidence of disease.

And then lo and behold, you know, now it's stage four. It's in my brain, it's in my liver, it's in my spine. It's it's it's all different places. So it it is it's the same type of scenario where you are.

Then again, you are making yourself more immunosuppressed pressed and you are then fueling the fire that is creating the initial issue. But you have this kind of middle success, so to say, you know, with the tool that you have, just like an antibiotic killing bacteria, but then that promotes a fungus and the fungus is kind of the main issue.

So, so the key is obviously to address the the and the causative factor. And if we look at it as as a as a fungal and you're mentioned, obviously it's not all fungal, but fungal is a big, big factor.

And that is, you know, that we're not looking at then how do it is? Is it then how do people when they do biopsy, is there a way for people then to ask, you know, can you look to see if there's fungus there and to understand, you know, is this fungal versus just straight cancer?

But I mean, as we're saying, then cancer, you're talking about being kind of like a hybrid. Yeah. So so fungal can be there anyway. Okay, great questions.

Number one, the drug spore knocks the toenail fungus drug that was approved or repurposed as a cancer drug. It does two things. It induces apoptosis. I'm sounding important.

It burst cancer cells. It inhibits angiogenesis. You're kidding. This drug stops cancer from leaving the breast lump and traveling to the brain. Why isn't every oncologic patient on this drug?

I've minimal side effects. We've never seen a side effect. Elevated liver enzyme, never seen it from any antifungal drug. A number two. If you always do what you've always done, you'll always get what you've always got.

I at one time went into a cancer clinic and I couldn't believe it. And here's why they were eating donuts. They're too.

And the nurse explained to me, Hey, these patients die of malnutrition.

We don't care what they eat just so they get. But they did have diet soda, so they wouldn't gain weight. I mean, I what a dichotomy. Walking through that place.

I went on my car and I almost started crying. You got to be kidding me. Emo therapy. You would hope that chemotherapy, some of which is Michael talks.

You would hope that chemotherapy would kill the lump before it kills the big £180 person. I would like to tell you, I can easily find stats on the success rates of chemotherapy drugs.

I can't find them. And when you can't find something that isn't easily accessible in medicine, something's going on. Somebody doesn't want you to know those stats.

So my next draw is try not to get cancer. I realized when I got back from Vietnam and then I fixed my own problem a few years into it, I don't want to go to a doctor.

I took my dad, my grandma had, you know, diabetes, took them to doctors all the time. And I said, boy, I hate when I turn 60 years old. I got to start going to.

Doctors don't have one today. Don't know if I have a prostate. Don't know what my cholesterol is. I feel great. Worked out hard yesterday, dripping sweat.

I eat a very, very low carb diet at 74 years old. I feel better than people who are 25 years old. By the by, I was drinking away my problems at 25 years old, diametric to who I am today.

Alcohol fuels cancer and fuels fungus. The similarities are amazing, but you hit it right on. I don't think any antibiotic hurts anybody, especially since 40 years ago.

Brilliant people came up with probiotics. Remember biology in high school? You know, first thing you learn bio is life antibiotic. You know, we're going to come up with an antibiotic.

Diet, fasting, and practical antifungal guidance

Probiotics restore the delicate terrain and which I believe many diseases initiate. We're now equating depression and also skin problems with an aberrant terrain in the gut.

Restore the good bacteria to the intestine. Look at bacteria, leak fermented foods. I love sauerkraut and beets. Fermented beets and so forth, rather than yeast, fermented foods, you know, think alcohol when you think yeast fermented foods. So if I was on an antibiotic in the past 40 years, maybe once that was in 2016 or 2017 when I knew I had if you don't have a doctor, you've got to behave differently.

You don't get a get out of jail free card on an antibiotic every time when you get your friendly doctor on the phone or go see him poke and prod and take another antibiotic if you get nothing out of this hour, we have spent together understand that the more antibiotics you swallow, the more vulnerable we, the more at risk you become for breast cancer.

And on top of that, what your cardiologist told you. Yeah, a little glass of white wine isn't going to hurt you. A glass of white wine in night times 365 nights is 59 bottles of wine in a year after you've 100 bottles, you go to your doctor and say, you know, I've taken a shower and I feel a little lump in my breast.

Gee, Linda, I don't understand why it's amazing to me what's out there in the scientific literature that doctors have turned their back on, hence people like you and I who can sit down with people and begin to teach the real truth.

They're not bad people. They're really good people. I have a lot of friends who are doctors. They're really good

people. But because they're so bright, they're honor bound to do exactly what those pharmacists taught them during medical training.

And that's a reach into the pocket, scribble on a little pad and send it off to as many pharmacists as you can do. I don't take drugs. And at my age, John and I, my producer and I were laughing.

We're both old guys. We should be on eight or 11 drugs. You know, at our age. And I make a food, my medicine, and I feel great. So yeah, try and stay away from all but absolutely necessary.

Doctor appointments is the way I feel. And as we conclude, what would that diet look like? I mean, we talked obviously about, you know, staying away from things that turn into sugar quickly, you know, like we eat a potato, you know, things that have fungus on them, you know, like corn you were talking about and then sugar, you know, that feeds fungus.

So can you give a little bit of a picture of what a person should be eating? And, I mean, the best thing is to, you know, get the book and then you have so much information but just kind of get a feel.

And so people have a feeling. And, you know, thank you for what you do. I, I now have indoor plumbing. I don't need to sell books. Everything in my life is so good.

Let me give you a your audience here. A few tips. I the carnivore diet I studied kind of fascinating to me that you can eat what what walks on the earth or flies or swims and or their eggs for an extended period of time and have some of these serious diseases go into remission, just diametric to I like the keto diet I love because of the way that seizures would be stalled in children that you know had we're on a ketogenic diet.

My diet was born 50 years ago and I thought these diets were far too restrictive of carbohydrates. And I learned that carbohydrates fueled the mitochondria, you know, got lots of energy when you eat lots of sugar.

Ah, my mom thought that. Anyway, the diet consists of I allow some carbs, I allow some fruits. I like berries, I green apples, more malic acid or apple cider vinegar in them.

I allow carrots even though they're high on the glycemic index because carrots have self care and all a potent phytonutrient that kills fungus. My diet is different.

I eat a lot of meat, but I won't eat regular meat. I eat grass fed ham only grass finished meat. I think there are two kinds of meat. I won't go into that.

I love eggs this morning, but I have a grapefruit, both sides of it. By the way, last night I had three carrots. I know this sounds bizarre. I had three carrots to stalk, two celery and a quarter of a head of cabbage.

I don't normally like that. Normally I have chicken or fish or something like that. If you go back to the simplistic life, the grandma and grandpa used to make for us and you stay away from fast foods, folks, it's a chemical infusion into our bodies every once in a while.

I think that's fine. You don't have a lump growing on your neck or doubled over with constipation or diarrhea, or have a gut disease or have depression and stay away from those things.

Go back to the basics. Allan Cott, a friend of mine, a medical doctor, psychiatrist, wrote a book called The Ultimate Fast, and he told his psychiatric patients for five days, Don't eat, come back and see me on the fifth day.

And he sat in that old sofa in New York City one day decades ago with a tear in his eye. Doug, you can't believe when people don't eat how their symptoms change.

And so he is a psychiatrist. You as a general practitioner are all the physicians I've worked with. It transcends cancer. It's all fields of dissected medicine.

If you want to know how to get better, watch a dog when they're really sick, they don't eat. So I put 12 drops of chlorophyl in their water because they do drink and within three or four days they get better.

And we laugh at Doug's So the diet is really it's simple, lots of veggies, green veggies and so forth. So we should call the diet them the Doug diet. How about Doug Kaufmann and Doug Kaufmann?

Yeah. Yeah. We put together a Kaufmann diet and a Kaufmann two diet. And it leads into once you're feeling better and you want a little bit more, you want some grapes or a piece of watermelon or something, then delve into that.

And that's what we teach. But most of what I do for a living is teaching people how to eat this, this new fasting. You know, I kind of like intermittent fasting.

I really like these new diets I'm seeing that are so restrictive. I could I wouldn't think that a person could live on, you know, one of these diets where you eat meat and eggs.

They're not only lifting, they're doing wonderfully. I don't know if that's a diet that should be followed for a long period of time, but if I had cancer, I'd put myself on ketogenic or more restrictive diet and I'd give it a month.

I buy new pants because your 32 waist is going to go to 28, but who cares? Just people need to know if they're suffering with the disease called cancer, that there are options that your doctor doesn't know about.

Ask your doctor for Sporanox on my website. I have a link getting started down at the bottom is doctors fungo protocol. Print it off. It's a reference from the scientific literature.

It's two pages, hand it to your doctor and he or she won't be so shocked that someone is actually talking about using Sporanox and toenail fungus, drug and changing your diet.

And it's really work for a lot of people who've written me. I love it. Well, Doug, it's always such a pleasure and you're doing such amazing work and reaching so many people and changing so many lives.

Thank you so much. The honor was mine. Thank you so much. Good to see you.