Introduction to Dr. Monisha Bhanote

Welcome back. I am so excited for our next guest because I know that this is just going to be a beyond fascinating conversation today. We have Dr. Monisha Bhanote with us.

She is a quadruple board certified physician. And as someone who just has one fellowship board certification, I can tell you to have a quadruple board certified physician is no easy feat.

So like amazing kudos to that. And then on top of it, she trained at the Andrew Weil Center for Integrative Medicine. So she is integrative medicine, training and she really applies a whole body approach to her patient care.

And she brings a unique perspective that really no one else has. So Dr. Bhanote, welcome. Thank you so much, Dr. Jenn Simmons. I'm so excited to be here and talk to everyone about breast cancer and what I know about it.

Yeah, because you do have vast experience in both breast pathology and in taking care of people with breast cancer. But what I'm curious about, and I'm sure what everyone's curious about is how does a quintuple board certified physician go and make that shift to integrative medicine?

And how did you find your your love then and what you're doing right now? Like, how did you how did you arrive at that? Yeah, thank you so much for that question.

So here's the thing. I've been in pathology for a really long time and I have been looking at so many human cells under the microscope with people who are experiencing, you know, inflammatory diseases from like some kind of colitis and reflux to more cancer like conditions.

And looking at them going, all right, yes, we have the diagnosis, but why is our people getting better? Why are the treatments we are applying which all of us who went to med school go?

All right, here's the diagnosis. Here is the treatment. But why aren't people getting better? So. So where was where was the focus of your practice initially?

What what did you initially do with your training? Yeah. So initially I actually did internal medicine, which that was decades ago. And I found that at that time that was deeply unsatisfying both for me and for my patients, because they weren't getting better.

And I was like just seeing my same progress notes, not making progress with them. So then I dived into pathology and I trained at NYU Winthrop Hospital.

I got a lot of my training in New York. I trained at Cornell for psychopathology, and I also trained at University of Rochester for breast bone and soft tissue cancer.

So I. So why was that important to you? Why was learning about pathology important to you in your quest to help people get better? I believe that learning the pathology and really seeing something that is more internal to me.

What's fascinating, like the human body inside and how everybody's human body is so different. Yet we're born with these types of cells. And whether they're breast cells, lung cells, gastric cells, all these different cells, we were born with them.

Yet why over time do some individual cells become damaged whereas others remain healthy? So I wanted to see what is the pathogenesis behind all of these diseases developing.

From Internal Medicine to Pathology

And that's where the biology really came to play. And looking at what I call angry cells and going, all right, I heard these cells so angry and and I will tell you, there's a spectrum of angry cells, especially in breast cancer.

You know, when you have over 30 different types of breast cancer, why are some of these so angry? And what's going on here? And that's what really fascinating.

They have to be angry or can they just be unhappy? I'm no, they're pretty angry. There's a few little unhappy. Little maybe those could be the ones that are like, you know, the a typical ones that are just a little bit unhappy.

But yeah, the cancer ones are totally angry. So you learn more about the pathology and really seeing what it looks like on a cellular level. So how does that motivate you to kind of make this holistic shift?

Yeah. So seeing all this and then also being in, you know, what we call tumor boards where we review every person's cancer diagnosis is this. And there's an oncologist in the room, there's a surgeon in the room, there's a radiologist in the room.

There's a pathologist in the room. Now, if you're lucky, there's also a psychologist in the room. But having these discussions around, all right, what's the next treatment?

Are we cutting it or irradiating it or are we giving drugs to it? What's going on? And I found that the patient was lost in this space and we kind of forgot what's going on with the patient.

And we're just so hyper focused on this tumor and this diagnosis. And the unfortunate part is, I didn't see people improving. I saw all these breast cancers coming back ten years later and people developing new cancers ten years later.

So I'm going, why is this still happening? What is the missing link there? And the missing link for me was lifestyle. Lifestyle plays a huge component in the development of any disease.

And that's what led me to investigate. All right. Well, what are the lifestyle parameters? And led me to the Andrew Weil Center for Integrative Medicine.

But that's a big jump because we're not trained to think that way. And I know having practiced breast cancer surgery for 20 years, I wasn't thinking about lifestyle until I had my own diagnosis.

So what is it that gave you that perspective, that enlightenment meant? Because, you know, we have very similar training. And yes, people would talk a little bit about diet and exercise, but we never really knew what that meant and we thought that that was like kind of dressing.

Yeah. So for me, I wouldn't say it was my, my health journey per say where as for some individuals that is a for me it was really seeing what was going on with my friends and my colleagues and how come people at my age, you know, now, now a decade ago, but why at that time are my colleagues on medications?

Why are my colleagues, you know, mentally just drained and what's going on in their bodies that's not going on in my body? And what am I doing different than they are doing?

And why can I manage stress better like bring on the work, give me piles of slides to look at. I see it as a meditative approach to just looking at these beautiful cells, sometimes angry under a microscope.

All right. And why is it that I can handle this differently? And so it took me down this path of going, what is going on with my colleagues? What is going on, my friends and family, and how can I help that?

And helping them in turn really turned into me, helping a lot more people. Know. Everything that I'm doing now and

really finding that lifestyle is the key.

But also I love food. I'm a total foodie and I'm not going to give up food and nobody's going to give up food, right? But what food was I eating to keep my energy up?

What food was I eating? That's different than, say, my colleagues. So really looking at how I was addressing my gut microbiome, which we weren't even talking about the microbiome ten years ago, but thinking about how are we addressing our microbiome, how are we addressing our mind?

So there was a few things that I was internally doing without realizing that that is the key to health. So that's really a tremendous realization. And then you went and did training, integrative medicine, training.

What made you gravitate towards the cancer population in the breast cancer population in particular? Yeah. So I was diagnosed over a million cancers, so I've seen them all, okay.

I've seen a lot of cancer and I was fascinated by the breast part of it, for one, because this is when you think of the breast, it's an organ that's kind of external to us, right?

So it's not one of the any terminal organs.

Why Integrative Medicine Matters

But how can this this thing that makes us women be influenced by so much? And why is one in eight women having breast cancer? I mean, my youngest person I diagnosed was 18.

Her genetics was normal. Genetics totally normal. So when people are like, oh, my family doesn't have cancer or I don't have the gene and they stop worrying about it and I'm like, well, 95% of cancer is not your your genetics, 95% of cancer is your lifestyle.

So that's where I'm like, I can really make an impact because people need to know this. One of the worst things is for a person to come to me. And actually many of the cancer patients that come to me, they're like, Why didn't anybody tell me this?

Why didn't anybody tell me that? What I do every day from what the food I put in my body, from how I move my body to how I sleep, to how I manage stress is going to impact with the development of chronic disease.

What anybody tell. Yeah, and I'm sure your answer was the same that I've been giving and it's that they simply don't know because this is not what we're taught in medical school.

I believe it's a combination of two things. One, we aren't taught it, but two, depending on where you are trained and where you're working and what country our health care system is built exactly the way it was meant to be built.

It is built to have you coming to the hospital when you get sick. It was built so you get medications that you have to stay on and paid lots and lots of money for.

So you think you're getting better? That that is our health care system. We haven't been in a place where we are really focused on prevention. Now, imagine if we did that and what kind of world we could live in.

But unfortunately, sometimes money is more powerful than people realize. And that's where, you know, our focus has kind of gone. So I think bringing the focus back to the people, bringing the focus back to what can really transform the health of not just the U. S.

but our entire planet, and how we can really support people in this. And that comes back to the basics, the basics that people are missing because they think they go to the doctor and the doctor is going to give me a pill and that pill is going to make me better.

That pill is addressing a symptom. That pill is not preventing your disease from further progressing. It may be slowing it down, but your disease will progress.

Right. And that pill will not reverse your disease. So only you can do that. So you really embody food as medicine. So what does that mean to you? So I see food really as our fuel.

It is our life source, right? So it is what gives us our energy. But it's interesting because if you actually think about food and we have to think about ourselves, we are 50% human and 50% microbiota.

And what I mean by that is we're only half human, really. We have almost a 1 to 1. I think it's less than that. Maybe it's it's I think well. Just from a genetic standpoint alone, we are 10% human and 90% microbiome.

So our microbiome may not make up the volume the majority of the volume of our of our tissues. But it definitely makes out of it makes the overwhelming majority of our genetic material.

Yeah. Which is. Crazy. But if you think about that, what you're doing is you're feeding your microbiome, right? So you can either feed a microbiome that is going to support you with anti-cancer nutrients and oxidant free radicals fighting metabolites or you can feed it with something that's going to contribute to disease.

Right. So can you talk a little bit more about the microbiome for people who don't really understand what that is and what it means? Yeah. So when we think of the microbiome, that's really it's a collection of our genomes of microbiota and microbiota you can think of as they're going to be your bacteria, they're going to be your protozoa, your fungi, all these different organisms and now these terms are kind of used interchangeably, microbiome and microbiota, right?

But the microbiota is really the organisms that are responsible for helping in digestion metabolism. Your immune response? I mean, 90% of your immune response lives in your gut.

So your gut not healthy. Can you imagine how sick you are all the time? I think I think people are starting to go, oh, my God, why am I sick? And starting to connect that.

But so your microbiota are these organisms that help you break down your food but also help you build up the neurotransmitters and vitamins and minerals that your cells need in order to function.

So what do you think? The number one thing that people can do when they're on a breast cancer journey to improve their health and start to heal? What's that? Number one thing for people.

Is to address their microbiome. Number one, you can not address any disease without addressing your microbiome. I have found that most individuals actually all individuals I'm seeing that are dealing with any chronic disease or on the verge of a chronic disease and have symptoms, have something we call dysbiosis, which is an imbalance in their microbiome.

So ideally we want to be in a state of normal meiosis, right, where we're maintaining that homeostasis between this relationship, between our body and our gut, right?

We have a symbiotic relationship. So we want to get into normal, normal, normal meiosis, but we're mostly in dysbiosis and that is influenced by a number of factors that some we have control over.

So we would want to control those whenever possible. So first of all, how do you know if you're in dysbiosis? Well, you can look at it from two perspectives one symptom y symptomology and two, testing, right?

So if you're experiencing any symptoms and they don't need to be just gut symptoms, you know, yes, we have the bloating and the indigestion and maybe the constipation and diarrhea, but also look at other symptoms which are connected to your gut.

And that might be skin issues like eczema, acne, it might be headaches, it might be anxiety, depression, it might be respiratory issues where, you know, maybe there's something going on in your lungs.

Right.

Understanding the Microbiome and Dysbiosis

So we got to think about this, that the gut sends and creates these chemical metabolites all throughout our body, through the blood supply. And so any symptom can really be traced back to how strong is my gut, how healthy is my gut?

And then actually in your data, we believe that a lot of disease stems from the gut. So, you know, a 5000 year old practice of either data, we're always looking at how is somebody's gut and how can we make sure that we are addressing that so they are not developing diseases.

You know, like I see a lot of women after breast cancer treatment and they've had chemotherapy. Chemotherapy maybe indicated and in some situations, many situations.

But at the same time, chemotherapy will destroy your gut. So when your gut is further destroyed, what happens now? You're developing autoimmune disease.

So how many patients have we had that had breast cancer and then a year later develop Hashimoto's? Thyroiditis Well. Vice versa. Or. Vice versa. Yeah.

Because it's the gut, it comes down to the gut. Yeah. So what are you using to test to see if people's guts are healthy? Yeah. So we want to look at at least five factors in the gut.

We want to look at it from a point of a do you have any mal digestion? Meaning you may be eating the best diet, but maybe you're not able to break down those nutrients because you had your gallbladder out and you don't have those enzymes or there's something else going on where you're not able to break down the nutrients.

We have to look at it from an inflammation spectrum. Maybe there's something in your gut lining that has been a damaged and we can create a more protective barrier there.

So toxic metabolites don't enter the gut and go into the bloodstream. We have to look at it from a infectious pathogenic point of view, meaning are there infections that we may have picked up that are inhibiting our body from doing what it needs to do?

We have to look at it from a metabolism perspective, meaning are we creating the chemical reactions that our body needs to be anti-cancer? Meaning are we creating in short chain fatty acids like Butyrate or one of the short chain fatty acids has anti-cancer properties.

Guess what? People do not have short chain fatty acids because they're not eating the right foods. So and then lastly, we need to look at that balance in that gut microbiome looking at the commensal bacteria identifying, all right, do we have an overgrowth or maybe we have something called a microbiome deficiency because we've taken years of antibiotics or we've taken so much chemotherapy that now we've wiped out the microbiome.

So it's a complex strategy, but one that proves to be truly beneficial, meaning you're really building your body from the inside out. So is there a test in particular that you use to to look at mal digestion, inflammation, infection, metabolism and mood and microbiome balance?

Yeah. So there's a number of different tests on the market right now and I will use a variety of them depending on where my patients are located. And is this something that people can do independently or do they need to be working with a practitioner like you?

Yeah. So I have had patients who have tried to do this both independently and with health coaches or with friends. And the results have not been, let's say, the best that they could be because there's something different when you're working with a doctor and the way a doctor understands the human body on this different level than just these external lab results.

I mean, me as a pathologist, I've run medical laboratories. I'm the one who validates these tests. So my depth of scope for laboratory testing is I'm going to make sure that we're not just going, Oh, this is high, this is low.

But we're really looking at it from a pool perspective because you can also create imbalance by overdoing something. So it's it's a very finite way of doing things.

So I highly suggest working with a either an integrative or functional medical doctor. It's so funny that you mentioned to overdoing because I see people all the time.

You know, we have this mentality that if some is good, more is better. And so I see people all the time on super, super high doses of probiotics that they just take daily for no reason at all because they think it's good for them.

And you look at their gut test and they have like so much organism overgrowth so I think that this is one area where it is so beneficial to have someone who is familiar in this space to be advising you.

So let's start a little deeper into the microbiome and what affects the microbiome, because I think this is really important for people to know because I think we're encountering a lot of things on our end in the course of our normal usual daily lives that we have no idea what impact they actually have on the microbiome.

So we talked about the kinds of things that damage the gut. We talked about antibiotics, we talked about chemotherapy, what other things that people will usually encounter will have a detrimental effect on your gut health.

Yeah. So let let's put it in the perspective of what can influence your microbiota, what can influence your microbiome, because and that can. Be both positive and negative. Right? Yes.

So so so I want people to understand that there is, like you said, a little bit too much or a little bit too little. Right. So what's going to influence the microbiome?

Without a doubt. Diet. I mean, that's been established. There's no question about that medication. So not just antibiotics, but other medications can influence the microbiome, your ingestion of pre and probiotics can influence that and sometimes in a good way and sometimes in a not so good way.

Right. If you're drinking a lot of alcohol, if you're smoking the state of your immune system, your hygiene, if you've been exposed to infections and let's not forget stress.

All right. So we want to make friends with our gut microbiome. We don't want them to be our enemy. Right. So we don't want them to be like what I call like enemy intruders.

And now they're like, oh, let's go make some angry cells. Right? We want we want that happy gut microbiome, which goes, okay, let's go keep these cells healthy and happy.

So those are just a few of the things that will influence with your microbiome. We talk about stress and in particular a couple of stressors that I think are probably helpful to your microbiome.

Talk about why? Because things like fasting, fasting is a stressor and yet it's very helpful for microbiome health. Yeah. So fasting for some individuals may be a good stressor, but you have to see where is that individual coming from.

Right. Because we also have the individuals who are putting food on top of food. On top of food. On top of food. Right. And imagine the stress that that is causing.

So I like to focus your dietary intake from yes, I do do intermittent fasting, but I like to take it from the perspective of what does my body need to function?

And most people are not getting those ingredients like they're not getting those vitamins, minerals, antioxidants, phytonutrients, any of those omegas, you know, any of this stuff.

They're just missing the pieces. So they're basically like running on empty and it doesn't really catch up. I mean, now I'm seeing it catch up to people in about their twenties and thirties, but like from a cancer perspective and the way cancer develops, it catches up to them around their forties.

I mean, we're seeing this boom of cancer right now, and I suspect that from the last couple of years what's happened, we're going to even have a bigger boom because we've really changed our lifestyles.

Some have taken advantage of it and created an even better lifestyle, but a majority have not. Yeah, I think that it's going to be a combination of things.

I think it's the stress of the last few years. I agree that it is the vast majority of people who didn't use these last three years to improve their health and in fact their health has worsened.

And I also think that we had a decrease in screening. And so the people that didn't get picked up in that window are now going to present. Absolutely. Yeah.

And they'll present with a more progressed disease also. Yeah. If, if that's what they were destined for. I also think that we are picking up a, an entire group of cancers that probably wouldn't progress to be clinically relevant.

And I say that coming from a place that if you look at the annual statistics of the number of women that die of breast cancer, it doesn't matter how many women we diagnose, the same amount of women die every year of breast cancer.

It's been just a steady number. And so I have to think that there there is some inherent disease that we're just not able to influence adequately and be the last aggressive disease we're definitely doing better with.

And we're able to reverse that. But there is there is this subset of breast cancers that up until now we haven't been able to positively influence. But I also believe that it's due to a complete lack of awareness of what the patient can do to influence their future.

Because nowhere in the current paradigm are they asking the questions that you're asking.

Lifestyle, Stress, and Breast Cancer Risk

Nowhere in the current paradigm are they asking, why did these cells get angry? Because breast cancer is a normal response to an abnormal environment, right?

It's not. Breast cancer cells are fine. Yeah, absolutely. I mean, we're making cancer cells every day. Why do some people fight them off? And some people, they progress into masses and even become metastatic right.

So that comes back to our lifestyle. But the one thing I do want people to keep in mind if they have breast cancer, is to realize that your journey and your response to anything is going to be very different than somebody else's.

And what I mean by that is there's 30 different types of breast cancer. So if you're comparing yours to some person that you're in a group with and you're like, Well, why did they only need surgery and why are they doing much better?

And now I need to be on this for ten years, and I'm not going to take it because they didn't take it. I think you have to really look at, first of all, what is your cancer, right?

Like if somebody came to me and was like, oh, I had a low grade tubular, invasive ductal carcinoma, and I'm like, okay, yeah, it's out. We're we're in good shape.

But somebody comes to me and they're like, Well, I had an invasive micro papillary. And I'm like, That one scares me. And I'm like, Micro papillary is tricky.

It likes to go everywhere it goes to the lymph nodes. You know, it's just one of those that kind of weasels its way at the body. So really looking at, all right, if you developed it, what are we dealing with?

Because everybody's tumor is completely different. The state of the angry ness of their cells is a spectrum. Yeah, some are some being worse than others.

And, you know, in conventional care, we're really looking at it as this is a stage of your tumor. And at this stage, this is what we do and this is what the guidelines say to treat.

We have to look at the whole person. I think that we have not gotten specialized enough in the area of breast cancer. And I still think that we are operating in a pretty archaic way in that tumor size is pretty meaningless.

It's a function of, you know, at what point you found the cancer. And it's really about biology. And biology is a reflection of what you're talking about, about about pathology.

And I think in addition to people having unique pathology, the their why is unique, what got them there is unique. And that's the part that really needs to be identified and explored more.

And that's really not happening at all in the conventional system. I would tend to agree. I mean, I know when any of my cancer patients, especially my breast cancer patients, when I have this discussion with them, I'm like, Can you tell me a little bit about what was going on in your life six months to 18 months prior to the diagnosis?

Without fail, there is always some kind of perceived traumatic event without fail. Yeah, and they don't recognize it and their physician doesn't recognize it.

But without recognizing that, it's going to be really challenging to address the future of that individual, you have to recognize that. You have to address it.

You have to figure out coping tools to manage it. So and that stressor usually is the straw that broke the camel's back. I mean, that that alone probably didn't cause the breast cancer, but it was the thing that was that pushed you over the edge.

And we know from studies that with women who present with early breast cancers, 30% of them will have trauma in their background. But when we look at the metastatic population, 80% of them will have trauma in their background.

And I think if you're not talking to your patients about trauma, you're really not serving them fully. Absolutely. I mean, I think the missing link is what can the individual do?

How can we empower them right. So whether it's from that gut microbiome perspective and guiding them in how to have a more diverse microbiome, to how can we manage stress, what what should we be doing on a regular basis?

What are the tools that I want to incorporate into my daily lifestyle or as I call them, rituals? Like what are some rituals and maybe their anti-cancer rituals, you know, like this is this is what I'm doing to take care of my body right now and what are these things?

And they're going to vary from individual to individual. I mean, I have people who are like, you're not going to get me to meditate. And I'm like, You don't get to meditate. Guess what?

There's other things you can do to manage stress. Let's talk about what you do like to do. Yeah, absolutely. So I love what you said about empowering patients and the first thing you mentioned is strengthening your microbiome.

So what kinds of things are people doing to strengthen their microbiome? Okay, so we want to make sure we're incorporating a lot of fiber rich foods. Okay.

So these are going to be your things like fruits, vegetables, legumes, whole grains. They're going to promote that microbiome biome, diversity. Guess what does not fiber three things that does not have fighter dairy sugar meat which is what mostly people are eating okay at least a couple times a day.

Because when I go through the how many times a day, breakfast, lunch and dinner, are you having any of these things? It's pretty much all day, every day.

And we know that from a large study in the UK, I think it was over a million women were evaluated and the ones who were eating a meat predominant and we're talking about things like just like half a hotdog, like not even like that much.

Right. But having things like kebabs and sausages and hot dogs and chicken and bacon, having this increase their risk of breast cancer. Well, yeah, that's because your microbiome gets changed based off of the food that you eat.

So focus on fiber. Rich food is number one. All right. And the other thing you can do is we've already kind of touched upon pre and probiotics, right?

So I always tell my patients that they should be having some probiotic rich foods with each meal. So if you were eating three meals a day, breakfast, lunch and dinner, I want you to have something that has probiotic rich foods with it.

So that might look like a nondairy yogurt or coffee here. That might look like sauerkraut or kimchi. And yes, you can even replace your glass of wine in the evening with some kombucha.

All right. And then probiotic rich foods. Right. So if we think about the spectrum of what the microbiome needs, it needs prebiotics, probiotics and post biotics pre you can have with your food pre is going to be your things like asparagus leeks onions bananas, garlic.

Some of these things are prebiotics they help feed the probiotics, which is your microbiome gut bacteria. So what that and now the post biotics which were those things like short chain fatty acids like Butyrate that I mentioned that is anti-cancer.

You can't really take those. Those are metabolite products from your probiotics. Right. So you got to eat this chain for all of this to happen. So fiber prebiotics, probiotics, other things to think about from a you know, one of the things I didn't mention is I'm also trained in culinary medicine, which is really taking food.

I know that's where that's where we were going next. Which is really taking food and looking at the individuals like like so like what is their dietary pattern?

What are they like to eat? What is their ethnic background? What is their cooking style? Are they in the kitchen or are they not in the kitchen? Like really taking a look at all of this, incorporating that.

So we want to look at some of these anti-inflammatory spices that you can include in your foods. You know, people are doing trauma to metric lactase, but what if we were regularly eating turmeric?

All right. Like I have it in almost a meal every day because that's part of my culture. That's what I grew up with. So put it in my coffee. Oh, there you go. Right.

So we got we get creative and that's where that that I take I call it a functional culinary medicine approach where

I'm like literally looking at all these little superfoods, like mushroom powder or turmeric, and how can I incorporate it into something I'm already doing?

All right, so a mushroom latte is a way to do it. I do ashwagandha curry to manage stress. So really getting creative with your food. So then besides the herbs, I would also mention omegas.

That's another key thing that omega three rich foods. I'm a big fan of a mini avocado a day. Right. And lots of nuts and seeds. More seeds and nuts, really to get that anti-inflammatory benefit into the body.

Dark, leafy greens. We can not forget about dark leafy greens. Let's all upgrade our iceberg salads to dark leafy greens. So let's do a little bit of an upgrade here.

Okay. So what are you talking about? They're talking about a rug, a la like what? What is your go to to to have as a base for your salad every day? So here's the thing.

Diversity, diversity, diversity. It's not eating arugula every day. It's not eating kale every day. Not eating spinach every day. It's about having a variety.

And now, thank God some of the stores have caught on to this and they do the mix of dark, leafy greens for you to make your life easier. All right. So keeping that variety, because, you know, we don't want to overdo something.

It goes back to that like a little bit too much. And now all of a sudden you're like, I've got oxalate and you're fighting this and you're fighting that. So everything in moderation.

Have you really seen that? Because I mean, in my in my practice, I do not see it. And I have people eating a ton of leafy greens. I have seen it in individuals who have chosen spinach as their only leafy green.

I have not seen it in ones who are doing the diverse, but the ones who are doing just spinach. Spinach in their smoothies, spinach, sauteed spinach salad.

I have seen it in their blood work. Yes. Wow. Have you seen oxalate stones? Like have you seen a clinical manifestations? Yeah, you have. Yeah, I actually have one person right now.

That's a lot of spinach. Yeah. Because she was like in her head, like, if you people do the easiest thing, first of all, and they do what they're used to, right?

So they're used to going and seeing a spinach. So they're like, oh, more is better. More is better. But I want you to. Like the probiotics. Yeah, exactly.

Diversity. Moderation. I think about even sprouts. Like, I love like broccoli sprouts and like mixed different sprouted greens, which are a little bit lighter.

You know, we also want to think about how is somebody's digestion? Like from an elevated perspective, there are some people who just have great metabolism and digestion.

Those are usually to individuals, right? So they get these cooling cells. It's dark, leafy greens. You give this to somebody who a doctor dosha who is very airy and doesn't have the best digestion, and those salads will put them into overdrive.

And all of a sudden now they have constipation. So they're this is what I'm saying, working with somebody who actually understands the body and the individuality is always a bonus.

Now, if you have someone who because I mean, I love your practice of culinary medicine, and I do think that food is the key and food is the number one game changer for people on a breast cancer journey, without question.

And so if you have someone who comes to you and says it can't eat raw vegetables, is that a permanent thing or is that someone who you're going to work with to help to improve their digestion so that they can start to tolerate some raw vegetables?

Yeah, absolutely.

Foods to Avoid and Foods to Embrace

Usually when you can't tolerate something, whether that is raw vegetables or beans, legumes, that kind of stuff, it's because your microbiome doesn't have the ingredients it needs in order to metabolize this foods.

It doesn't have the ingredients it needs to break them down. Or maybe you don't have the enzymes needed to break down these foods, right? So we work on this and it takes time.

Like anybody who thinks they're going to fix their gut microbiome in like three months is, is in for a surprise. Like it takes at least a year to shift that 40 years of existing with this microbiome.

Right. So have some patients with it, but it is possible, you know, and look at it from the perspective of what are the diseases that I currently have and what are the ones that I could possibly have.

Because they do fall in my family spectrum. Right. And taking that and looking at what are some dietary changes I can make to address this. What I generally do with those folks is, first of all, I make sure that they have adequate stomach acid because as we age, we naturally make less stomach acid.

And acid is what is so primarily needed to break down food. And we have Bill and I's stomach acid just like we villainize just kind of things that are inherently part of us and necessary.

And there are so many people on extended uses of acid blockers and things like that. So I always check acid and I supplement people with acid. If they need it.

The other thing that I check is take radical enzymes to make sure that they have the enzymes necessary, and I'm often supplementing them along the way to do you do that in your practice as well?

Slowly, when indicated, based on their testing, I will supplement or I will depending on the level of the results. I may do it with certain foods and if the levels are really bad and they need a even bigger boost, then we'll do it with supplementation.

One of the things I didn't mention, which I really think is important for optimizing your gut microbiome and digestion, is mindful eating and all of that.

Can you talk about what that means? Yeah, I actually talk quite a bit about it in my book, The Anatomy of Well-Being. And really this is taking time to sit down and eat your food.

You know, forget the TV dinners when you're sitting in front of a TV and you're just really just inhaling food, the part of digestion starts from you seeing the food.

That's actually when you smell the food and your salivary glands in your mouth start releasing enzymes to start this digestive process, which is going to extend from your mouth down your esophagus to your stomach, and having these enzymes coming from your pancreas, the bile coming in, that whole process, right?

So stopping and observing what's going on, what's the food I have in front of me, taking a moment to recognize that that that food is as nutritious as I can make it today.

Can I can I do anything to even step it up a notch? You know, we often say thanks at the beginning of our meal. Also being thankful at the end of our meal.

Right. That that the food was a nourishing for us. But in this process of mindful eating is stopping and chewing your food really don't you. Our food.

So we start with chewing our food, savoring each bite, losing those distractions, and then also taking a moment to pause and recognize am I did I did my body receive what it needed?

How did my body respond to this? Few individuals I find of don't recognize if the food they're eating impacts how they feel. Meaning are they feeling lethargic an hour later?

Are they feeling energized? Are they feeling bloated? Take a moment to recognize that the food you're eating is impacting your mood. It's impacting your focus.

It's impacting your body's ability to continue on in the day. So really being mindful, being intentional, slowing down I think is a key component of digestion as well.

Yeah, I love that. Love that. So eating in a way that you can be nourished because if you're eating on the run or just not eating with intention, it's going to have completely different implications than if you're sitting there and you're being mindful and focused on your food and the experience and making sure to choose since most people like Wolf down their food.

So I think that that's an incredibly important point. To actually increase the nutrient absorption of your food. Yeah, it's amazing. So I want to just dial down into breast cancer for our last couple of minutes. So are there foods that you think are particularly important for people on a breast cancer journey?

And we talk a little bit about what eating looks like when you're actively dealing with their diagnosis and then what your what your food should look like after when you're preventing recurrence. Yeah, absolutely.

So why don't we talk about three foods to avoid first and then three foods to incorporate? I think that would be helpful, right? Because it's not just about what do we add and what do we want to avoid right now?

Dairy. And can you say why. Dairy is just not necessary? Right. So when we when we think of dairy, right. And this is both in estrogen positive and estrogen negative tumors.

Okay. So it doesn't matter. Dairy has a component in it called insulin like growth factor and other growth factors that increase your risk for cancer.

There was a study done that looked at about 2000 women and found that those who consumed the most American cheddar and cream cheeses had a 53% increase in breast cancer.

That that's really high. Now, think about all those late nights where you're having cheese, crackers and wine as a meal. I remember I've done it well, not the wine, but I've had the cheese and crackers as that, like coming home from work exhausted with comfort food.

Right. So dairy would be one to avoid the next one, which I mentioned. I still do that sometimes with almond cheese. Almond cheese, go for it. And then cheese on seeded crackers.

I love it. Yes, that's a good one. Yeah. The other one that I previously mentioned was the study on processed meat consumption. Right over a seven year period of a more than a quarter million women.

And eating bacon and sausages, burgers, chicken nuggets. Right. And this was a huge study. And they found that there was an overall increased risk of cancer.

And that risk was associated with something we call Kim Iron, which is a specific type of iron in animal products. And it was also associated with heterocyclic amines.

And those are found in meat, right? So keeping them. Those are made worse when you cook them. Right. Next up, barbecuing. Yes, HCA, heterocyclic amines are become even worse like they are inherent to animal based products.

But once you stick them on the grill, now we're increasing them. Right. And so with that the third thing, which I know, I can't remember what decade this is, but it's one decade grilled chicken became like the favorite of people, right?

Oh, it's so it's lean protein. I'm eating my grilled chicken. I'm going to stay slim. Well, guess what? Grilled chicken has a carcinogen. And a carcinogen means cancer causing agent a very, very long name.

Let's just call it Pit for short, which is a type of heterocyclic amine. And so this they found and it's found mostly in grilled chicken and then other barbecued meats, right.

That even a small amount of this can cause breast cancer to become more invasive. Right. Therefore becoming more metastatic and worsening disease. So You got to realize, like the food we eat, it's not just the food when we think about it, it's the metabolites that are influencing our gut.

The metabolites are influencing our internal system. So those are the three, no less. Okay. So what are the mean that I'm. I'm going to say I'm going to be the devil's advocate and remember that this is coming from someone who was completely plant based.

But if you're not going to eat dairy, meat, chicken, where are you getting your protein from and is it adequate? I am also plant based, so I do not have a problem getting protein.

I get my protein from beans, legumes, nuts, seeds and soy. So then when we go on to one of the foods I do want you to eat, it's going to be soy, okay?

And I am not talking about soy like hotdogs or chicken nuggets or. You're not talking about soy protein isolate. No, I'm talking you're isoflavones. Okay.

And those are found in non GMO tofu. Organic tofu. It it's found in soy milk, soy nuts and edamame. Right. So that I definitely want you to contribute.

In fact, even 1 to 3 servings a day. Easy way to incorporate that is at the moment, really easy way to incorporate that. A soy milk into your smoothie that they found.

And if it says organic, is that is that safe enough? Does that mean that it's non-GMO? Yes. So as long as it says organic. Organic, yeah. The other thing I think people need to be careful about with soy milk is to make sure that it's unsweetened and that it doesn't have a lot of gums and additives.

Yes, absolutely. So what happens for soy is that it works that soy isoflavones work as a antioxidant. Sit down, regulate this. It's the Cox mediated inflammation pathway.

Right. So that has been shown to be beneficial in in cancer prevention and specifically for breast cancer. The research has shown that individuals who had soy intake inversely associated with their breast cancer mortality and recurrence and this was beneficial both for estrogen receptor positive and negative tumors and both for users and non users of Tamoxifen.

Right? So basically, soy is going to be one of those that you want to include. At the end of the day, I'm a big fan of I make from tofu. So as somebody who does eat a lot of salads, one of the things I was missing in my salads was croutons because I also went gluten free and I could not find any gluten free proteins that really worth it.

So now I take I cut tofu into cubes like the size of flavor them like croutons. But now I'm getting my tofu croutons into my salad. That's awesome. I love that. Right?

It sounds delicious. Yeah, but just kind of thinking a little bit more intentionally, but. Love it. On the other. I actually do that with PubMed, so. With with what.

Hum fo have you had pamphlet. No. What's that. So it's pumpkin seeds that are prepared just like tofu. So for people it's a little firmer than tofu but has the same kind of profile and it's high and I, it doesn't have much flavor like tofu.

So you can basically make it any flavor you want to make it. And I love it. Yeah, that actually sounds good. And I've also seen it done with chickpeas, right?

Yeah. Chickpeas is another like little weight. I like cubit. And you're getting this protein. Yeah. Yeah, it's a plant based protein. Yeah. But at the same time you're getting a lot of fiber and especially for women, because so many women struggle with the breakdown products of their hormones, fiber is one way of ensuring that that process is happening.

And it's these low fiber diets that women struggle so much. Yes. So let's talk next about my number two fiber. Right? So where are you going to get fiber from?

Cruciferous vegetables. Right. And it doesn't just need to be the broccoli, okay. We can we can be a little bit more like like when I talk to my patients about mushrooms, I'm like, okay, you can have it.

Maybe I should put mushrooms. That's number three. But when I talk about mushrooms, I'm like, people are used to eating the white button and the Khameini and the Portabella.

I'm like, upgrade from your Toyota and Ford to a Tesla mushroom or a maserati mushroom and start having the Asian tacos in the top eight or even lion's mane like upgrade.

Right? So so I guess we can put mushrooms as number three because they do have anti-cancer promoting abilities, very powerful. So another food to consider would then be mushrooms.

In fact, there quite a bit of studies that showed that they can be beneficial. And the key with mushrooms is to always eat them cooked. Okay. Never eat them. Always. Yeah.

Ingredient in there that is toxic and gets cooked off once we cook them. And I know. One of my biggest pet peeves is in New York City salad bars. I train in New York City.

So, you know, you go into all these little bodegas in the city. And they have raw mushrooms. Everywhere. Yeah, hospitals, raw mushrooms everywhere. People. Let's stop serving raw.

Well. I don't think hospitals are the place for healthy food. I mean, my, my, my days as a surgeon. Yeah, there's some changes coming down the pipeline and culinary medicine there, but we still have a long way to go.

But then back, right? So that's where we want to have our cruciferous vegetables. So yes, broccoli's in there, but also think purple, purple cauliflower, purple cabbage, kale, brussels sprouts, broccoli sprouts.

I'm but I'm a really big fan. Of growing sprouts. Separate that like in a sandwich and they're. So easy to grow. You can just you can buy a grow kit and grow them on your countertop in two weeks.

You can have your supply of broccoli sprouts, really whatever you want. Amazing. So I gave you three foods, mushrooms, cruciferous vegetables, and then in. Soy.

And soy. Okay, I've got more than that. Let's see a bonus.

Supplements, Vitamin D, and Closing Advice

Start drinking some good quality green tea if you like. Let's upgrade leeks. I like you to have the water stay hydrated for sure, but let's upgrade our beverage to some green tea.

In fact, they found that green tea consumption more than three cups a day, can reduce the risk of breast cancer recurrence. Yeah, so. Absolutely. Every patient that has been diagnosed with breast cancer needs to find a green tea that they enjoy.

Yeah, I couldn't agree more. Love green tea. Any other go tos. Any other go tos. Let's see. Well, I already mentioned omega, so definitely an avocado a day, you know, to decrease that inflammation.

And that's where the nuts and seeds come in. And let let's not forget fiber, because I know a lot of people who like eat beans, maybe like once a week.

I really want you eating them daily, if not 1 to 2 times a day, right? Yeah. The fiber in the beans is a prebiotic type of fiber. It's also a resistant starch that the gut loves.

So having that can be great for your gut microbiome. And lastly, we talk about supplements. Are there are ones that you think everyone should be on and everyone needs.

You do supplements individually for everyone. Like how do you feel about that area? Yeah. So my, my practice is heavily nutrition and supplement based and everyone needs supplements.

They just don't know which ones they need. So I'm a big proponent of tests. Don't guess, right? So we want to test just like as if we're using medications.

We, we don't want to be guessing. We want to test, monitor, adjust, modify and make it precision, right? Like this is what my body needs. And for the individuals who are on the same multivitamin from Costco for the last five years, I guarantee your body needs something else.

Right. And we want to keep adjusting it because as we age, as we have changes of aging, is there a go to that? I have everybody on. I have most people on a very high quality multivitamin, a high quality Omega and a high quality vitamin D.

And then everything after that becomes super personalized based off of their deficiencies, whether many people have magnesium deficiency, you know, the gut do does one individual need digestive enzymes?

Does one need probiotics? You know, does one need short chain fatty acids for a short amount of time? Does somebody need antimicrobials? It's going to depend. Right?

So that's where testing is really before diving into the supplementation game. And what testing do you generally use for that? Once again, I've a huge panel and it's you know, when I sit down with my patients at the first appointment, that initial consultation is when we're, you know, for 90 minutes going over there their whole existence.

And what potential factors, including their DNA, may influence this. So based off of that is how I decided the spectrum of what testing we're going to do.

That's awesome. So I just want to go over what we talked about today. We started off by talking about what this health care system is really built for.

It's built for sickness and hospitalization and prescriptive medicine, dependance and food is our fuel. It's our life source. And it's a way of avoiding this paradigm.

We talked a lot about dysbiosis, which is an imbalance in the microbiome. We talked about the symptoms of dysbiosis. Some of them were gut symptoms, but others can be skin headaches, anxiety, depression.

And we talked about some of the things that damage the microbiome, like antibiotics and chemotherapy. But that diet is the number one influence on the microbiome and other things like medications, pre probiotics, alcohol, smoking, hygiene, infection.

And we talked about how to empower our patients. And we do that by helping them to strengthen their microbiome, helping them to manage stress and having anti-cancer rituals, whatever that is for them.

We talked about culinary medicine and we talked about three foods to avoid dairy, processed meats and grilled meats in particular chicken. And then we talked about you were go to list the things that everyone should be doing.

They should be consuming soy op ideally every day because soy does decrease the risk of breast cancer recurrence. And the soy isoflavones are highly beneficial in both cancer treatment and cancer prevention.

We talked about making sure to consume fiber, making sure to get in. Your cruciferous vegetables have been consumption every day. We talked about the importance of mushrooms in upgrading your mushrooms.

We talked about the importance of green tea and on your water. Consumption is definitely vital. But adding green tea into your daily routine will decrease the likelihood of cancer recurrence.

And we talked about the benefits of omegas and adding in avocado toast, seeds and nuts into your diet. Lastly, we talked about supplements and that everyone should be on a good quality multivitamin taking in Omega on vitamin D and then depending on your testing and your individual needs, maybe you need magnesium, maybe some enzymes, maybe some probiotics, and that it's ultimately going to be really beneficial if you have a practitioner that you can work with to help you to manage the breast cancer that you have.

And we are all individuals and to help you to restore your health by looking at why your cancer developed, kind of intervening on that level and restoring your health and preventing your risk of recurrence.

Yup. That's and you just remind me one thing that I can not do, which I think is important for our breast cancer community, is that individuals with low vitamin D levels increase their risk of breast cancer.

Right. So vitamin D and the correlation between breast cancer is also an important avenue to investigate with your physician if you have not had that tested.

Yeah, and everyone should know their vitamin D level without question. And if your doctor is not measuring it, make them measure it. I like to keep my patients between 60 to 100 nanograms per deciliter.

What is your range? So for most individuals, I keep them between 50 and 60. My cancer patients, I like to keep them at around 60, depending on their level, obesity as well, because I want to be cautious of where they hold on to fat soluble vitamins.

So it's going to depend on the individual. Yeah, but vitamin D is one of those things that we do not store well, which is why you have to dose vitamin D probably every day at the most, every other day.

And those once a week dosing is not effective at all for people. So if there's one thing that you want people to take away from our talk today, would that be okay?

So one thing for everyone to kind of understand is hashtag self-care is self-care. Yeah. Right. So everything that you do and that you're intentional with in your life is the self-care that you need to keep yourself happy and not angry.

So hashtag self-care. I love that Dr. Bhanote Where can people find you? I am on all social media platforms Instagram, Facebook, YouTube at Dr. Bhanote.

So my name and my website is drbhanote.com. Pretty easy. To find. And we didn't talk about your book, The

Anatomy of Wellbeing. Where can be where can people get that? Yeah.

So The Anatomy of Wellbeing helps individuals create these intentional lifestyle practices to revitalize their health and really goes into the holistic approach from mindset to nutrition to sleeping to movement and really personalizing it.

And the book is available on Amazon and Barnes and Noble Nook My wonderful Dr. Bhanote, thank you so much for being here today. It was really a pleasure to talk to you about all of this.

I love that you practice functional culinary. I'm fascinated by that. And we know the importance of food. We've known for thousands and thousands and thousands of years the importance of food and its and its influence on our health.

So I really applaud you for what you are, what you're doing. It's beautiful. Wonderful. Your patients are so lucky to have you. Thank you so much for our conversation today.

Dr. Jenn It's Dr. Jenn. Bye for now.