From Diagnosis to Personalized Care: Rethinking the Cancer Journey Transcript

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Introduction and Background

Doctor Michael Karlfeldt, is a board certified natural path and a leading expert in integrative medicine. With over 30 years of experience as a founder of the Karlfeldt Center in Paris, Idaho.

He specializes in treating the root causes of disease and empowering the body's natural ability to heal. With a particular focus on cancer care, a sought after speaker, author, and educator, The doctor Karlfeldt as hosted multiple TV and radio shows, including Health Made Radio, and currently leads several internationally recognized podcasts such as the Integrative Cancer Solutions, Cast and The Doctor K show.

And there could not be a better guest than doctor Karlfeldt for the Cancer Breakthrough Summit because his best selling book, A Better Way to Treat Cancer.

Exactly. Further, the mission to increase awareness of natural and effective link approaches. So welcome to the summit, doctor. And let me start with a question a little bit.

And if you don't mind. Absolutely. Thank you. Thank you so much. I mean this we're doing this together. So we should get to chat with each other as well.

Absolutely, absolutely. So I will lead with this. After nearly four decades in clinical practice. What led you to develop such a comprehensive approach to cancer as a Karlfeldt center?

And when we deal with cancer, and it's interesting to see that, in my mind, cancer has evolved with all our exposures to toxins and having metals and stressors and lack of nutrition.

So the way I was able to dress things a few decades ago is a little bit different than what I'm needing to do now, because I still remember I had a pancreatic cancer patient that they almost carried in.

This was back in the 90s. And that, you know, he I mean, his he was he was done. There was no treatment left for him and he was about to die. And so all I did then I did put, put him on some supplements and put together a little bit of a protocol.

And within a week he was up fixing his roof and feeling, you know, great energy. And he lived many, many more years later after that. So we had that story and then another story at the same kind of scenario.

I had a gentleman with a patriotic that gone into the liver, did just some small nutritional interventions, you know, some supplements. And lo and behold, you know, the cancer disappeared both from the liver and the pancreas.

And it was just a very minor, minor intervention that we were doing.

Why a Comprehensive Cancer Approach Was Needed

And we had great results. But as I've seen, things have had evolved, you know, were more stressors at that, were dealing with all its life now is just so much different than what it used to be.

And so now I'm having to bring in more heroic type of treatments. I'm needing to bring in, like the hyperbaric oxygen therapy, photodynamic therapy, a high dose vitamin C, and, you know, all these different type of IVs and more specialized nutritional products to go along side with it.

We need to kind of investigate and see what are the root causes. Look at genetic drivers, look at, you know, so there's so much more that needs to be done now in order to be able to have the same kind of impact that we had a

few decades ago with much less effort.

So that's kind of what's been driving me when I see that what I do currently is not enough. You know, I need to do I need to bring in another tool, another type of therapy in order to be able to achieve the outcome that we're wanting to achieve.

So it's essentially it is the it's a cancer patients that are guiding me in what I'm needing. When I see that I'm not impacting the individual as much as I want to, then I kind of look and see what am I missing?

What are we needing to drive more like, for instance, now the metabolic aspect of cancer to look at that becomes so huge, you know, to kind of shift that metabolic process within the cancer cell and utilizing the tools for that, you know, like the poly MBA and DC, IBS for that becomes really important along with dietary changes in order to be able to correct the on that metabolic dysfunction.

So all of these things have kind of driven me to become better because, I mean, you know, we haven't solved cancer yet. You know, we it is still a riddle.

I feel that we are much better at it, that we've come much further to do it. And we have much better, stronger tools. You know, the tools that are available in integrative cancer care now versus, you know, two decades ago, it's night and day.

It's so different. And I also see how the integrative aspect, you know, how we combine maybe some of the traditional oncology care alongside with more of the natural, holistic supported type of therapies, that learning that dance between the two has changed quite a bit as well.

And there I feel there's a little bit more of a melding between those two worlds. The oncologists are starting to kind of be more okay with that. An individual is doing integrative care and just kind of recognize that, you know, they really yeah, they really don't have a lot of say in it anymore because the patient really wants to do it and they're going to do it anyway.

And so the oncologists, they can have them puff and spin. You know, spin their eyes and, you know, roll their eyes. But but in reality is that, you know, if traditional oncology had the solution, there would be no need for what you and I are doing because then it would have been solved.

But we see now that, you know, they've had decades of like 50. Is it like 50 some years of a run with their type of care and they still haven't solved it.

So that's why there's such a great need for what both you and I are doing. And so, I mean, what kind of patients do you see at the the clinic? I mean, the people who have just been diagnosed, how advanced cancer are?

They are coming, you know, trying to not saying they're official doctor because they are feel they are cheating and so on. The conventional doctor, do you see people who feel that they have been done already?

Everything. And it's not enough. The cancer is coming back. Who who are your your patients? And I would say it's a whole spectrum. Yeah. So I, I have patients and depends a little bit on their mindset.

You know some people they the last thing they want to do is traditional ecology. They, they're afraid of chemo. They're afraid of radiation. Maybe they're a k would do surgery, but they don't want to do the other things.

And so then they come to me to see, you know, what can I do. And so I don't have to do chemo, you know, like for instance, multiple well multiple patients that are in that, that type of state.

And then you have also the ones that are, you know, they are diagnosed and they are, you know, thinking that, yes, I want to do some of this traditional oncology I'm going to through go through the chemo, I'm going to do the radiation.

But I want to make sure that I'm supported through that. And I recognize that these things are going to impact my immune system, and I want my immune system to be as strong as possible.

I know there are cancer stem cells, and I you know that chemo, radiation surgery, there's really not impact the cancer stem cells in a positive way. So what can I do to address those things?

Also I want to understand a little bit, you know, why do I have cancer. You know why did that happen? Because when I ask an oncologist, they just say, well, it's just bad luck.

It's just genetic. And we we know that it's much more than bad luck and genetic. There's always something that's driving the process. And then you have the group.

You're saying they they been almost treated out and they come to me and there's really they feel like they've done all the things that their traditional oncology doctor has said.

They're on college set and they now they're in much worse shape. Their exhausted, they're tired, you know, they're in pain. Maybe they have fractures or they come to me and see what can we do to help to turn this around.

And some of those were able then to turn around and then some people, they've just their bodies are so beaten up that we, we may not be successful, but at least we can then, you know, give give them a chance and give them possibility and maybe increase life, you know, length of life and quality of life and see what we can do.

Their associates a whole spectrum of patient. And you also have the ones that were diagnosed, they were treated. They have no sign, no evidence of disease at this time.

Who Comes to the Clinic

They just don't want it to happen again. You know, they don't want to go through that again. So now they want to see what can I do to make sure it doesn't happen again.

So so what do you do to meet the patient where he or she is with those needs? And how do you investigate all the different aspects of cancer? What as cause cancer, where it's coming from?

What the what are their needs, how to support them to to heal physically and emotionally? What do you what kind of modalities do you affair at the clinic?

Yeah it is each person comes with a story. Yeah. So that the cancer is is always a story behind it and is for us to investigate to see what that story is.

And so understanding where an individual is at emotionally, spiritually, physically, what symptoms are they dealing with? What kind of therapies have they done?

What seems to work? What hasn't worked? What exposures have been dealt with regards to how the metals, chemicals, infectious agents have been exposed to mold?

And it is not just what happened the last year. You have to go back to childhood because a lot of times you have things that may have happened. You know, you've been exposed to a few decades ago and your body was able to compensate and build with it, and then all of a sudden you had another stressor on top of that, and then another stressor on top of that, and then this, that, you know, from, you know, several decades ago, all of a sudden I'll become factor because the body doesn't have the energy and the resources to be able to deal with it.

So it becomes part of that whole investigation. And then obviously running labs, you have a lot of functional labs to to check to see what is the terrain of this individual so that you can really assess what's going on and then understanding where, where the at physically now, you know, is this person, are they having a problem eating.

Are they you know, what's their activity level. You know, what are they able to do. Are they, you know, feeling depressed anxious. You know, are they dealing with fears.

You know, how do we address that. And so it's doing this 360, approach where we look at all the different factors that are essentially the fuel of this cancer or the potential fuel of this cancer.

And frequently it's not just one factor, it's all these different components together that you need to look at and address. And as you reduce that toxic or stress load on that body, then all of a sudden, you know, tissues able to start to regenerate, immune systems start to kick in.

It's able to be more effective. And recognizing who's a friend or foe, you know, what's a cancer cell, what is healthy tissue. And then be able to then produce the appropriate antibodies produce a communication in the system.

So all of that, you know, takes place when you work with an individual essentially. But all these I mean, this very thorough investigation and all of all those labs, those things take time.

I mean, this is for people who are used to see a doctor for 20 minutes at most. This is a completely different experience. What happens? People are coming to the clinic.

They are staying for a week or two weeks. Walk me through the journey of a of a typical prep journey. Yeah. So typically what what happens is that we start most patients, they come from out of state or even out of the country.

I mean, we do have a lot of local patients as well. But usually what happens is that you have that initial visit, whether it's through telemedicine or if there are local or some people within drive to make sure that they get to be here physically and to have that first initial visit.

And during that visit, you know, you do a lot of the, you know, looking at at their prior labs, you look at their prior health history. You do that investigation, you know, we have conversations to understand where they're coming from, what they've done, what they're diagnosed with, and also what, you know, the, the on what they they've done so far there and what they, what they oncologist feels like.

This is what we need to do. This is a protocol that that's appropriate for this individual. So you see look at that. Yeah that initial investigation.

Whole-Person Assessment and Treatment Planning

And then you see based upon that then you say, well let's run these additional labs so we can see, you know, you're a hairdresser or your auto mechanic or your flight attendant.

So you're exposed to these chemicals on a continual basis. So let's let's assess and see where you're at. Or we may even just kind of start with let's start to clear that out to start to detoxify that, you know, because we know it's there just because of that heavy exposure.

And then, you know, let's look at labs. Have we done some detoxification. Let's see what's left or let's say somebody spin dealing with yeah, maybe lived in an old home or maybe they've had some water issues.

And then you want to make sure kind of mold what's, what's going on there. And so you run these functional labs and you gain information from that as well.

And you put together protocol that way. And then you also learn in regards to what type of cancer that they're dealing with. Their protocols would be different for somebody dealing with the pancreatic versus the breast cancer versus the prostate versus lung.

So you would then want to tailor that program based upon that. You also want to assess and see what are their nutritional levels. So then you would Taylor make sure that they get the nutrients that they need in order to be able

to make sure that they're strong and their immune system is strong.

And then we look at, you know, see what are some because we have millions of dollars of devices over here. And we have. It's a 17,000 square foot facility.

So we have a lot of options that we can bring in. So let's say a person has been dealing with a lot of trauma. You know, they maybe lost someone they loved.

Maybe they've gone through a difficult and divorce, and maybe they have a lot of childhood trauma that they're still holding on to. So then we would then tailor a lot of the emotional support protocols that we have, maybe bring some neurofeedback, micro current therapy.

We have based form of transcranial magnetic stimulation. We bring in some music therapy. We have a data chamber that helps to kind of correct brain patterns and establish through narrow plasticity established on new brain pathways.

So we would then tailor things in that direction. And then maybe you would then bring in photodynamic tends to be kind of like core component that we do.

You tell us more about what it is and how it works. Absolutely. Absolutely. So for the dynamic is fascinating. And I love light, you know, because I feel that we are being so light essentially.

And I feel like we're yes, we see this fiscal body. But at the core of it, it is essentially just vibrational. And we kind of perceive it as, as physical.

So for me, vibrational medicine and light is part of that. And it was fascinating. With light. It carries so much information within light. You know, we have all our cells communicate, you know, through light.

And then we have that structured light that we all emit that, you know, contain all the information of all the cellular activity in the body. So light to me is fascinating.

And I feel that is the medicine of the future, you know, the light aspect. And I feel like herbs and supplements and your products, I that they carry certain frequency and life to it with itself, that then that the cells will help to kind of reprogram cellular behavior.

So to me it's just a fascinating and evolving science. But so with that using light we can then introduce and a photosensitive and photosensitive or essentially an agent that accumulates at a higher concentration in cancer tissue.

And you know, so you can introduce that intravenously. Some you would introduce orally depending on which photosensitive it is. Or you can also if you have access to the tumor, you can also introduce it in the tumor area as well.

And so that photosensitive so then accumulates in that tumor tissue. And then when you expose that to light what happens is that the photosensitive will draw more of that energy into that tissue.

And it triggers then production of something called reactive oxygen species, you know, which is a oxidative type of substances, just like when you're rusting iron, that's an oxidation process or other oxidative type of therapies that we know of chemo radiation, they're oxidative type of therapy.

So this becomes a a targeted non harmful a type of therapy that is then creating high energy into the tumor tissue to trigger oxidation or destruction of of those cancer cells.

And you can use both light and you can also use sound. You know so sono dynamic therapy and with sono dynamic therapy, you know, with a photo sensitized or be there and then bring it in an ultrasound device where

then triggering cavitation bubbles that are produced within the cancer cell.

And they kind of these bubbles they explode. And that creates a lot of stress within those cancer cells and cause them to die. So that is kind of the core component.

And then a layer around that other type of therapies like vitamin B17, the mistletoe, vitamin C, you know, ozone, hyperbaric and artisanal curcumin, bt c g.

And, you know, resveratrol and all these other type of things that adds value, that puts more stress onto the tumor and also shift how the cancer drivers, because cancer has certain drivers that it utilizes for its own benefits.

Photodynamic Therapy and Core Modalities

So we can shift those, you know, utilizing natural agents and then also then shift the energy production, the metabolic process that exists within cancer cells to drive it more towards mitochondria versus that fermentation process, a Warburg effect that cancer cell use for its own benefit.

And because the mitochondria is the one that then holds the cell death switch. So if we can activate that and utilizing some of the therapy we do alongside with the photodynamic and the emotional work, and it just becomes so much more powerful or, or let's say an individual, for instance, had a breast cancer patient coming in and they have fractures in their back and due to the breast cancer and their extreme pain.

So then we would bring in some of the, you know, restorative and regenerative therapies. We might bring in some exosomes, you know, for to support that healing, we might bring in, you know, we have a different quarter million dollar devices that that help them for regeneration of that tissue.

And we have, you know, very specific strong laser that's thermal guided robotic, you know, to help to hit that tissue for regeneration as well. So all of that and that's the beauty when you have so many different tools, you can then adjust which tools that you're wanting for that individual depending on what's going on.

And then also you are in your book, you are referring to a frequency medicine and technology. Can you tell us more about that? I yeah, so I like I mentioned, I love frequency, I love frequency medicine.

Like this is just one aspect. But we know that every every cell, they have a certain vibration. And so if you can then correct that vibration you are then able to kind of restore a healthier cellular function.

And we know that frequency is kind of the core before it manifests into physical, physical life. So if we can then work on the blueprint, sort of say of cells of tissue, which I believe frequency medicine is, we use things like, you know, rife technology.

Another device that I love is moniker that will then assess your 750 different puncture points throughout your whole body, which are essentially those energetic lines that you have where rivers of energy that's moving through the body and then fuels all the cells and all the tissue, your nervous system.

So, you know, if there are stagnation in these different areas, then that tissue that's supposed to be fed by that river of energy is going to suffer.

So if you can then assess these different points of acupuncture points that are alongside these rivers, and then that same tool will then also after the assessment, it will then through AI technology actually feedback the the reverse of the of the disease type of frequency to help the correct you know the imbalance in that area.

So and then with the right technology where the royal rife when he was looking under his microscope and he was seeing that cancer cells and pathogens, they were behaving in a different way depending on the frequency that they were exposed to.

So he was able then to kind of shift, you know, healthy cells to cancer cells and vice versa, depending on which frequency that he was using. And so he then cataloged these different frequencies.

And you can then use them then to help to go after pathogens, grafter cancer cells to kind of have them then change their, their behavior. So, you know, frequency medicine is phenomenal.

We also do something called laser energetic detox, which is doctor Lee Cowden I think is just a brilliant, brilliant and noninvasive way to achieve a lot, where you can then use homeopathic vials of a substance, and you can then shine a light beam through that homeopathic vial and expose the body to that, so you centrally and then sending that information into the individual.

And then it's I kind of liken it to, you know, one that let's say you have the Russia, United States, you know, that Cold War scenario that we were dealing with a number of decades ago?

Yeah. It's kind of like giving all the Russian secrets. What what's going on to the United States? So United States knew exactly everything that was happening on all the secrets that was going on.

So it's the same thing when you're shining that light, you know, you're giving that information to the body. So the body can say, that's that, that's Mercury.

Yeah. Let's let's find mercury. Let's talk Sify that or you can then use a vial with a tumor type of tumor tissue like breast cancer. And then you can see and then there's certain testing techniques that we use where we can then see, you know, what are some of the substances that may be connected to that, that cancer, is it mercury or aluminum or maybe mold or maybe cytomegalovirus or Epstein-Barr, or maybe it's beryllium.

And you can then use those, these two vials and then shine that onto the individual. And then the energetic system gains that information and, and then start to kind of look and see, you know, we Borrelia that's what's going on.

And then the immune system can start to address that. And frequency can then be corrected in the individual to help to clear that out of the system. So it's incredible.

You can even actually if you want to make it even more specific. And this is something we do, you can then collect urine and a little bit of stool and sweat from the individual.

You make a homeopathic vial of that. And now you have a homeopathic vial of exactly what's going on in that individual. All the chemicals have metals, the pathogens, the cancer tissue, you know, cancer specific, not just kind of generic.

And then you can use the laser energetic detox doing that to kind of feedback.

Frequency Medicine and Energetic Detox

So the body recognizes what's going on in the system and then can activate the the appropriate resources in order to be able to address it. So yeah, frequency medicine is I think that's it's phenomenal.

Yeah. And that's goes well beyond treating cancer actually everybody could benefit from that. Understand what is happening in their body, what needs to be corrected.

We we are all being exposed to some virus. We all have some beginning of something of this regulation of our lives and of ourselves, because that's part of the simple aging process and the regular exposure to all the environmental toxins we are subjected to.

We all could benefit from that. Yeah. And that's the thing, is that the the best cancers, the one you never get you. Yeah. So if, if we let's, let's say you've never been diagnosed, but you want to make sure that you are creating as much of a buffer zone between you and cancer as possible.

So then to do these assessments prior to any kind of diagnosis or prior to any, any disease creeping up, it would be it would be even better, because now you are clearing things and relieving stress from the body as so that the immune system can be much more efficient.

And then also your cells are happier. They're not. Aging is fast. They are not. You know, you don't create all that information in the body that drives all these different diseases.

So yes, you're absolutely right. I mean, you don't have to have cancer to do these type of therapy. You know, they are beneficial for for everybody just for living longer, living healthier, you know, like span brain span, you know, and health span.

Sounds like the best new year is for everybody. Well, I think that having an awareness of that, you need to not take your health for granted, but to address it.

Yeah. And really kind of lean in on lifestyle habits, dietary habits and supplementation in order to be able to optimize your quality of life. Because I see so many patients, you know, they come in, they work hard all their life, the spouse and then them, they were playing, I'm going to retire and now we're going to see the world and we're going to do all these amazing things.

And then, you know, and behold, you know, if something, you know, like cancer hits them and, and now they don't get the opportunity to be able to do all those things.

So the time for an individual to start to address their health is now, I mean, it would have been better yesterday, but, you know, now is a better time than tomorrow because we we it breaks my heart when I see these individuals that are they're so excited about their future.

And now they worked hard. They have the financial means, but now all of a sudden they just don't have the physical ability to just because their body was not able to to to handle, you know, what what they put themselves through.

Yeah, absolutely. And for all the people who are caregivers to to cancer patients, I mean, they are going they are put themselves through a lot. And it's very often that you see that don't take care properly of themselves.

And, and then they become. So actually, if you are the caregiver or cancer patients, I mean, you can also benefit a lot from this approach. Yeah. And we do we have that as an additional program here.

We call it care for the caregiver. Because frequently what happens is that you have the caregiver. They support the cancer patient. And they they negate themselves and they get exhausted and they use up all their resources, you know, physical and mental resources.

And then let's say that, you know, the cancer patient then gets well or or maybe we don't have that, that a positive outcome and they end up passing away.

And you know, then the caregiver now they are just completely, you know, down and out and and frequently they develop some chronic disease. And then sometimes that can be cancer as well.

Yeah absolutely. Absolutely. So we have this this program intensive cancer program of one week or two weeks depending on the patient. What can people expect after this, this stay.

And then what happens. What is the follow up. Well usually people it's intense when you get here. So sometimes the first week you feel like it's just a lot because we want to optimize the amount of treatment that it individual get when they're here.

So sometimes they get like three different therapies going on at the same time. And we do that because I want to make sure that we hit cancer from all different angles.

So sometimes, you know, the first few days, you know, maybe first week you may feel a bit tired. And then second week, many patients, they feel like they just feel a shift.

And then the spouse say that, you know, I've never seen them this good. And they they look so good. They feel so good. And they have energy. Doesn't happen all the time.

But that happens quite frequently. And so that takes place when you're here and then post care is that, you know, it's not like you come here and then I forget about you.

You know, you are with me for as long as you want to be with me. And we do them to follow ups. We do follow up labs. We want to make sure that we do follow up appropriate imaging.

We want to check for, you know, where your circulating tumor cell counts are. Look at the inflammatory drivers. Look at all these different markers. They're important to make sure that we are assessing where the individual is at.

And also sensing that are we doing what we need to do? Do we need to pivot in any way?

Prevention, Caregivers, and Follow-Up

Do we need to escalate care? Or let's say that, you know, everything is going great. You know, it can be now deescalate, can we kind of reduce the amount of care.

And usually when a patient leaves and also then direct them as, you know, looking for their local resources, that can then continue the momentum that we built here at the center.

And I usually liken that, you know, tell my patients, kind of like you have a big boat, you know, that's moving in a direction. And this is kind of like cancer is moving in this direction.

And it takes a lot of energy to shift, you know, the direction that big boat. And that's why you want to do a kind of comprehensive, stronger, stronger type of program.

But once you've kind of shifted the direction, it doesn't take as much energy to keep that momentum going. And you usually we can utilize and local resources for that.

And sometimes if there's a need, then patient would come back and we would then kind of not maybe do kind of the same intensive, but maybe just for kind of like a weak touch up.

Yeah. When if it's needed. So that's usually what happens. And I, I mean I had cancer patients that they had one cancer patient, a breast cancer patients who said, well, I applied for my oncologists and I think actually all four died from cancer.

Yeah. Which it's. So it's, I'm there. I'm here for the long haul. I'm it's not just for do this and I forget about you. I'm. I'm here for the long haul.

Depending on what you need. Since I'm missing and so needed. I mean, so many doctors. You have just a capsule time relationship as they are just here for for you when you are in.

I mean, when you sit in front of them and beyond that, don't even know who you are and said, I remember anything. Cancer. I love the fact that you are really, giving your attention, individual care and attention to people are.

Very often when you are diagnosed with cancer, you feel like you you become a statistic. And there is no real, real care especially, I mean, in Europe.

It is a case again and again. Yeah, yeah. And that's the thing is that you have patient there diagnosed and they go

to the oncologist and and essentially it's a cookie cutter approach.

You know they have their standard of care. You know they look we got this cancer and these are the chemo were doing this at the. So they're not looking at the individual.

They're not looking at that story. Yeah. So they're centrally then just pushing you to kind of step onto that conveyor belt and just kind of move through whatever process they've already outlined, which is not individualized, which is not specific.

You know, there's no genetic testing to see, you know, whether, you know, this chemo is appropriate or that chemo is just, you know, start this and then see what happens, which to me is sad.

And then, you know, let's say they get to know evidence of disease after doing traditional oncology. And then, you know, the oncologist says said, well, we'll just you know, the monitoring is just very poor.

And there's just kind of waiting for if the cancer is going to come back again, I can't. Yeah. And so don't get you about anything. In order to prevent or minimize the case the the risks that it will come back there.

Just wait and see. Yeah. Exactly. Exactly. Yeah, yeah. So for people who are I mean, listening from the Cancer Summit and would like to to learn more about how the Castle Center, what is the best way to schedule a discovery, explore a personalized intensive and learn more.

If this could be a good approach for two weeks, it looks like nothing in the concert journey and definitely some something to give everybody would want to do.

Yeah, and and the best way is you can give us a call here at the center. This (208) 338-8902 and and like Dylan was mentioning, we do offer a free discovery call, you know, so you can call us and we can learn a little bit about you.

You can learn a little bit about us and see if you feel that this is a good fit or not. Obviously, you can always get my book and learn a little bit more about me.

A better way to treat cancer. So that that will describe a lot of, you know, where I'm coming from. And there's it's essentially designed as a manual, you know, to really cover some of the foundational things that I feel is very, very important when you're on this journey and, you know, we can email us or you can listen to my podcast that we do.

So, yeah, please, please, if you feel that this is something that is appropriate for you, I'd love to be there and love to help you. How many people do you treat that at any given time?

As a cancer treatment center, I usually see 10 to 15 cancer patients a day, you know, so it doesn't mean that all of those 10 to 15 are currently here at the center.

But we usually we have a good number of patients. And so we try to be accommodating because sometimes people need to come in here a little bit sooner, you know, depending on their state of health and the type of cancer as so we we try to be accommodating to make sure that you're taking care of at an appropriate know timeline.

Yeah. And if you want to learn more about and go back to everything we discussed to today, a Better Way to Treat cancer is a book with a really, I mean, valuable when it comes to all those integrative approaches and how to use them together and what each one can, can do for you.

It's really, really a comprehensive and manual. As you said, that the education and education by itself really. Yeah, it feels like it's a book that I felt that my cancer patient needed.

And there are a lot of phenomenal books out there. So this is just kind of me putting it all together in a way that I feel can be really, really helpful for a patient going through their journey or somebody caring for somebody or

somebody just that wants to prevent.

Yeah, absolutely. And as you said, they are the best. Cancer is the one you don't have. Correct. Let's do that. That that's what both you and I are fighting for.

Absolutely. And that's why we spent so much, I thought educating people about cancer, but also prevention and healing of your body and your your soul before.

Before you get sick. Yeah. Yeah. I couldn't agree more. Thank you so much Dr. Karlfeldt. Thank you so much. It's always a pleasure. Always an honor. Thank you. Thanks.