Opening the Conversation

Hi, everybody. What a treat to turn the tables on our co-host for the Cancer Breakthroughs Summit. And my interviewer for this summit as well. Dr. Michael Karlfeldt this is such a treat.

You know, I was thinking about this over the last couple of days and getting ready for this conversation. Even though our circles have been moving in the same direction for some time.

I did not get to start really hanging out with you until the Photodynamic Therapy conferences and the Bioregulatory Medicine conferences in the last couple of years, like, how is that possible that despite all of our commonalities and our common circle, that our paths have only really integrated in the last two years?

Just amazing. I yeah, I agree, and I think this kind of speaks highly to how this space is evolving so quickly. Yeah. And how we are making these stronger connections and realizing that what I'm doing, you know, someone else is doing as well.

And we can then bring those pieces together and gain even more knowledge. And and that has been the beauty, I think, in these communities. And that's why these type of events become so, so important.

So, yeah, it is really it's really cool to see how everything is just moving forward. It is it's so beautiful. And it makes me think about what we're describing here is, is sort of Mycelium net, you know.

So anybody who's ever read the book Mycelium Running by Paul Stamets understands that we have this sort of network, kind of like our, you know, our internet of the Earth is to our Mycelium Net that goes around it, our, our fabulous fungi that come through here in the environment around us.

Cancer as a Complex Ecosystem

Well, that's kind of like what we are. And so today this is a beautiful segue, because what you're going to speak about is about the ecosystem of cancer.

So even from the macro so the ecosystem ecosystem perhaps of the standard of care sort of environment or ethos all the way down to this beautiful bridge to the integrative side of things and then down into the patient themselves from the outer.

You know, what you see here to the, tissues, to the organs, to the cells and the components of the cell. And these concepts known as our tumor microenvironment or our extracellular matrix.

So first of all, maybe define for our listeners what the heck we need when we talk about the ecosystem, maybe from the macro to the micro and where we're going to go with this conversation today.

Yeah. And I and I loved how you kind of bring in the, the macro to the micro because it is truly that and we, we know that in physics, you know, as above so below sort of saying and the principles that exist at a higher level, you know, reflect themself and the more kind of microenvironment.

So you can then create and that's where you bring in things like punch way you bring in, you know, relationships, you bring in, you know, where is your place in the world, you know, how do you, how do you relate to your family, to your friends, and how do you feel safe in your world?

So all of that creates and a kind of a macro environment that we exist within, and that becomes an a reflection of the signaling that takes place. And inside the body, you know, into that that microenvironment and the echoes

system is, you know, when we look at cancer, we we think of this, this tumor.

And we always think that everything within that tumors is same. There's no, no, you know, no change within, you know, one part to another. And and then we don't even look at what's around it.

All of it is just that. And we, you know, maybe radiate around the tumor because we think maybe there some other kind of cells there. But we don't recognize that this is a very complex ecosystem and that all these components that exist within the tumor, you know, one portion is not the same as the other.

And any kind of intervention that you do will then change the expression of that environment. So it's just like if you have a neighborhood and then all of a sudden you have two new families moving in and in that neighborhood, all of a sudden the interactions, the relationships, the dynamics, all of that is going to change.

And it's the same. Exactly. That happens within that the the ecosystem of a tumor. So any kind of intervention that you do will then shift that either you know, towards the the better, the worse or expressing in a different way.

So it's really important to understand that you can't just simplify it. You have to look at it from a, from a kind of complex system and address it as a complex system, and then look at the the health of that whole environment, of that whole ecosystem, and then nurture that whole ecosystem in a way that then can make it express itself and the the best, the most beautiful way.

Just like any kind of garden, you know, how you how you feed it, you know how you water it, how you, you know what kind of seeds you plant. I mean, am I going to kill it just with toxins?

And, what's that going to create, or am I going to create this beautiful organic garden? You know, that's. Yes. Can I bring these these healthy, nourishing vegetables and flowers?

And so it's the same thing within the tumor microenvironment. So it's it's important to look at it as, as that rather than here I have a tumor that I got to cut out I got attack I got a burn, I got it poisoned.

And once that once I poisoned it and cut it out, then I'm cancer free. No, it's still that environment that you got to look at. Huge. You know, and that's one thing that I know I've said, you've said.

And other people on the summit have said that you really cannot heal from the environment in which you got sick. And so that kind of alludes to a lot of things, a lot of layers down to sort of the familial ecosystem to the communal or cultural ecosystem, to the the ecosystem of the industry, but even more specifically to that cellular and intracellular ecosystem.

This is huge. And so talk to us, you you alluded to this concept of heterogeneity. You kind of mentioned that there's like one tumor is not just one tumor.

Can you speak to that a little bit more and tell us what happens if you are putting pressure in with one particular treatment in a heterogeneous environment?

Tumor Heterogeneity and Treatment Selection

What happens? You know, what what is interesting is that you have then the tumor, you go in and you have a biopsy, and then you say that these are the defects that are there.

These are the genetic steps. These are the mutations that we're seeing, you know, and we're going to because these mutations exist there. And then you assume that that's a picture that exists in within the whole tumor.

But in reality you've only kind of put a little bit kind of in that area. And now you're focusing treatment. And on that whole, you know, cancer, you know, as a disease, you know, with what you just found in that little one area.

So, so it's it's like gaining information about a whole city by just looking at one tiny little neighborhood and thinking that you can then translate that information into the whole city when you know that that is not the case, and it's the same within that, within a tumor.

So that's why it becomes so important, because you know, then that, you know, each section functions differently. Each section is a neighborhood in itself and that behaves differently, than, than just kind of the one that you did the biopsy.

So you need to look at it as a whole. And you need to look at, at them and create treatments that are not just specific on those drivers, but you got to look at that at all of it and how and, and like you were talking about, you know, so when you then do a therapy, let's say you bring in like a chemotherapy.

And what happens with cancer cells is that, you know, obviously you have the ones that are then very susceptible to that therapy. And they, they are going to to die because they're susceptible.

But then you, you have the cells that are not the components of that, that environment that is not susceptible. And they have all these different escape mechanisms.

They have ways to spit out the chemo. They have ways to, you know, shield themselves from the oxidative effect, you know, so they have all these different protective mechanisms.

And what you're doing is that you're then creating is a selective process where you're then allowing these other stronger, more, highly evolved cancer cells to, to become more because you're getting rid of the ones that are kind of weaker and easier to attack.

So initially you would then see that tumor shrinkage and you say, yeah, we're, we're, we're we're winning. But in reality what you're doing is that you're, you're creating selection where you're allowing the stronger, the stronger species, cancer species, so to say to, to take the hold and thrive and, and then take off.

Oh, that's the big one. And so kind of like the ultimate whac-a-mole game you could possibly imagine. And the. Exactly. It's exactly like that. You you just keep, keep on hunting and then until you realize that, you know, you kind of filtered out through a selective process, you have now exhausted all your, your tools because you've gotten rid of kind of the, the, the weak or kind and, and now you just only have the ones that are resistant, that are educated and how to deal with the different therapies you're throwing at it.

And so now you're standing there, you know, stage four can't do anything. And and now we're done. Gosh. You know, Michael, you made me think about so many of those patients who come to us at the very end.

They've done they've literally harvested all of the weaker cells through maybe first line of therapy, second line of therapy, third line and all is left behind are the more difficult to kill, more aggressive, more assertive cells.

And what standard of care wants to do at that time is just say, we're just going to, you know, like pour holy hell napalm all over you and and, you know, hope for the best.

That's known as this maximum tolerated dose approach. And yet what you're describing is what people like Doctor Robert Gaytan be out of. Moffitt has come to find that when you over harvest and you push back those weaker ones, and you only leave behind either those more resistant, aggressive ones or even invoke the waking up of dormant stem cells.

Now, our tendency is to want to hit it harder, and that that's actually exactly the moment to go to a lesser approach, like a backing off and so he's talked about in other researchers around this country have talked about applying more of this adaptive approach.

And so instead of maybe you go and you harvest a few of the weaker ones, and then you bring in support and resources for the rest of that ecosystem. So talk to us about some of the strategies you might do to support the

ecosystem.

While there may be pressure on those cells to kill off those cancer cells. And you bring it up. And really important point is that when you you can then do a little bit of pressure in order to be able to kill some of those cells.

But not all. And that allows and the immune system then start to kind of recognize what is being killed off, seeing the components of of those cells and then being able to to create an immune response rather than doing kind of like you're saying, just pouring, pouring all that toxic waste into an individual and, and also destroying the immune system response.

If you just do a little bit, you know, a little bit, all those cancer cells comes out immune system able to recognize it and then able to then go and and and address that, you know, which which becomes then a beautiful process.

Yeah. Yeah. It's very elegant what you're describing when it's done. When it's done. Well it's not like standard of care.

Supporting the Terrain and Immune Response

Being aggressive is a bad thing. It's when and how you apply it and the manner in which you apply it that can actually be harnessed in a very elegant way.

And so I think that that's where we as integrative professionals see the utility of that. But what's even more is we can bring in other tools simultaneously to bolster the healthy.

So tell us about that. That's Regina. Yeah. Yeah. Exactly. And and so, you know, working with the tumor microenvironment or working with that ecosystem, you know, and an important aspect also to understand that there is there's no separation between the tumor and the environment and the environment in itself, the health of the environment that actually signals to the tumor and then controls the behavior of the cancer cells within the tumor.

So, if you have then a, an inflammatory environment or a toxic environment or a bunch of infections, then the signaling to the tumor is going to be much more aggressive.

And it will also then drive more cancer stem cell activity. And they've actually seen I'm talking about cancer stem cells, which are yes, cells cancers that cancer cells that can they are chemo resistant, you know, tend to be chemo resistant, tend to be radiation resistant, and they tend to just kind of hang out there.

And they're not really fast metabolically active. So they're hard to attack. And once you're done, done with your chemo, with the radiation, they just they go to work and they, you know, they actually go to work, you know, even more.

And what's fascinating is that the environment around that tumor can then activate normal cancer cells to become then cancer stem cells. And so these these cells are able to kind of shift back and forth depending on what kind of attack or depending on, you know, what you are doing to that environment.

Wow. So if you, you know, let's let's say you choose to kind of do some of the traditional oncology, it just kind of shows the importance of of cleaning up that environment.

And, you know, you talk so beautifully about the, the terrain tan and how important it is to kind of open up the, the detox pathway so we can start to kind of drain that the swamp, sort of say, and, and drain that from all of toxic waste.

And can I clear that out? So you, you get the, you know, open up your, you know, your, your liver, your kidneys, your, your colon, your, your skin, your lungs and making sure that you're able to kind of open up and clear these toxic waste out of there and then also then support the lymphatic movement and, and so that, you know, what exist around the, the tumor.

Now, we're able to drain these toxins out of their. And then obviously, it's important to recognize and find what kind of toxins are we dealing with. You know, what are we dealing with heavy metals.

Are we dealing with chemicals. What kind of infections are we dealing with? And there's so many beautiful natural substances that are out there to be able to address these different things, you know, and, and so once you then start to recognize what is it that exist within the body, what is this system, you know, what does it consist of?

And you just open up the pathways and make sure that whatever you're doing within the system is able to drain out, and then you are then going after these different components and, and clearing that out.

And now you're shifting that whole environment that exist around that tumor. So now the signaling is going to be less aggressive, less prone to and to kind of promote all these kind of defense mechanisms that it will have if you choose to do traditional oncology care or why not just kind of start with the more gentle type of therapies first and then see how you're responding.

Yeah. And you both you and I, we see, you know, people they they get the cancer diagnosis. And all of a sudden they become the Three Stooges and, and you know, they got to do everything immediately instead of just kind of taking that breath.

And let's kind of start with some of the more gentle things, you know, lay the foundation, you know, clean up the environment and knowing that by doing that.

Yeah. Yes. Maybe the tumor still is there, but you've changed the environment around that tumor. So any therapies that you're doing, you know, with that type of environment is going to be that much more effective.

So, so that that, that is, that is the key is to really control that environment. I love it. And what you just spoke to, it's like I almost imagine like visually I'm seeing there's like this castle, like this sort of cancer castle and you are clearing, you're creating a moat around it, both to keep in what's inside the castle, but also keep out what's outside the castle.

And so kind of fortifying that environment. I also love that once you have kind of blocked it away from all those signaling molecules and signaling pathways, it becomes a little bit vulnerable.

And you can then target like a Trojan horse going into that castle, like, oh, we're bringing you gifts, but actually we're bringing in, you know, feral ptosis, or we're bringing in ketone bodies or we're bringing in, you know, high dose vitamin C or whatever.

Like, I love it because it's it's like you're keeping those cells on, like you're keeping them guessing instead of it being the other way around. Because over time, don't you find that our healthy cells become less flexible and our cancer cells become more flexible.

And that's a dangerous combination. And so. Yeah, please, please. Yeah. And that's, I mean, both our friends, you know, Doctor Paul Anderson. Yeah. I, I it still always stick in my mind.

Yeah. The first time I ever interviewed him, on my radio show, he said, well, we've got more healthy cells in cancer cells, so yeah, the, the importance of focusing on the healthy cells and focusing on their behavior and optimizing them, becomes so important when you're dealing with this.

And and exactly what you're saying is that if we have strong, healthy cells and they're flexible, the ability for cancer cells and to convert them or, or shift them into cancer like behavior is going to be, you know, it's going to be impossible.

So by by focusing instead of fighting cancer, we should then focus on obtaining health. and and then. Yes. Yes. And doing kind of looking at everything possible that we can do in order to be able to optimize, you know, our cellular function.

Healthy Cells, Cell Membranes, and Mitochondria

You know, what do we need to do to, you know, clean up the environment? What do I need to do to, you know, heal that the cell wall membrane. So because we know that nutrients and signaling and toxins you know, all of that gets transported through that cell wall membrane.

And if that is is kind of rigid and hard and, and we know that toxins are going to get trapped within the cell where no nutrients are not going to be able to enter, and, you know, to support the mitochondrial function.

And that cell is then it's going to start to shift, you know, towards more a cancer like behavior. There's going to be, you know, genetic genetic changes that takes place that's going to express more and more on good genes.

So if we can then support the cell wall, the help of the cell wall membranes, we can support, you know, making sure that the mitochondria inside is humming beautifully and just, just like a car that we we change the oil consistently.

We yeah, we we give it the best possible gas and we make sure that the engine is clean. You know, that's all we need to do with our mitochondria. And by doing that then we are then shifting, you know, the, the, the Cellular express ocean and and it's and what, what we see is that healthy cells beget healthy cells, meaning that we are then promoting the division of more and more healthy cells.

And then cancer becomes something that becomes easily controlled because it lives in an environment where it's it has a hard time to to gain an upper hand because, you know, the the environment just says says no.

Yeah. You know, Michael, you bring up something. I'm curious of your thoughts on this because a lot of patients come to us and their their goal is to eradicate every last cell.

Right. They want 100% clear scan. They need those tumor markers. Perfect. They are so hellbent on like we've got to scavenge and find and kill off every one of those cells.

What do you say to that when it when you're, met with that? Well, I mean, going back into kind of the, the neighborhood, you know, symbology again if we are going to go and clear out to everyone that we don't we don't like their opinion.

We don't they don't agree with us. and all of a sudden, we're not going to have a lot of people left. Yeah. And so it becomes and and by having that focus, you're more in that at war with cancer.

And I and I think the cancer is a it's a kind of a mechanism. It's a survival mechanism. So it's a piece of us. And that's a kind of an emotional hurt or a physical hurt that.

So it's separating out of desperation. And if we so it's kind of like our shadow self in a way that we and by us and stepping away, pushing away our shadow self and, and going after and then attacking it, you know, attacking, you know, the things that we don't like about ourselves.

It's the same way that if we go after, you know, the cancer cells and go after, you know, every piece of that, it means that we are not fully embracing who we are.

We're not fully embracing the, the, the weaknesses that we think we have. But because we creating that separation, we are not feeding or giving life to an area that's, having to go out on its own and survive on its own and, and then become then a tissue that's separate from you.

So I think that mentality is very, very dangerous. And I don't think that we will ever really find a solution where we can kill all cancer cells, because that's not possible.

It's the same people coming and saying, I want all parasites out of me, you know, kill them all. They're they're

horrible. and I can't believe that I have worms or, you know, and because we all got them.

Yeah, it's all there. And they are part of an ecosystem. And what's fascinating with cancer cells is that, you know, the genetic material, the the oncogene, the wiring for that exists within the cells for a reason.

So it didn't just kind of come there for, you know, because it was bad. It came there for a reason. We may not understand it, but it is a it's a powerful reason.

And I think as we are evolving in our understanding, were then able to kind of co-evolved with knowing the power of what these what these signal signaling will do.

So I love this conversation. It's so elegant because that is like that places we cancer cells are heard of us all the time. All of us have it all the time.

And so it's like you said, impossible to clear this out. So my hope is that people can also shift their thought process to understand that you can live very well with cancer, live a very, very long, healthy, vital, thriving life and die of something completely unrelated, right?

Whereas those who kind of go and going, going, going go until they get every last bit often, unfortunately sort of Thelma and Louise themselves off the cliff, you know, along with it.

And so I love that you, your analogies are lovely of how you bring that to, to fruition. I'm curious, like you have I've watched you even evolve in your practice.

you just expanded into a really beautiful, larger space. In fact, I love his ecosystem. You guys, he's going to have his farmers markets will be around his building and the relationships he's built.

He was just doing a really cool local community, thing over the weekend. Like, it's just you, you've you've taken your clinic into the ecosystem of your community, and you've brought your community into the ecosystem of your clinic.

I think that's something that's also very unique in the healing space. And so now that there's kind of the macro of the ecosystem, what types of tools are your favorites perhaps, to use in enhancing or supporting the ecosystem of your patients?

And be it specifically, they're kind of the more macro all the way down to the micro and specifically to the tumor microenvironment. Well, I'm and I, I love kind of the, the basics of of who we are.

You know we I believe we're frequency. So I believe, you know, frequency medicine becomes really important. I know we're being sublight. So I, I love light medicine.

I also know that oxygen is, is it's who we are. Water is what we are. And so looking at these kind of fundamental components of what is crucial for our existence and bringing those kind of therapies in, I think is, is is key.

And I think that is, as we are doing that, we're going to evolve and become much more powerful in addressing, you know, the this abnormal. Yeah. These abnormal tissues, you know, that would call cancer.

Mindset, Trauma, and Emotional Terrain

So you know, things like sort of dynamic therapy photo by modulation ozone hyperbaric. also, you know, frequency medicine. Yeah. There and there, bunches of them out there, you know, whether it's Rif, you know, we have a machine called moniker that I, that I love.

You have scans. You have there's so many different ones out there. And then each practitioner kind of find the one that they love and they that they resonate with.

But I at the end of the day, when you look at tissue and we, we look at like cancer and we think that that is such a solid, you know, piece of tissue and we know and reality, you know, matter is mostly frequency.

If we kind of dive deeper and deeper and deeper. Yeah, we really kind of go beyond electrons and protons and neutrons and all of that. And we, we as we dive deeper, then we just get to, you know, specific frequencies.

So it has to be then that, you know, the cancer or any kind of disease tissue is an abnormal frequencies. And by correcting that, we should be able then to express healthy tissue and healthy cellular function.

And it so I think as we're evolving in that understanding, we're going to be get better and being able to address cancer. So I would say that those are some of my favorite tools.

And then looking at them, you're talking about trauma and talking about the emotional well-being of an individual. And so that is a kind of a frequency on the energy that we're holding on to.

And because we are not able to process it, we're not able to express it appropriately. And then we are carrying it and, and yeah, energetically somewhere in the body.

And, and it is fascinating to see where the cancer ends up and how that then translates into. Yeah, frequently, you know, like you were talking at the breast.

Yeah. There's certain type of emotions, trauma, you know, tend to be associated with that with with colon, with kidneys, you know, with gallbladder, there's certain sets of emotions, you know, traumas that tend to be associated with those organs.

So it shows that these organs have the capacity to, to hold a certain type of traumas. And, and the only way to really kind of relieve that organ then from that trauma is to then kind of move through that energy and recognize and see what that is, and then bringing in therapies like, yeah, we do APM here, applied scanner biology.

You have eMDR, you have, you know, I've recall healing. And yeah, there's so many different therapies out there that are, you know, amazing family constellation.

Yeah. Kind of seeing how the family structure and, and the, the energy, you know, generationally how that kind of sets up your energetic being and, and how that kind of translates and into deficiencies, diseases and abnormalities within tissue.

So I, I, I these are the therapies that I love that I feel is going to really shift things. Then we can bring in things like, you know, obviously high dose vitamin C and kind of the normal, normal things and then curcumin I. V.

and yeah, and we do that fab ptosis where we bring in the artist and then high dose vitamin C and, and then can I eat alongside with that in a certain way and maybe some repurposed drugs along with it.

and then we kind of work on it metabolically with, you know, poly MDA maybe and DCA and, and you know, so we, we have and then control the, the kind of a inflammatory signaling environment with, you know, like curcumin or whatever.

Yeah. Frankincense or. Yeah. Then bring in some EGCg is there. So there's so many cool tools that exist that we can bring in. And these I feel is kind of things that you bring on top of, of doing the foundational things which I feel light, oxygen, water frequency and, and with that kind of the emotional mental well-being of an individual.

Oh so delicious. And what you just like helped illustrate here was we typically have just our focus and standard of care tends to be destructive in nature.

That's its job. It's to get rid of to kill us. Cytotoxic reduce. That's the terminology that we use there. So chemo radiation, targeted therapies surgery those are the main ones.

We might have them endocrine blocking therapies, endocrine disrupting therapies. We might have immune therapies that are about trying to turn on or off a switch to the immune system, turn off, part of the immune system that provokes cancer, and turn on a part of the immune system that provokes actually autoimmunity, which, not a great idea for someone who's got an autoimmune history.

You can send them off another cliff. Right? So you just showed folks that there are dozens of powerful tools that can work alone or in combination, like the right dose duration combination.

but, you know, together just in the integrated space or with, with conventional medicines or all the everything in between. I just love that you illustrated that so beautifully, that hopefully people their ears were percolating around. What was that? What was that?

What was that? What was that? What was that? And they'll get curious to want to dig deeper, but I want to just highlight something that you said. You're talking all about ecosystem here.

And you talked about the fact that we, you know, we're kind of built to these fundamental molecules, you know, and you really love the the light and the sound and the water.

And it's so funny. I just I love this concept. It sounds so esoteric and woowoo, but it's just biochemistry, folks, which is we are stardust, right? We are oxygen.

Hydrogen, nitrogen and carbon. That's it. And a variation of that theme, every single cell and and intracellular part of our being is made up of a different combination of those to give what you see in front of you.

The way my stardust a lot, you know, organizes makes me look like this. The way your stardust Michael organizes make you look like that. No wonder we are so responsive to therapies that are directly interacting with those particular molecules.

So light interacts with water, it interacts with oxygen, it interacts with, hydrogen and nitrogen. And all the vice versa. Is frequency the same thing.

So one of the therapies that a lot of our patients are hearing a lot about and bringing to, but probably bringing into your office and saying, what do you think about this?

Frequency Medicine and Photodynamic Therapies

It makes me laugh because we've been doing these therapies for a long time, which is this therapy called histo. Trixie. Right. Do you want to go into this conversation about how long have we actually been using photodynamic?

Photodynamic, these concepts of taking our cells and shimmying them with frequency to break them apart and reorganize them in different ways? I would love to you to speak to that, because here it is.

We're like the billion dollar, you know, tool of therapies that people like you and I have been using in our practices for decades, and learned it from people who'd been using them for decades, if not centuries before that.

Yeah. And yeah, you're like like photodynamic therapy. I mean, and it's exactly, exactly that. And the it it is a therapy that's been around for a long, long time.

I mean, we, we had we know, you know, back in the early 1900s who used ultraviolet light to kill off pathogens. And they used it also in cancer therapy.

And it's a beautiful therapy that has evolved over time when we are making more and more colors, you know, being available through true laser light as we were evolving in the in this process.

And it's really cool because each color, you know, we we are like Perseid beings of light. And with that it is a full

spectrum of light. And so each portion of that spectrum, you know, has a certain function, and we can even see them looking at in a cellular level, we see the mitochondria and we see, you know, the different as the electrons are moving through the mitochondria.

Yeah. We we see that there is different stations, you know, way stations that are kind of helping to move that through. And each station is then dependent on different light.

So it's showing even that within the mitochondria. Yeah. It is dependent on a full spectrum light you know. So we need to be exposed to that. So a lot of us inmate I mean a lot of us now we are sitting in offices, we're inside.

I mean, for somebody to be outside for 15 minutes in a day, I mean, that's almost marvelous right now. I mean, most people, they they just barely get into the car, you know, drive to the office, walk from the car to the office and then back in and then drive home, watch TV and.

Yeah. And that that's kind of the life. So the majority of us, we are completely light deficient. And so that's why it becomes so important then to bring these type of, of therapies in.

And like you said it it, it changes. Then the expression of of the cellular functions by bringing these this kind of energy energy in and and it it's so it's so amazing how we look at like the DNA and it looks like this kind of a spring.

Yeah. The little coil. So we can just see that bringing in them frequencies. How this coil, the vibration of this coil will then change and how that will then change.

Also the production of the proteins that are are being made within the cell, you know, and you look at proteins, they have all these different kind of structures and how they are structured, depending on how they're able to and communicate with each other and how they're also they are kind of recipients of light.

So they themselves become like antennas in a way. So it it it's amazing how all of these components, how they interact with each other and by bringing in, you know, like you said, just very fundamental components.

You know, you can then have a a huge impact on the cellular level. And we also can know with like the fourth phase of water, how we are looking down upon water and seeing how the water in itself creates like a battery effect within the cell.

And that that kind of and how light, you know, separates these charges to, to create more of a battery within the cell to create more energy. And so all of these things, you know, they they go hand in hand.

And I think a lot of times when we look at, treating cancer, we, we we're kind of bringing it out kind of trickery out of box instead of them looking at the kind of the whole aspect.

And we try to kind of manipulate things and not saying that that's not needed. But I think if we don't, if we don't look at it from the kind of a whole perspective and bring all these different, you know, the light and the energy and talk about hydrogen, you know how important that is as well.

Yeah. In addition to oxygen. And we're we're seeing hydrogen therapy and how, you know, that we've talked about the electrons moving through within the mitochondria, how hydrogen then allows more electrons to move through by being that kind of positive of charge on the other side of the, of the membrane.

So it's all these kind of just very yeah. Again, fundamental components that is so needed. I love it. And it's it's so elegant. I mean, and for the listeners to be aware like cancer.

so detainment therapy has been approved for cancer therapy since the 1960s in the United States. you know, photodynamic therapy. Now, we've got this whole histo trypsin, which is basically lithotripsy to your tumor to break up like you would stones in your kidneys.

this is doing the same thing in the tumor area. And everyone, you know, it's being approved for liver, liver Mets and different things like that, that we're excited to see.

These are because they're far less invasive. They're far less toxic. you still need to prepare the field, the micro environment. Because if you break these things down too quickly, which is my concern of these newer, you know, FDA approved therapies, they tend to be like a lot more is better approach.

That maximum tolerated is. So you have to be mindful of things like tumor lysis or cytokine release syndrome. Those are the things again, we as these nuanced integrative practitioners, we take full audit of the whole terrain and know how to best support them.

And what Doctor Michael has all these tools like his toolbox is like a clown car. Like you can't believe how many things are coming out of it. You know, at the end of the day, it's really beautiful for people to know that there are tools to to address, like you said, the fundamentals.

But actually have merit in standard of care, treatment of cancer. And and. Talk about is not alternative. It is an alternative. I mean, and that's you know like the his the trip.

See you know, we use sun waves especially kind of on the liver you know that. Yeah. And it's amazing what it's doing. But it's the same thing. You're just using frequencies, you're using pulses.

You're using and and and that will then kind of change the behavior when you have kind of a it's kind of like a rigid thought or rigid belief system, you know, and you're holding that strongly.

And now you're kind of bringing strong energy into that to shake that up. And so that now you have to reform, you know, looking at things in a different way.

and, and I kind of that that brings me to think a little bit about like psilocybin and some of the, some of that medicine that's coming out as well where we're then kind of shifting, where we're shaking the snow globe sort of say, and how we are thinking.

And I think the bringing these kind of frequency medicine like, is the trips are using the sound wave or, you know, light or you know, where you're bringing that in and you're kind of shifting the energy within that tissue so that it has to express in a different way.

I love it. You're talking about sort of like shaking things up to reorganize in a different desired way. And that's so beautiful, because what happens in just standard of care alone, this is, you know, this is not about a bashing session of standard of care.

It's just that I don't believe it should be done alone. And I think it could be done better. And I think we bring very elegant improvements to it.

Future of Integrative Oncology

And so I'm hoping that people walk away from this summit realizing this isn't an either or, that this is very much a this. All the things talked about in this summit should be standard of care, period.

That everything comes to the table and it gets, you know, chosen for the patient based on what that patient needs at that time. And you then adjust accordingly along the way.

But Michael, I think the thing that I get most excited about is like, what's on the horizon because you and I have been at this for a while, and over my 30 some years, I've seen more positive changes in the last 3 to 5 years than I saw in the cumulative 25 years prior to that.

So tell me what you're most excited about on the future, and send us off with a little bit of like, something to fill our

hope chest with today. Well, I and I love kind of how the, the kind of the holistic field has evolved.

And then all of a sudden the traditional oncology and the research that they're kind of recognizing the, the inabilities, I would say, and the areas that they, they are lacking and then seeing the validity, you know, all of these different things, like you, you mentioned, you know, all these different therapies that that, you know, that we didn't believe in, like the metabolic we, you know, and, and all of a sudden you have, you know, people winning Nobel Prizes, you know, because of now's the time then for that to be recognized.

So I, I see kind of how the two systems are going to marry and interact with each other in a much more beautiful way, where one plus one, you know, does not equal two.

Yeah, one plus one is going to be kind of that exponential growth. And and you also have that the, the kind of bringing in of like the AI technology. And everybody is so afraid of AI.

But we also have them, you know, looking at the genetics, looking at the different interactions with the, the natural therapies, you know, the chemotherapies, the repurposed drugs and seeing, using then AI to see how we can much more efficiently being able to kind of target these specific tissues, you know, through liquid biopsy.

So we do we can kind of see what what are the cells or what are the kind of metabolic byproducts of, you know, from cancer. And and so then we can kind of see all the metabolically active types of cancers through liquid biopsy.

We can see those metabolic processes and those chemicals. And that kind of see, you know, what are some of the therapies that we can bring in in order to be able to shift the expression, of these, these cancer cells and, and I think that is really and I, I mean, I just had one patient.

Yeah. When we did that kind of a the testing that exists now, and I think this testing is just going to evolve. I think it's just kind of barely starting to move.

And and I'm so excited to see what it's going to look like ten years from now. But I mean, she is battling with it. And yeah, you know, fun gated. Yeah. Breast tumor.

And nothing was moving. Nothing was she was doing you know still just growing. And here we then do the test, then we bring in, then we'll look at the kind of the genetic, the dysfunctions.

And we also look at. Yeah. What are some of the, you know, natural therapies, repurpose drugs and then, you know, even, you know, some traditional oncology drugs.

And we bring those in in a, in a kind of a, in a, in a beautiful I mean, it's a beautiful way. And now all of a sudden, you know, she it's it's it's shrinking.

You know, it feels better. Yeah. And we getting that movement now, you know, spoke to her just a few days ago and, and it's like a third of what it was.

And then she was able to go to, you know, her, family's, kind of a graduation was a one to children's graduated, and she hadn't been able to travel before, and now she was able to.

And so I, I think that, you know, I think that is what really excite me, where we can kind of personalize things even more, you know, directly as to what's going on within the body.

I love it. And really, at the end of the day, what I think you are showing people with this conversation today is we are far more powerful than we've been led to believe, and there are a lot more tools available than we are even even aware of.

And so, Dr. Michael, what, parting words of wisdom, would you like to share with the our community? Well, I like people to know. There's always hope, you know, and always take a breath.

You know, whenever you're diagnosed, you know, take that breath and look at the options that are available and know that there's so many tools that are out there that you may not be aware of.

And the conversation you have with your oncologist, you know it. Just know that they they don't know of all these tools. They are just limited to the standard of care.

In fact, if they have conversations about anything that's outside of their toolbox, then they may be then, you know, they may be punished. I mean, they may lose their license.

So you you need to know that they have those restrictions and then respect that they do have those restrictions. And then also know that they cannot really bring these conversations in.

So you need to go elsewhere and look for practitioners. You know, like all the practitioners that Dr. Nasha is training someone like myself, you know, there's so many of us now and and I love that, you know, because I my dream, you know, when you when you come to city and you see a hospitals, you know, several hospitals and you see medical doctor, you know, I've, you know, every corner I want to have that to be kind of integrative, doctor every corner because there's going to be and there's plenty of people out there that needs this kind of care.

And so as you, as an individual, as a consumer is looking for that, that is going to drive that process more and more, and that's going to enable us to, bring more education to the community and bring these type of tools even more.

So. So I'm, I'm yeah, I'm, I'm really excited about the future. I think it's going to be really cool. I do, I am too I'm feeling hopeful. a few years ago, not so much.

I think we've seen a lot of positive changes and it's a joy to be part of it. And Dr. Michael, it's such a joy to be a co facilitator with this Summit with you, and honor to bring together so many powerful voices, inspirational voices and knowledgeable voices to this community.

I hope that this, you know, kind of moves its way like that Mycelium Net out there. So I just want to honor you and thank you for being part of My Ecosystem and imparting your wisdom on the ecosystem as a whole.

So thank you so much. I am blessed. Thank you.