Introduction to Breast Cancer and the Summit

Hello. Hello. Welcome back to Mastering the Menopause Transition Summit. I'm your host, doctor Sharon Stills. It's nice to see you all here. Today. We're going to be talking about one of my favorite topics, which is breast cancer.

Because there's so much knowledge we can give you and share with you. And that's what we're going to do today to empower you for prevention or treatment if you do have a diagnosis.

And so I have my dear friend and colleague with me to help us have that conversation and share all her knowledge. Doctor Carol Lurie she's a dedicated practice owner with over three decades of clinical experience as a natural path acupuncturist and homeopath.

You even got me beat out and I feel like I'm alive. Most. She's helped thousands of women recover their health and restore their life through her integrative and complementary protocols involving focused nutrition, targeted supplementation, lifestyle changes and an empowered mindset.

Her mission is to help women recover their health, to restore their life. When the mind and body work together, healing is always possible. I love that statement.

Welcome. Welcome to the summit. It's a pleasure to have you here and be with the honor to be here. Thank you so much. You are so welcome. So I guess before we start, just a little who you are and how you ended a personal journey or professional journey and work that you do now. Sure.

Well, I went to Ncdmb when it was the National College of Naturopathic Medicine. That was a long time ago. It's been through many, permutations, for the better since then.

And I moved to California and got my acupuncture license.

Carol Lurieu2019s Path into Naturopathic Medicine

And I've always been a homeopath and I was always drawn to women's health. Even from when I was little, I was always wanting to be a doctor. And I ended up at the naturopathy school because I was working in New York and Lido Beach with the, chiropractor.

And this was in the 70s before the word detox was a household word, and he was doing detoxifying diets using your. Which is when you look in the eye. The eye is a map to your body.

So I started working in his office and I was extremely naive. A young girl came and she had bad skin. So I'm thinking to myself, what's the problem? That skin.

She takes antibiotics. Everything's fine. No joke. And, then she came back a month later. Her skin was better. She'd lost weight, and she had lots of people coming to him who had either been harmed through regular, traditional medical care or had been, had a problem.

They couldn't help be helped with. And everybody was getting better. So I started doing juicing and blended salads and eating his way. And I lost a lot of weight and I felt great.

And then one day there was this huge pile of papers. We all have them papers they pile up. And I was going through because I was working there, and there was this catalog to the National College of Naturopathy Medicine, and it was like thing.

So, that was the beginning of my journey. I went there instead of regular medical school. And I, I think botanical medicine, herbs, the natural way of doing things and really getting to the root cause.

It's such an interesting journey as a practitioner, and also to help people be curious and discover what got you here. And when you have a chronic disease or serious illness, it's not like when you catch a flu or a cold.

Now the flu has different connotation these days, but in the olden days a cold or flu BC before corona. So it's like, how did you know this just appears all of a sudden?

But it takes a long time before it pops up, whether it's breast cancer or Hashimoto's or colitis or migraine headaches or menopausal severe menopausal symptoms, if you are in balance and you go into menopause, you will have an easier time as you make that transition.

But if you've been way out of balance and you're speeding along to menopause, it's going to be a bumpy ride. And the same as for breast cancer. I mean, it doesn't just pop up the tumor is felled or diagnosed on a mammogram, but it takes many years to develop.

So I became interested in breast cancer when a colleague and a friend, had a lump and I said, don't worry, I'm going to go to every treatment with you, which was an 18 month journey.

And, it was a big eye opener for me because we had studied about breast cancer and cancer in school, but never this acutely. And it's one thing when it's in textbook and you have to take a test, it's another thing when it's a dear friend or a family member or yourself.

And and it was very interesting the first time we went to UCSF and she was there for her chemo, they went to her. Oh, you look a little thing. Would you like something? Sure.

What's the number one ingredient and. Sure. Glucose. And then. Oh. Would you like a popsicle? Do you want a hard candy? And then. Oh, you're done with the infusion.

Do you want a cupcake or a cookie? So the I'm sitting there the whole time thinking, oh my God, what is going on here? For those of you who don't understand why I'm doing it, oh my God, moment.

There is this concept about cancer.

Breast Cancer as a Metabolic Disease

Which cancer, given the choice between sugar and gluten, glucose or sugar and oxygen for it's cancer guess tank, we'll always choose sugar, even though it has to work twice as hard and it gets much less ATP or gas for the cancer gas tank that's known as the Warburg effect.

And it was discovered in 1924 by the German scientist Otto Warburg and he won the Nobel Peace Prize, medicine for medicine for that. So that's the beginning of cancer is a metabolic disease which gives women, a lot of power over the environment they have in their body and the environment they have in their mind.

So that's what that was what I discovered during the 18 month journey with my friend. That was the beginning of the many discoveries that I accompanied her.

So first of all, I just want to say, everyone, I hope listening has a friend like you. Because what a beautiful thing to accompany her on that journey.

And I think that is, that is healing medicine alone. So if you do have a friend like that, when you're done listening to this interview, send them some love and show them appreciation.

And if you don't, that's okay to just open up to the possibility of meeting new people and making new friends and

cultivating those friendships. It's never too late to cultivate a good friendship.

And and I love. I don't think I knew that you started out in Lido Beach because I used to live in long Beach, which is right next to Lido, and was a long time ago, and I had to chuckle because I know what I heard is because that was one of the first things I studied along my journey towards becoming a natural Catholic physician with Bernard Jensen.

Oh yeah. Absolutely. And so You Can is one of the originals. Yes. And I, I went and studied with him and we bought all the cameras and we used to look in patients I love.

Do you ever do that now, do we ever look in the eyes as a diagnostic tool like that? No, no, I mean, I will look at a patient's eyes. There's certain things you can see stress rings in the nervous system or the beads around the outside.

Lymphatic. Those black dots that are in there, that's a problem right. Exactly. So I radiology I haven't heard that brought up in a long time, but that that's what happens when you're old.

You know. So yes. And and cancer definitely is a is a metabolic disease and avoiding sugar. It's one of the first things we do dietary wise. And I love also that you brought up because I know when I first started studying with Doctor Rao and Paracelsus, one of the first things.

Oh, wow. Yeah. One of the first things he said of breast cancer is never an emergency. And I think we get scared, and especially if we're only in the traditional field, they I, I've gone with patients to a traditional oncologist and I've like gotten scared and then I've been like, oh, wait a second, I know what I know.

So it's very easy to get scared. Yes. So so start to start educating and I'd love I, I'd love also if you could maybe talk a little bit about homeopathy because I think anything you could share about homeopathy and remedies, we haven't really touched on that a lot.

Homeopathy and the Breast Cancer Miasma

And I think you're so profoundly adept at that, and it's such an important modality that can often be torn apart improperly in the mainstream media. So I don't know if you want to start with that or just make sure we we get there.

But I definitely I'll start with that. That's a great place to start. So homeopathy, for those of you who don't know what this is, it's it's own system.

It's not like taking vitamins or taking drugs. You're going to a natural path or integrative doctor and getting a whole assessment with your bloodwork.

And you're testing its its own system. And it started in the late 1800s. By this physician, Samuel Hahnemann, in Germany. And in those days the diseases were cholera and syphilis and gonorrhea.

I mean, it was a very specific time in Europe. And he I don't even know how this started. But he realized that if he gave people my newt substances and my newt bits of certain substances, they started getting better.

And he started taking meticulous notes, which turned into the materia medica hobby. Apathy is very, very detail oriented. So when you when somebody comes in, let's take an acute case.

Two people have poison oak. They were out in the woods hiking and they got itching and they got a rash. The rashes can show up differently on each person.

One can be red, one can be yellow, one can be dry. One can be oozing. If it oozes, what color is it oozing? Is it yellow or white? Is it thick or is it?

Then you go down by new detail. So and you want to gather the symptom picture of the person physically, mentally, emotionally. So one person's rash is better with hot water.

One person's rash is better with cold water. Those differences distinguish the different remedies. So there is no one remedy for disease x. It depends on how the person presents.

So that is homeopathy I think is the epitome of individualized health care. But for breast cancer, let's bring it back to breast cancer. There are certain illnesses that have energies to them.

Cancer is one of them, gonorrhea is another, syphilis is another tuberculin. Tuberculosis is another. So certain energy diseases have energies. And that energy is known in homeopathic philosophy as in my ASM miasma.

So breast cancer has a specific set of energies or a certain complex to it. And I'll give you some of the symptoms. Women with breast cancer tend to take care of everyone else and put themselves on the back burner.

They run around saying yes, and even though they're exhausted, they don't say no. They have what I call the blurry boundary syndrome. That means they're taking advantage of people like I asked them to do everything they can do stuff and then say yes, but inside they can be very resentful.

Why could she do this herself? Why is she asking me again to take care of this? I really would rather not. But still the woman says yes. So there's a little bit of a victim mentality in that.

She in her mind, she's always busy. I have to do this. I have to do that with. This needs to be done. I have to run here. I have to do this errand. So she's making lists in her mind.

And there is a a bit of a perfectionist approach to life. So she would rather do something herself because the person that she would consider asking may not do it exactly right.

That is the, my ASM on not fully, but a little bit of what is breast cancer. So when I'm working with somebody in my clinical practice or in my online group coaching, you know, I often recommend this.

And it's as if I've had women say, oh my God, for the first time I can breathe. I'm not thinking, oh, I have to do this. I do this again, right? I mean, it's nonstop.

You push yourself nonstop. So one of the when you think about what is cancer, cancer is cells that have decided to stop paying attention to the rules of stop and go.

So the one of the best things we can do on a cognitive level is we can stop and we can just stop saying, yes, we can stop overdoing, we can stop eating too much.

We can stop watching too much addictive television or drinking too much. We just need to stop. So there are physical changes that we can make which will help mirror inside on a cellular level.

What needs to stop, which is the cancer cells growing out of control? You know, going through stop signs, not caring about the rules of stopping go, doing whatever they want.

They're not paying attention to the the healthy lanes and the healthy lines of communication. So as we develop that more individually for ourselves, that benefits your health inside of you.

Because what happens on the inside mimics what happens on the outside, or vice versa. Both ways. That's so beautifully said. And the art of homoeopathy is such a beautiful piece of the puzzle that often, you know, it's one of those things that functional medicine doesn't embrace at all.

And it's a shame because it's such a powerful healing modality. And so for those of you listening, it doesn't mean if you think all those things, you're going to get breast cancer.

No, not at all. Thank you for making that. Because yeah, I think that it depends on how upfront that is in your life. And this is often for women who've already been diagnosed, I see this.

And if there are very subtle nuances to when you take a homeopathic case. So just because you have some of those symptoms doesn't mean you're going to get breast cancer, as Doctor Stills just said.

Absolutely. But I think when we when we talk about prevention and we talk about optimizing your vitamin D levels and eating, I think the list that you just gave is such a good checklist for us to go down because we we need to not only be preventative in what we're putting in our mouths, but preventative in how we're running our lives and how we're thinking.

And I think if you identified with any or all of those, because it could be very easy to identify with all of those, to just start, maybe pick one and just start thinking about it or working on it with a therapist or an emotional healer or whoever.

But that that can be part of your prevention is unwinding that miasma and that way of being, which is such a common way that we women have been raised.

Yes, it is, it is. And, we get that messaging thanks to American advertising. One of my favorite, favorite ads is, the the suicide view of a house, and it's a quote unquote mess, meaning the beds aren't made.

There's dishes in the sink, and there's a woman sitting there and she's depressed.

Hormonal Health, Toxins, and Estrogen Disruption

So I saw that ad, and I'm thinking to myself, why is this woman's job or responsibility, that the house is a mess? Where are the other people who live there with her, whether it's a man or a woman who doesn't matter?

And then she takes a pill, an antidepressant, and she's up and around and the dishes are done and the beds are made. And I'm thinking, okay, what's the messaging here?

What happened to her before? Maybe she's sad because, you know, somebody died or some tragedy happened, or she's unhappy for other reasons. So I think we need to unravel when you get a diagnosis of breast cancer.

Yes, there is the physical we need. I I'm a big proponent. I want to know what's on the pathology report. I want to know a lot of bloodwork that's not normally done by a regular oncologist.

I want to know the story of what happened for years beforehand. Because women, I'll say, you know, have you ever had anything upsetting or traumatic? And really, when you get to be a certain age, the answer cannot be no.

I mean, I really I don't, you know, we all have had some level of trauma. And so finally the woman will say, yeah, but that happened 25 years ago. And I go, okay.

And she goes, okay, what? I said, well, let's talk about that. So I mean, well, it could be that it's 25 years ago. What we don't what we aren't able to process in the moment is stored in our cells.

And then you have life happen. Life happen, and you get environmental toxins and you get stress. And what was like, packaged away. All of a sudden that package breaks and it starts creating inflammation.

And for some women, it ends up with migraine headaches or colitis or, you know, or it ends up with breast cancer. But there is always some kind of emotional, spiritual insult that happens either currently or in the grief is a big one.

Somebody's mother dies. And then a couple of years later, the woman ends up with breast cancer. Grief is a big one that a husband betrays and leaves them, and then they end up with breast cancer.

There's a lot of impetus emotionally for, trauma and illness post facto. I see that a lot of betrayal by a male, husband, boyfriend, a boss. I see that a lot. And then the onset.

So such a good point. Such a good point. So let's let's circle back or take a step to hormonal health. So let's talk about hormonal health. And how does hormonal health contribute to reducing the risk.

Well hormonal health is not this thing that's separate from who we are and how we live our life. And we're sort of made to believe that our health or certain area of our health is like this topic that has nothing to do with how we eat, how we sleep, how our stress level do we?

I call it positive movement because some people don't like the term exercise. Hormonal health reflects the totality of who we are and how we live. So I have a daughter who's 27 and she's a medical student, and she comes to visit and she has over-the-counter face products, skin products, this products and and you know, I don't talk to her about it, but she was raised by me.

I'm a natural path. We do everything eco, organic, blah, blah, blah. And she's kept some of that stuff. But other stuff, she goes, oh, mom, please. Really?

You know, like she puts her computer and her phone on her torso and I go, you don't want to do that. Oh, mom, please. I send her these EMF articles. Oh, mom, please.

So it's so, you know, young children and young kids I read somewhere, just not just young kids, but, you know, as women, we put 110 chemicals on our bodies by the time we get out of the shower and are starting to get dressed.

So when we talk about detoxifying your home and using eco laundry detergent and not using those dryer sheets, or the worst is febreeze that stuff that you spray on your sofa or those plug ins.

And I'll tell you a story. I had a 35 year old who came to see me with unexplained infertility, and I do. I do work with breast cancer, but I also work with older women who are older women, like I was who, you know, in their late 30s or their 40s and want to get pregnant.

So I love it. Unexplained infertility I'm thinking. So you know she had all the standard medical tests but what they didn't ask her. She comes in on enough perfume that I thought I was on the ground floor of Macy's.

Now you know what I mean. You go into Macy's and that whole ground floor is the perfume department. And I had a scent free office. So I said her, tell me about scent.

Oh, I love scent. I have the plugins, I have the, the stuff in the oil. And I spray myself with febreeze. So by this point, the hair is standing up on the back of my head and I'm thinking, you don't have unexplained infertility, you have toxic hormonal overload.

I said, so go home. Put every single thing you use in your house on a counter and take a photo. 29 items. I'll look at laundry detergent, the, you know, the dryer sheets, the febreeze she had to throw out her sofa because we couldn't detoxify it.

So she was determined to get pregnant. It was either this or, you know, $35,000 of IVF at 35. And she spent a week. She took a week off from work. She did laundry with eco.

She got rid of everything, bought a new sofa. She had to have the rug steam cleaned and everything. And three months later, with supplements, she got pregnant.

Naturally of course she has three kids, so do not underestimate the toxic load of what you're putting on your body and what you buy. Now, I rarely go into a normal grocery store, but if I go into Safeway and I walk down the smelly aisle, I mean, that is intense.

So and those odors let's talk about estrogen disruption. Those odors get into your body through your nose which is a very it goes right into your body.

So estrogen needs to be metabolized out. Estrogen is a very healthy hormone. It does its job and it needs to be eliminated in your body. So what happens when you use these chemicals is estrogen goes into a parking garage, so to speak, and it has to bind to a receptor in order to be transported out through your urine or your feces.

So these estrogen disruptors, they get into that parking lot first. And the parking spot goes, oh, well, you're close enough. You could park here. Even though it's not exact.

It takes up the spot of healthy estrogen. And so the healthy estrogen comes into the parking garage and there's no spots. And then it becomes an unhealthy estrogen.

Estrogen. So that builds up in your body and that creates inflammation. And that can lead to breast cancer or ovarian or some other type of cancer. But if we don't have those chemicals in our body, estrogen will naturally get into our body, go into the parking lot and go, oh, here's a spot, and it will be easily eliminated that this is a really simple way of talking about a very complex topic.

I love this analogy. Right? Where's the parking spot? No parking spot. Unhealthy. How do I get unhealthy? I put over-the-counter junk all over my face, my hair, my body.

I use laundry detergent. I use dryer sheets. The worst. The plug ins, the breeze all toxic. And then you're eating processed foods from a box so you're not providing your body with phytonutrients that you need because you're too busy to cook.

You start your day out with a scone and a crappy sugary coffee, so you're already setting yourself up for elevated blood sugar problems. So these things add up.

So it's not just one thing. It adds up and you're sitting at a desk and you don't get any positive movement and you know you're a little overweight. And then you go to the doctor and they put you on or you have hormonal birth, you know, you get on the birth control pill, which because you have cramps or irregular periods, and then it all adds up.

So everyone who has the plug ins or the febreeze, after this episode, we're going to all go throw it out and we're going to I always tell patients if it's a cleaning product or a body care product, if you've seen it advertised on TV, throw it out.

You want to buy things that are not advertised, that are organic, that you can find at the health food store, or Whole Foods, and start using these, these lesser known names that don't have and that the smell if you if you're smelling that smell, that's something you know, better get some fresh flowers and smell those.

So that is that is really important. And it's something I'm sure a lot of you who are listening or don't have breast cancer. But this is things that these are things that you can be doing to prevent, diagnose cases.

So it's not to wait until something serious happens. But let's all take action now. Let's clean up what we can, what we have control over, and we have control over the products we use to clean our house, to wash our clothes, to wash our hair, to wash our bodies, and so forth.

And so that's such a act of of kindness. And so, you don't want to be in the miasma mode of, okay, now you got a list, and now it's stressing you out.

Take it out. Exactly. So these these things that I'm talking about aren't just for women with breast cancer. These are things that all women we all need to do to be healthy as women.

Yes. And then you're going to see people say to me, well, it's too expensive. How? I mean, how much is febreeze and how much are those plug ins and how much are those stick things that you put in oil?

I mean, you know, you're switching out a 29 product. She had hundreds of dollars of money on that table, and they were all toxic.

Reducing Environmental Exposures at Home

So you spend a little bit more for a dish detergent to wash your dishes, by the way, is another one. There's the turquoise stuff. Everybody knows what I'm talking about.

The worst chemical. And what are you doing? Your washing, your dishes and your hands are in hot water and your pores are open and you're absorbing all the toxins from the turquoise laundry detergent.

Right. The same thing happens when you wash your towels in, in tide, you get out of the shower, your pores are open, you wrap your body around, and then the pores just go, oh, great toxins.

I'll just absorb them into your skin with the dryer sheets in the tide. It's the same thing. These are all, activities that we need to decide. That and choices that we can make as empowered women about our health.

So it doesn't. It's not necessarily about breast cancer. No matter what age you are. This is you want a baby. You got to, like, preserve your fertility, right?

You're having period cramps. You got to clean up how you're eating and products that you're using. I'm still I'm sitting here thinking, I don't know what the turquoise dish.

So it's dawn. I look up, I'm so far removed. That's great. Now, I used to be Mrs. Myers. I loved Mrs. Myers and they stopped using healthy scent. They now use fragrance.

If you see the word fragrance in a product, it's no longer healthy. I wrote them a letter on my office stationery. I'm so upset. I used to. I said, I'm I'm so disappointed.

I used to recommend to you, to all the people I work with. And now you've gone the way, weird way. And you're using fragrance. And also I. Could you just speak to deodorant?

Since we're talking about breast. So if you go, first of all, women sweat, we sweat. It's 100 degrees outside. You're going to sweat, you're stressed out.

You're going to sweat. When? How is it that America decided? Who do you think decided this? That women should not sweat? It's men, obviously. And you know, some advertising person decided, oh, let's put all these chemicals together and get women to put them underneath their arms, which is very where your lymph nodes are, which then go into your breast.

So there's a little bit Emmett over the counter. This is another fight I have with my daughters who will not not use over-the-counter underarm deodorant.

She says, mom, it doesn't work. So, I don't know what to say. There's what I recommend you do is throw all that stuff out. Secret. It's a big one. It's so toxic for you.

Go to the health and store, give yourself a $20 budget and buy five different types of underarm eco deodorant. It doesn't spray. It's usually in a little tube thing and find one that you like.

And if you don't like it, you throw it out and give it to a girlfriend. I mean, it may take for going through five different ones to find that you one that you like.

It's okay. You know you're not buying junk anymore. That's unhealthy for you. Experiment. There's lots of healthy, underarm deodorant that you can use out there.

Yeah, I actually have one that I use and recommend. Patience. That's a spray called Keeping Abreast of It. Oh that's great. It's a great one. And it has some things to move the lymphatic system.

And because. Yes, if you don't, if you are someone who sweats a lot or you don't want to smell, I understand that, yes. So, native also makes a really good one.

So and, and I think, you know, it's interesting with your daughter because I think we as, as women or children, we like, like, maybe I should talk to your daughter because we hear things differently, right?

I mean, you can talk to my kids and I'll talk to your kids, and. Absolutely, they it's the same thing and they'll listen to somebody else. Exactly, exactly.

So, you know, just just a funny, funny side note. So if you're a woman listening and you're, you're like, I know the same thing. My kids don't listen to me and you're on the health journey.

Maybe get a friend or someone else to say the same thing and listen to you, but them, but not to you. I can relate, I always, because obviously I have a lot of friends who are physicians and I think through the years that I always be like, hey, could you tell my son this?

Because I told him and he he argued with me, but then they tell me then that my son will come back and be like, mom did you know, like, really? You're kidding.

Oh, okay. Thanks for sharing. That's great.

Risk Factors, Screening, and Integrative Treatment

So so what are risk factors as women are going through their perimenopause menopausal journey that they that they can be aware of or that they can do something about if they're concerned about breast cancer?

You question if you have a family history of breast or colon cancer, you should make sure that you're on a more advanced, diagnostic workup, which means that not just a regular mammogram, but a diagnostic mammogram with ultrasound and possibly alternating every six months with an MRI.

I encourage you, depending on how close the relative was, if you want to get the tested for the BRCA one and two gene, BRCA, if you're positive for that, gives you up to an 11% more likelihood of getting breast cancer.

And the, BRCA two gene is slightly less. But there is an eight. You know, there's an 8 to 11%. It's the statistics are changing now risk of getting breast cancer across the board for all for all women.

And that's why there's a total of about 340,000 new cases diagnosed every year. And that gets divided into different types of breast cancer. So breast cancer is not going away.

And, I know there's a lot of focus right now on the viral component of our world as there should be. But breast cancer has been here and will be here, and there's new treatments for it all the time.

They're getting more targeted. The diagnosis is clearer, and my experience of going in with my friend taught me that it takes the best of both worlds, because integrative doctors have skill sets and knowledge that medical oncologist and surgeons don't.

So it is possible to go through chemotherapy with much less side effects. Preparing your body for chemo. You don't want to eat a steak tonight and go for chemo tomorrow and wondering why you're going to be sick.

Intermittent fasting has been proven to protect healthy cells and have the cancer cells take up more of the chemotherapy agents. That's that's in PubMed.

That's not I'm not making any of this up. It's all there for research. And too many of the oncologists say you can't take any herbs, you can't do any vitamins, you can't do anything.

That's not science based. There are science references in PubMed which show that if you take certain herbs, you're going to have a better outcome with chemotherapy.

If you do intermittent fasting, you'll have a better outcome with chemotherapy. If you drink certain smoothies in the dealer's broth, you will have less mouth ulcers.

You know, if you go for acupuncture. Acupuncture has been well proven to reduce chemotherapy induced nausea. Cancer related is a very serious problem.

It's when you lose your appetite to the point where you're like eating up your own muscle tone. And it's very serious. It contributes to a large amount of mortality in the world of cancer and breast cancer.

That's this is a preventable problem. You just need to be working with somebody who recognizes it right away and starts instituting some very specific nutritional protocols and delays your chemotherapy until you're recovered enough, or maybe doesn't modify dosing of chemotherapy.

Chemotherapy needs to be standardized to the person, not just across the board, in my opinion. And, I believe that 20, 30 years from now, it's going to be much different than it is, just like it's much different than it was it is now.

I mean, when it was breast cancer first came to being, Gerald Ford's wife announced to the world that she had breast cancer. Before that, it was like, oh my God, you're breast cancer.

You're not telling anybody. I mean, it was a secret thing. It was hidden. And there was a lot of shame for women around it. But she came out, it changed, and then we had the we're going to have a war on cancer.

So I have an attitude which is it's not a war. Breast cancer is not a war. We're not conquering anything. It's not something we want to attack. Who would we be doing that with?

Because it's part of who you are. We want to have a more feminine perspective and begin to have begin a dialog with this diagnosis, with this disease and say, hey, what's going on?

What? How did I get derailed to my life that this has happened and how do I get myself back? And it's my job and my mission to have you be back better than you were.

But sometimes things have to fall apart before they get better. But it is possible. And so we have recovering, empowered through treatment. And we have, empowered against recurrence and empowered is a really important word for me, as you mentioned at the beginning, you used to because we're at the center of our own being, we're at the center of our life.

And you want to find an oncology who will not dismiss your concerns. We'll listen to you and will engage you in a in a relationship in which your opinion matters.

You brought up recurrence and I love I just I love your your attitude. So I'd love to hear because that is something once you've recovered a lot of women, then they live with the the shadow and the fear of recurrence.

So I'd love to hear what you have to say to them. I have a lot to say. I love this topic. So you you do your biopsy, you get through chemo or radiation or and or surgery, some combination of that.

And then at the end you get to ring this bell and they go, hi, you're done. You get a certificate which drives me crazy. So when you're done active treatment now is now is when the real work begins of women who are working with me through treatment.

Yes, we're taking care of them, but we have to be respectful of chemotherapy. So we stop certain supplements around their infusion cycle. And one of the things I discovered with my friend is we were in the UCSF.

The doctor looked up from her bloodwork and said, what are you doing? We went, why? And and she went, because you're the healthiest person in the middle of chemotherapy I've ever seen.

So I mean, it works. She didn't have anemia. She didn't have mouth sores. Her bloodwork was this is the bloodwork of somebody is not in the middle of chemo.

What are you doing? So it was a very positive experience. We thought she was going to start yelling at us. Instead, she said, I want all my patients to be doing this too.

So that's how empowered against recurrence, empowered through treatment was born. So in that moment. So here you are. You ring the bell, you go. Hi. Bye.

Take take tamoxifen. Take, you know, take, aromatase inhibitor and. Yeah, maybe you'll get asked you'll probably get osteoporosis, but you can go ask the pharmacist what form of calcium you can take.

The worst. That's the worst. I mean, I can't even. Well, I'll tell you, it's not just you don't need calcium when you're older, you need a vet. You have to take care of your whole aspect of your bone health, whether you're on tamoxifen, aromatase inhibitors, or you're an elderly woman.

It's not about calcium that young people need. It's about specific bone health, micro environment. Just like we have the tumor microenvironment. So recurrence is real and the risk is the most two years after you finished active treatment.

And the more you can divorce yourself from the standard American diet, the healthier you're going to be. And I don't use that word divorce lightly, because the standard American diet has been shown to increase the cancer risk by 4%, being four times, not 4%, four times more.

So you need to move towards an organic, plant based, plant based not. I'm not talking about vegetarianism or veganism. There's many different diets out there.

There's vegetarian, vegan, keto, paleo. I recommend the modified Mediterranean diet because there's an enormous amount of research around that over, you know, 20 years with thousands of women.

And it's a doable diet until you can translate it for yourself in America and your family. And it's modified because it's gluten free and it's extremely low carb and almost to the point of, ketogenic almost.

And it's very, very low sugar. Why low sugar? Sugar feeds cancer. Keep that cancer gas tank empty.

Recurrence Prevention and Recovery Mindset

But it's doable. And it's not about I can't eat this, I can't eat that. It's like, oh, I'm going to make this. It's delicious. I'm going to invite friends over.

And it's high fat and fat is delicious and healthy. Healthy fats, healthy fats, olive oil, you know, really healthy fats, mayonnaise. So so what do we do?

You have anxiety. You're going to come back. What can I do knowing that you're doing everything possible, changing your diet, changing how you eat, doing really targeted supplements, looking at your trauma and working on your emotional wellness, detoxifying your home, creating a healthy lifestyle and then looking at mindset.

All of those help. And then my I have a week where we talk about reducing side effects of tamoxifen and aromatase inhibitors, which are intense and you can take a drug which takes away the quality of your life and

makes you just think this is not worth it.

So we have to have a way of reducing those side effects, and you need to learn how to talk to your oncologist about your pain. And you can't be told, oh, don't worry, you'll get used to it in a couple months.

It's that's not an appropriate answer for someone who comes and says, I have such horrible joint pain. I've gained 30 pounds, I can't move, and I'm so depressed I want to die saying to and that is a true story.

The doctor said, oh, you'll get used to it. I'll see you in a couple months. So that's not the appropriate answer. I have a lot of, I have a lot of answers for that.

And I have a lot of ways of helping you be on these drugs which you know, research. I'm an integrative practitioner. I believe in taking the best of both worlds.

But you have to individuate the dosing and the medicine for who you are, and you need to work with your oncologist with that. But you need to get educated first.

And I think what you said about when you're done, if you're going down a traditional treatment route, when you're done, that's when the work really begins.

And and if you can shift the mindset to, okay, this illness offered me a gift was a it was a healing moment for me to stop doing what I was doing, or to stop thinking what I was thinking or stop eating, what I was eating, or to stop washing with what I was washing with.

And then you see it as a as a pivot point for leading a healthier life. You can start to have a better attitude and let go of the anxiety. So I want to be mindful of the time and let's play our our time's up.

Otherwise, I talk to you all night so we can talk for a long time. So, you said you had a free gift. Yes. To learn more and buy healthy Hormone Nutrition guide.

And which I just talked about a lot. I mean, everything about how I recommend women eat is in this. So I'm so happy to share this with your audience. Well thank you.

And I think you brought up some good points. And that being, you know, one thing you can really take from this is that sugar feeds cancer. And so whether you are recovered and looking to prevent a recurrence or you're actively have a cancer diagnosis or you just want to prevent it, if you walk away with anything from a nutritional perspective, that lowering, getting rid of sugar, is such a gift you can give for yourself.

And don't forget all those those mind things. And being kind to yourself and relaxing and releasing and learning the power of the know. So thank you for all the work you do and for empowering women.

And thank you for taking time out of your busy schedule to be here with us. And, to everyone watching, thanks for being here. It is now that time where we're going to go have the the mass throwing out of the febreeze and the plug in and we're all and we're going to start cleaning up our environments and discovering and as we said you can do it gradually.

So Febreeze let's get rid of right now. And then as you run out of things, if it's too overwhelming to do it all at once as you run out, instead of refilling the tide, look for a natural alternative.

Absolutely. Thank you so much for having me, Sharon. You are so welcome. We'll be back with another talk and be well everyone. Until then.