Chemo, cancer metabolism, and hair loss

Chemo has ended up with negative effects on the person's body, right? So chemo is a poison, basically. You're trying to poison the cancer cells before you poison the patient.

And I know that's a simplification, but that's really exactly what's happening. So chemo is an oxidizing agent. The idea is that cancer cells are more highly metabolic than a healthy cell.

So it's hungrier, you could say. So the cancer cells are gonna uptake the chemo faster. The problem is, is there's other cell lines in your body that are hungry all the time too, highly metabolic all the time too.

That's your hair follicles. That's why people lose their hair when they do chemo. This is Doctor Talks. Real talk from real doctors on the issues that matter to you most.

Today's episode was previously recorded on the Pain Solutions Summit that I hosted. This is Dr. Pollock. This episode today is about pulse, magnetic field, and the healing summit as part of the use of PBS with cancer.

Dr. Connorsu2019 background and cancer journey

I have with me today Dr. Kevin Connors, who's an exceptional physician, who's also a survivor himself. He will hopefully share with us his own journey, his own experience.

and he has used PDFs in his practice, along with many other modalities for quite some time. So, rather than me telling his story, Dr. Connors, if you wouldn't please mind sharing with us your history, how you got to where you are today, and let's educate everybody.

okay well I graduated back in 1986 from chiropractic school so I graduated really as a functional medical practitioner though we didn't use that term back then the more of a holistic type practitioner I did a lot of applied kinesiology a lot of nutritional work, did a lot of George Goodhart's work in therapy with patients.

I did use modalities, so in the chiropractic world I would have considered a mixer and believe that modalities served a great purpose as well as correcting people's subluxations.

And I was always intrigued with Rife technology, with Royal Rife's work. And it wasn't until in the late 90s when a cancer patient came into my office and was given three months to live.

And we started her with a Rife and she lived another 13 years. I've shared that story many times with listeners. but since then we've used we we've added multiple different modalities of PEMF is certainly one of those that I think could be very beneficial for everybody including cancer patients.

But our practice is really morphed how God just moved us in the direction of mainly seeing cancer patients. So really that's the majority of people that come to us have cancer.

I have written some books on Lyme disease. I've written some books on autoimmune disease. So we do still see some patients with those kinds of conditions, but primarily cancer.

That's what we're going to talk about today, I think, right? Again, we can mix in and add other things as we spoke before we started the interview. Treating cancer requires multiple modalities.

I think it's folly to try to treat cancer with only one approach. Cancers have a way of defeating any single thing you throw at them. Of all the processes that go on in the body, they're probably the most robust in defending

themselves.

Yeah, I would agree. There's times that I get calls from practitioners saying, well, what's your protocol for prostate cancer or something? Well, we don't have a protocol for prostate cancer.

Everybody's an individual and you can't just take one supplement and have your prostate cancer go away. And it angers me when I see that on like social media where somebody will post something that You know, curcumin kills 98% of cancer cells.

Here's the study or something. And it's like, well, yeah, anything will kill 98% of cancer cells in a petri dish. But when you're dealing with a human body, it isn't just a dietary approach.

It isn't just, you know, we're going to go ketogenic and that's going to solve the problem. Certainly not just a supplement approach. It's certainly not just adding, you know, one therapy equipment.

It's a multi-facet approach that you have to do. And that's really what holistic treatment or holistic medicine began as. And we can't lose sight of that, that you have to treat the whole body in as many different of those facets as possible.

And so let's go back to your history. You have your own journey with cancer. Would you mind sharing that with us? Well, it'll be five years this April, I believe.

Yeah, so that's my journey started out. I have a type of cancer that doesn't respond to chemotherapy very well, so it was easy for me to make the decision to not.

go that route and understand we do a natural approach. We don't do chemo and radiation surgery in our office, obviously, but we have patients that have done that or aren't doing that.

And we don't take this dogmatic stance against it. If it is the right decision for that patient, then by all means, We want to support them through that decision.

Using different modalities like we're going to talk about today can really help a person get through the side effects of that decision making process too.

So I didn't do PMO or radiation or surgery. That was my choice. And there was some dark times in my cancer journey. I share that very openly. our website, I have a tab that says my cancer journey and there was times that I didn't think I was going to make it for another month.

Why cancer treatment needs multiple modalities

And so, but I did. So, and I give God the credit for that. I'm not the healer that I did, but he does use tools. So I use the PE amount. I use the rife machine daily.

I use nutrition and I use diet. And I used, you know, a spiritual connection with God that enabled me to get through that and changing my attitude. And I share a lot of that.

I made a series of videos and I really need to update it because probably some people will look at it and think I'm dead because I haven't updated it for about a year and a half.

because I'm doing so much better. I felt like I went into remission about 10 months ago and I had a good scan that just showed some lesions in my liver left and I hope that I'm doing better.

I have a cancer that I can kind of tell how I'm doing because of symptoms. I still have pain at different times, but I'm doing well and I've been able to overcome it through the use of different modalities.

I mean, your type of cancer, what's the usual prognosis for it? You're getting conventional treatments. Well, in stage four, which I was in, is when I was diagnosed, Mayo had just finished a study about two years prior to that, that they were all excited because this reused chemotherapy that wasn't used for this type of cancer previously, I think they did 10 or 12 people in this study and one person lived like 14 months or 16 months or something.

And that was like a huge win that this person lived 16 months. Well, if you really read into the study, this person started this, I can't remember what the name of the drug was, it was a reused older chemotherapy.

And it put him in remission, but then the cancer came back and he was offered it again and he refused it. All the other participants of the study had died at this point.

And he refused it, which told me, this probably was such a horrific treatment that he wasn't willing to go through it again. He would rather have just died.

And I know what that's like. I have patients in that situation too. But it was like, that was an easy decision for me to make that, well, okay, I'm not going that route.

So yeah, the average life expectancy of people diagnosed at my stage is a year or two. So it has about the same prognosis as pancreatic cancer. So I will be five years this year, God willing.

I'll continue to be able to try to help people with, you know, the lessons that God has taught me through this and the experience that I've gained through this and through all my other patients.

So I learn from all the patients that God sends our way. They are my biggest teaching tool. And as we try to do everything we can to improve their survival and their quality of life, we learn something new every day.

And we try to apply that then to the next person. That's fantastic. That's certainly consonant with my philosophy and approach as well. And I'm essentially a functional medicine doctor in addition to being an expert PMS.

Well, let's go back for a second. You said you started with chiropractic, and then at some point you decided to transition to become an MD. You went to medical school.

I'm not an MD, so I did not go to medical school. So I have AMA fellowships, but I'm not a medical doctor. Well, that's wonderful. Actually, I don't find most medical doctors feel that up.

That's an advantage to your patients that maybe you're not really close-minded like most MDs are. So let's go through the transition of what modalities you added over time and why you added one modality after another, in a sense.

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Well, in my practice, we always had electrical stim, but it wasn't PEMF. It was Russian stim and EMS and things like that. So, because we were dealing with people with pain.

So when I was in a chiropractic type setting, we had patients with back pain, disc pain, things like that. And electrical stim can be extremely beneficial to deal with pain.

We had other modalities like ultrasound, which help with inflammation. And what other type of modalities did we use? Laser, we still have laser, cold laser therapy that we use for pain.

That could be very beneficial. That could be really good to increase healing and reduce healing time. But when I started my journey through taking care of cancer patients, I was really drawn to rife technology.

So all these therapies that I discussed are using frequencies. And if you understand quantum physics about as deep as I do, which is pretty much nothing, you do understand that everything down to its smallest component is energy that's vibrating at a specific frequency.

So all our cells are vibrating at a frequency. Our organs are vibrating at a frequency. everything's vibrating at a frequency. So if you can utilize frequencies to help heal, then it makes sense.

So there's people smarter than I that have developed different frequency sets for different tools and modes of healing. And that's really what we're doing with PEMF and with RIFE.

Now RIFE is different than PEMF because RIFE is using like frequency and you're getting very specific to the frequency of the tissue where PEMF is not necessary to get specific to the frequency of the tissue.

It's a totally different mode of action and it serves a different purpose. So we use light frequency. That's what I term rife. I know there's other rife machines out there that are really using electrical frequency.

To me, that's not how I define rife technology. So rife technology is using light frequency. PEMF technology is using electrical frequency and they serve different purposes.

So you don't use them necessarily exclusively. You have to use them in conjunction, depending on the needs of the patient. And this is an area of significant confusion for people.

Concept of frequency versus intensity. And as you said, I agree with you and I have a rife machine myself at the training, rife and frequency specific microcurrent.

which basically accomplishes the same sorts of things. And the frequencies that we're talking about, typically for these technologies, like you said, light, tend to be very high frequencies.

So many of the frequencies in the body are very low frequencies. And what we call PEMF actually is ultra-low frequency PEMF. So high frequency would be anything over, say, 100 megahertz.

But you can even consider 1,000 hertz. So hertz is the measure of the rate of repetition of the waveform. And that's basically high. Most PEMF systems.

are way under 1,000 hertz. Most of them tend to be maybe between, say, 1 hertz up to 100 or 200 hertz. There aren't too many that are above that. So again, that's another distinction between them is that it's not about frequency that way.

So PE maps, as you said, are not really about frequency as much as they are about intensity. Exactly. Intensity is the strength of the magnetic field.

So the example I use is tapping on the desk. So I could have a light tap. big tap. So low intensity systems are like the light tap and they provide very little force into the body and the high intensity provide a lot more force into the

body.

And that gets into all other discussion about Faraday's law. So how did you, as you went through, you started with a rife and started with supplements and nutrition and so on, which are all fundamental to the use of PEMFs or to healing.

How did you gravitate to magnetic therapy? in the, with the EMF therapy? Adding that into what you, into your modalities. Well, again, we're just, we're always constantly looking for what else is gonna be best to help the person.

So where, let's say, so RIFE technology is getting specific to hit the cancer cell at its own, its very specific frequency so that it vibrates and the immune system takes another look at it to be able to kill that cancer cell.

Cancer patients are dealing with other morbidities. So they have pain, they have inflammation, they have low cell charge, all these other things that you can't just not treat, you know, so you want to help this patient as many different ways as possible.

In a magical world, I guess, you could erase the cancer, but the person still has other morbidities that could lead to their death or lead to a lot of Low quality of life.

So you have to treat the person as a whole again. So when we, you know, as you're experiencing that, you're always looking for what else can I do to help this person?

So, and then PEMF, that's when PEMF was starting to come in the field. And I, how I got to know about PEMF was through a seminar that I was going to, I'm constantly trying to learn.

and gain new knowledge. So as, oh, well, hey, let's get this. Maybe this could help people. And we found that it did. So we continued to add, you know, initially our first PEMF unit that we got was a Logos PEMF.

but I won't name the product, but there was a lower Gauss PEMF and there was some help with our cancer patients with the morbidities that they were dealing with.

And then I found out about a higher Gauss PEMF and we noticed big significant changes using that with our cancer patients. And I think there's a place for both.

And personally, I think the two different types of PEMF are really completely different pieces of therapy serving different needs. But with most of our cancer patients, we recommend a higher dose PEMF.

And that's certainly my experience as well. I started working with magnetic fields that were very low intensity, less than one Gauss. So Gauss is a measure of magnetic field intensity.

So by comparison, the Earth's magnetic field, typically, the Earth has its own magnetic field. And the Earth's magnetic field is typically around half a cows.

And an MRI machine gets upwards of 10,000, 20,000, 30,000 cows. So we are, MRIs have been found to be extraordinarily safe and of course, very, very useful.

So they're not harmful. We know that those high intensities can actually be healing, can be actually be used to help people. So very low intensities can tickle the system.

And my own experience and journey with PEMFs is that I started with PEMFs as a substitute for acupuncture. As the magnetic fields applied to the acupuncture points and meridians stimulated the whole acupuncture system.

And when you lay on a whole body pad, you're basically stimulating the whole acupuncture system all at once. See, even though it's relatively low intensity, there is some of that stimulation.

So I agree with you. There's a place for each of them and you have to target the kind of PEMF you're using for the particular problem that you're trying to deal with.

Yeah, I agree. So what has been your experience then in terms of what value the PEMF added to your patients? Well, we have patients that come to us that have a Logos PEMF unit already.

They purchased it prior to coming to us. And they've experienced some benefits of feeling better, helping with fatigue, helping with body energy and things like that.

How PEMF supports cell charge and detox

But as the, as a person kind of gets ravaged through the cancer cycle, whether or not they're doing standards of care or not, you could really get some, some fatigue.

And that's where a higher Gauss unit is going to help with that. So the way I explain to people is that everybody's cells have a cell charge. You can actually measure a cell charge.

It's called your phase angle. And as a person's phase angle or cell charge depletes, their level of morbidities like fatigue, just complete lack of energy, lack of appetite that starts to decrease.

And then they get in a negative cycle because you're not eating well, you're nauseous, you're not feeling well, you're not getting energy from the chemistry from your food, but also the electrical energy in your cell is going down with it.

So you've got this negative cycle that needs to be broken. Where the PEMF can be really helpful is you're adding that charge back to the cell membrane to help a person be able to start eating more food or helping them gain weight and helping them get the chemistry from the food that's going to help with that whole thing.

So you're just, you're again, the big, you know, the ball of a lot of different facets on it. You're trying to hit just another area that can help break that negative loop or that negative cycle.

And that's why it also works with the supplements, because it actually makes the supplements work better in the body. So your body, whether you talk about treatments to the cell, the magnetic field helps the cell membrane to be able to absorb nutrients better, right?

Yeah, right. If you don't have that cell charged, the cell starts to dysfunction. So the receptors don't work right on the cells. You're not going to be able to absorb things through the cell membrane like nutrients, and it just becomes disrupted.

get right Well, there are good and bad frequencies, so that is true, because everything is a frequency, and you can Google an electromagnetic spectrum, sunlight falls into there, visible light falls into there, audio falls into that spectrum, and a dangerous radiation Ionizing cell is an ionizing frequencies fall into that spectrum and you you just you don't utilize those frequencies and EMFs fall into that spectrum, too So these are not dangerous frequencies again.

You have to remember everything is a frequency so your cells are vibrating at a specific frequency and That's not unhealthy. That is normal. That is healthy.

And it's when they stop vibrating at the correct frequency that ill health comes into being from a frequency perspective. So you need to bring back cell resonance to that cell so it starts functioning like a normal cell again.

And that's what you are doing. So you are picking up energy from everything in your environment. EEMFs are bringing in what you could call a negative energy.

It's actually a positive charge. And you need to disperse that. So that's where PEMF and RIFE and grounding are

all beneficial tools to bring back health and bring back your normal horrible charge of your body.

One of the problems that people have with PEMFs is they think that PEMFs are the same as EMFs in terms of, as you mentioned, frequency. But there's an important component to frequency relative to PEMFs versus EMFs.

And EMFs basically are broadcast into space. That's why wavelength becomes important. Those are wavelengths, like radio signals, television signals and radar and so on.

Well, PEMFs, the way they're generated is they're generated by a pulse, electrical pulse flowing through a wire. And we know that current flowing through a wire produces a magnetic field, which is the right-hand rule.

But what that is is the EMFs going into space, like microwaves for your cell phones and so on, are dispersed into space. That's called open loop. Whereas PEMFs, because they're bound by a wire, are bound by the wire.

So in other words, the PEMF field goes out and comes back in again. out and come, it collapses back on itself. So it forms a loop, a closed loop. Whereas EMFs are an open loop.

They're broadcast into the environment in the air. So basically there's no wavelength involved in a PEMF. There can be a rate, a pulse rate, which some people equate to frequency, but it's not really a frequency in the same way as a wavelength.

That pulse rate is not a frequency going through it. That's speaking of frequency at timed increments, not in a wave that's going through you. through.

So therefore it has a completely different characteristic in the body. Again, it collapses back on itself. It goes out into the body. It comes right back on itself.

Now I could do that extraordinary rapid, depending on the frequency of the pulse. So you can have a pulse rate in a magnetic field, a higher tested magnetic field system that's maybe five cycles per second.

And some people equate cycles per second to frequency, but really the true technical term for it should be pulse rate. pulse per second. So it's, it's, it's much safer because it doesn't go any other coming back.

It basically negates itself by coming back, but then you get stimulated again. So every time that pulse goes out, you get this wave of action going into the body based on Faraday's law.

And that action going into the body based on Faraday's law relates to what you said about a crazy charge in the blood. So that charge is what the PDFs do.

It's the creation of charge in the body that creates the vitality, that creates the electromagnetic actions in the tissues themselves. And magnetic fields, due to Maxwell's equations, they interact with charge.

They go back and forth. Charge creates magnetic fields and magnetic fields stimulate charge by interacting with charge. So one amplifies the other. So that's an important distinction, again, that most people just don't understand.

And that's a subject that has to be discussed when we talk about PDFs and cancer, because obviously people are worried about environmental magnetic fields and cancer.

Do you recommend people have a cell phone by their bed when they have cancer? Well, right. You want to put that in some sort of Faraday cage so you're not getting exposure.

Put it on airplane water, keep it in the other room or turn the thing off. or have your Wi-Fi turned off when you go to bed at night. Exactly, yep. And in fact, if you're not using the Wi-Fi, if you're not on the computer, you should turn your Wi-Fi off.

Yeah, yes. Still broadcasting through the whole house. Right. Yeah, exactly. All right, so that's part of a mitigation process as well, is just to turn that off.

PEMF, chemo, and radiation support

So how do you think about PMFs and how they work with chemo? Well, I think PMFs will help. So chemo is going to end up with negative effects on the person's body, right?

So chemo is a poison, basically. You're trying to poison the cancer cells before you poison the patient. And I know that's a simplification, but that's really exactly what's happening.

So chemo is an oxidizing agent. You're doing it on purpose. Yes. So you're creating, you're hopefully dosing it to the right point where you're going to, you know, the idea is that cancer cells are more highly metabolic than a healthy cell.

So it's hungrier, you could say. So the cancer cells are going to uptake the chemo faster. The problem is there's other cell lines in your body that are hungry all the time too, highly metabolic all the time too.

That's your hair follicles. That's why people lose their hair when they do chemo. and their immune system. Well, that's not a good thing. So what? You could lose your hair, but you're going to kill your immune system.

That's why when you do chemo, you get your white blood cell count tested that day and morning to the chemo to see if you qualify for chemo that day. Because if your white blood cell count is too low, then you can't do chemo.

Why? Because chemo destroys your immune system. And we have to keep that balance so that we don't destroy it too fast. while we're also trying to destroy the cancer.

So that's the purpose of chemo. I'm not docking it, but that just is what's going on. So you're damaging healthy cells when you do chemo because chemo is really going to be uptaken by cancer cells, you know, majority of them for the first 48 hours that the longer chemo hangs out in your body, which has to do with the health of your detoxification pathways, chemo is just going to damage healthy cells.

So using modalities like PEMF, When a person is doing chemo does a couple of things. Number one, it's going to add cell charge to all your cells. So it's going to make those cells healthier to be able to withstand the chemical assault of chemo.

It's going to also help with liver function. So when a person is doing chemo and they have a PMF, we recommend doing it over your liver. with the loops, if you have loops with your PMF unit, because you do want to support liver detoxification pathways and your liver detoxification pathways is relevant to the health of your genetics of your liver.

It's relevant to how overwhelmed your liver is at any particular point, dealing with other toxins in the environment and that specific toxic load. that is chemo that you did 48 hours ago or whatever, is going to overwhelm the liver.

So if you can support the liver with PEMF, with hot packs, with castor oil packs, with coffee enemas, with specific nutrition, Anything you can do to support that liver flow, that bile production, that rate of detoxification in the liver to get that out, the better you're going to be.

You're going to have less morbidity from the chemotherapy. Your body was designed to heal, but illness, chronic disease, stress, injury and time can slow that process down.

What if you could restore your body's natural ability to recover, recharge and feel its best? The key to healing is giving your body the energy to repair itself.

PEMF therapy does exactly that. Recharging your cells, improving circulation, reducing inflammation and helping you function at your best. For decades, I've studied this technology, worked with hundreds of medical professionals

and helped thousands of people reduce pain, regain energy and take control of their health.

However, not all PMF devices are created equal. No one size fits all. We offer personalized consultations so you can find the right device for your needs, backed by real science and trusted results.

If you're ready for a real solution, let's talk. Schedule a consultation at drpauluk.com. That's P-R-P-A-W-L-U-K.com because real healing starts at the cellular level.

And what actually research has found as well, and interestingly enough, that magnetic field therapy can actually make the chemo more effective. Yeah. Well, because it will help you think, oh, well, I don't want to do something that's going to help my cancer cells survive.

Well, you're not, you're helping the cell membranes. work better so you're actually helping the cancer cells uptake the chemo faster. So it's the same thing with the RIFE.

I say it will help the chemo target the cancer cells when you hit them with their own frequency. So anything you can do, if you're going to do chemo, you want the chemo to kill the cancer cells.

So anything you can do to help the cancer cells uptake the chemo, the better off you're going to be because it's going to do its job better. If we can get the oncologists to agree to decrease the dose of the chemo and apply magnetic field therapy at the same time, then probably we'd get the same results with less toxicity and less harm to the body.

But that's not going to happen. At least not in our time, probably. Well, it's interesting because there's new studies out with what they call tumor treating fields.

I'm sure you've looked at that and it's basically using PEMF while they're doing chemotherapy and those patients are living longer. And in almost all those studies, a large percentage of them are, a considerable percentage are living longer, healthier lives using These tumor-treating fields, that's what they're calling it, while they're doing chemotherapy.

Now, the thing is, it's funny that you'll never see a study funded just using PEMF instead of chemotherapy, or using RIFE instead of chemotherapy, or using nutrition instead of chemotherapy.

They will not get a penny. the funds on the study. It's all with the standard of care giving this and this and this chemotherapy. We use tumor-treating fields and actually we got these great results.

So it's adding that modality instead of like you said, let's try doing it with a lower dose chemo. Let's try it. Maybe it works with no chemo. Maybe it's actually going to work better.

We'll never get that funding on that study, but at least we got some studies with concurrent standards of care. So that helps. And TTFs are FDA approved to be used for treatment resistant glioblastoma.

That's the only indication that they have for it. Now they're doing a lot of research on other kinds of cancers as well, but you're right. They're limited by virtue of what, in quotes, the standard of care is.

Cause you don't want to, you don't want to disrupt the oncology community. Oh, no, no, no. There's too much money to be made there. Right. So that's not going to happen.

Now, magnetic field therapy can also, as you said, keep two key points. One is that it'll help the chemo to work better. But more importantly, people who do magnetic field therapy during chemo and most oncologists will tell you don't do magnetic field therapy during chemo.

You and I, we can tell people you could do magnetic field therapy relative to chemo, but you can't ask them for permission because they don't know what they don't have anything about it.

Well, it's the same thing when they say, don't take any supplements, we're gonna do chemotherapy, don't take anything, they just don't know what they're talking about, I'm sorry.

I don't, and if you happen to be in a clinical study, for sure you're not supposed to do anything else but what the clinical study says you should be doing, that's automatically a limiting factor for you.

Now, what about radiation and magnetic field therapy? What about using PEMF with radiation? Well, it's really the same thing. So radiation is more of a, So the difference between radiation and chemotherapy is chemotherapy is obviously using chemicals.

So it's using the body chemistry, using chemistry in the body and it's affecting the body's chemistry. Radiation is… is more of a direct kill with, again, what is radiation?

It is an electromagnetic field, right? It's just in the ionizing spectrum, meaning it's going to kill cells. And you need to do everything you possibly can to keep cells alive.

So radiation is set on a beam, right? It's not just like put in the body and it's going to only affect that cell. Yeah, it's going right through you, all the way through outside into the room and bouncing off land walls all over the place.

And I don't know, it continues to bounce off land walls. And then you're hoping to concentrate it in a certain site as you shoot beams in at different angles, getting right to that specific site.

So where all those beams cross, you're going to have a greater amount of radiation and therefore a greater amount of kill rate at that time. But it's like saying, we're going to drop a bomb on Nagasaki, and it's only going to kill X amount of people.

Well, you have all this collateral damage that goes along with radiation that can be experienced, and much of it is experienced years and even decades later with cancers, melanomas, squamous cell cancers, et cetera.

The skin and other tumors at that site of radiation or at that collateral damage where that radiation was. And not just cancers, but it just damages cells that are going to have dysfunction because of that.

So anything you can do to basically heal those cells and bring them back to resonance to be able to bring back to function, you're going to better off.

That patient's going to be in a better state. Radiation also causes cancer. Yeah, well it is. It, it causes cancer. You know, people, you know, they talk about the sun causing cancer.

Well, yeah, if you're out in the sun and you're burning your skin all the time, that can be a cause of cancer. Cause you're, you're to the degree where there's burns taking place and yet they're condoning radiation.

And that is, it is killing the cells, but it's actually a slow kill to all the other cells that might work, might not have been in the direct path. That goes to an important point you started talking about with your entry into PMF therapy is whole body magnetic therapy.

So the concept of whole body magnetic therapy becomes very important with radiation because it's not just the collateral damage. It's not the actual cells that are getting damaged, but it's the cells that are marginal to even those cells that are getting genetic damage that can eventually transform into other cancers.

So when you're doing whole body magnetic field therapy, before the radiation, you're increasing something called heat stress proteins, and the heat stress proteins protect the cell from damage.

So what you're doing is if you go outside, if you're gonna decide to sunbathe, you're gonna go to Florida, you're gonna do sunbathing. The recommendation is that you spend 10 or 15 minutes in the sun the first day, that's it.

And then the next day you can do the full dose. Well, why 10 or 15 minutes in the sun the day before? heat shock protein, because you're activating heat stress protein in the tissues, which then protects the tissues from the further radiation they're going to get.

Yes, and everybody could experience that.

Inflammation, survivorship, and long-term care

Everybody's experienced that, at least in Minnesota. We're not out in the sun all winter long. And when you go out in the sun in the summer, you have to gradually accommodate your body to that.

And then you could basically be out there with no shirt on, working in the garden all day long, and you don't burn because of that reason. And that's really why you would do PEMF.

It's a good example of why you would do PMF to just add that cell charge so that you can tolerate damage from radiation. And you can tolerate damage from negative chemistry, poisons, toxins in your environment.

You can tolerate damage from other EMFs. You're going to better be able to, you think that same concept, you're going to better be able to resist damage from electromagnetic, damaging electromagnetic fields like your cell phone and cell phone towers and such.

If you're adding, adding that charge to your body, you're going to, you're just basically building kind of like building your immune system, but building your electrical resistance against those kinds of damages.

Well, if you own your own magnetic system and its whole body, you're, you're going to have what kinds of benefits from that. If you can do it every day.

Yeah. You're just, you're, it's like you're strengthening your immune system from a chemistry standpoint, but from an electrical charge standpoint, you're strengthening your ability to, to, to deal with the damaging effects of everything in life.

So the damaging effects of everything in life are, okay, you've got EMFs from cell phone towers and your dirty electricity and your house and your cell phones themselves and your wifi and all these radio waves and TV waves that are going through your body.

Those are damaging to your cells. You have damaging effects from your poor chemistry, your choices in diet, the pesticides and herbicides that you're exposed to and chemicals that you're exposed to.

You need to have tools that are going to bring back charge and boost your body's ability to deal with all these insults in your environment. That's the benefit of really having a home PEMF unit.

Even if you don't have ill health in your mind right now, you're just strengthening your body against these things. What is your understanding about PEMFs and inflammation?

Well, that is one of the biggest reasons why a person seeks use of PEMF, I think. But I think there's PEMF clinics and doctors and chiropractors and physical therapists that use PEMF mainly for that reason, for inflammation, for pain.

Because inflammation is the number one cause of pain, and it can help decrease inflammation. So that's one of the biggest reasons why our patients I mean, you could tell them all these things that it's going to help with cell charge and all this stuff, but a lot of that is kind of woohoo to a lot of people.

But when tell they have a symptom, then they're motivated to go, wow, maybe I need to look at getting one of those too, or utilizing it in my doctor's office more frequently or something like that.

So when you have a symptom, pain is the number one motivating symptom probably out there. The PEMF works fantastic for that. What is the role of inflammation in cancer?

Well, multi-fold. So chronic ramped up inflammation, meaning because of toxins in that person's body or because of all the insults that we've been discussing here, can increase what are called pro-inflammatory cytokines.

So you get this increased ramped up inflammation that is not good inflammation. So there is good and bad inflammation. Nothing is just bad in your body.

Nothing is just good in your body. So good inflammation is that you have this this pro positive immune stimulation due to infectious agent that you're exposed to.

So you are exposed to a virus. You get this ramped up inflammatory response that is T cell macrophage response that kills that virus and then it it comes back down through what are called your T regulatory cells.

But when you have this constant ramped up pro-inflammatory response due to all sorts of things in your environment, stress can even be a piece of that, then that can hinder an immune response against pathogen.

And when you're talking about cancer, it can severely hinder your immune response against a growing cancer. So all of us have cancer that's growing inside of us because of something that interrupts the cell nucleus, and now it's in a state of rapid replication.

That's the definition of cancer. When that takes place, our immune system should go, huh, that doesn't look right. I'm not supposed to fire against my normal cells, but there's something wrong with that growing mass, now hundreds and thousands cells big, you should have a T cell response that should kill that cancer.

But if that cancer is surrounded by inflammation, your macrophages, your natural killer cells are hindered at even getting in there to attack it. And cancer, as it grows, causes inflammation.

So as a cancer is growing and those cells are replicating, They're in a state of rapid replication. They're going to produce that much more waste than a normal cell would produce, overwhelming your lymphatic ability to get rid of that waste.

And that waste is this inflammatory muck in the extracellular space that then hinders my immune a immune cell's ability to even get it, get at it physically to get at the cancer, to kill it.

So using anything you can to decrease inflammation from natural nutraceuticals that can help decrease inflammation like the flavonoids, curcumin, asveratrol, green tea extract, things like that.

and tools that could decrease inflammation, like PEMF, can help your, if you have a healthy immune response, which PEMF will help stimulate that as well, if you have a healthy immune response, they will help the immune system to be able to get out the cancer to kill it.

So one of the problems that I have is the concept of survivorship. I don't know if you have that concern about survivorship. I don't like that concept because it leads people to believe that you're done.

Once you've had your treatment, you're a survivor. You're done. You don't have to do anything else. To go back to the inflammation that you were talking about, you have information long before you got your cancer.

Years, decades, maybe even a lifetime before you actually got your cancer. Because inflammation leads to the cancer. But then the inflammation continues.

In other words, you've done your treatment for your cancer, but you haven't removed the problem, which is the chronic inflammation. So that continues after the cancer.

So you survive the episode of treatment for your cancer, whatever that treatment episode was, but then we have to go back and continue to think that we have a chronic problem.

And from then on, we make lifestyle changes and life changes that are going to continue to help us to prevent metastasis, but also prevent other cancers and recover and survive.

And it's even worse if you go through standards of care. So if you do go through surgery and radiation and chemotherapy, you are going to even now even have to be more diligent in decreasing these pro-inflammatory cytokines for a lifetime because As much as you'd like to think that, oh, my body's going to detox this chemotherapy, you're never going to get rid of it.

You're never going to get rid of all of it. It's not going to be possible. In radiation, you are never, ever going to get rid of that radiation because that radiation is an ionizing frequency in itself that's affecting those cells.

And it can worsen over time. That's why people get full skull radiation for a brain cancer. Their IQ, it's just a given. Their IQ is going to go down over time.

It's not going to get better. It's going to continue to get worse. So anything that you can do to boost that, decrease in inflammation, that you can boost detoxification, that you could add cell charge over a lifetime.

That's when people will come to us and they'll say, well, how long do I have to use the RIFE or the PEMF? It's like forever. And sometimes they're taken aback by that.

Because we live in this world in standards of care that think, oh, you have this problem, you do this, and it's all gone, and it's all better. Instead of understanding the more holistic picture of it, You, you have this problem because of all these, your, your choices in the past.

And it's not going to be just a, you know, do this and you're fixed. You have to, you know, make those lifestyle changes and do the right thing moving forward, or you're going to end up in the same pickle again.

And we see that over and over. Yeah. Now, do you think PMFs cause harm? Well, you could use a tool the wrong way. You put it over your head and you crank it up all the entire time.

Or if you took the machine and you smashed it over your friend's head, it's going to cause harm. But no, it's, it's a tool and a tool used the correct way.

You know, I don't, I don't think you can cause harm with the PMF if you use it correctly. There's just, there's no downsides whatsoever. I don't think that's what the research is showing.

It's very hard to do harm with magnetic fields. If anything, I've found over time is while magnetic fields reveal problems, they don't cause problems.

And if they do cause problems, because you're using it the wrong way temporarily until finally the body can, you get designed the right protocol for what you need at the time.

And it becomes like athletic training. You don't get off the couch and run a marathon tomorrow. properly introduce the therapy so that the body can handle the stimulation until finally it's reached an optimal point of function.

And then it probably doesn't matter what you do. So I don't think cancer patients can harm themselves with PMFs either. No, no, no, they can't. I mean, I don't, there is no really downside in it.

You haven't seen any significant downsides, have you? Oh no, no, no, no. Neither have I. And I've been working with magnetic fields for 30 years. Do you have any final thoughts on our topic?

You know, I know that, you know, maybe a downside for some people is just the cost. And so we try to get people

to a clinic that they could do it per session and move it in that way.

We try to get it, get them into a situation that maybe they could rent a unit or something like that.

Home PEMF, practical use, and closing thoughts

They, they do have to weigh it out with everything else in their life. If this is a lifestyle change. And the beauty of having a unit in your house is that it's not just used by one person.

Maybe it's one person at a time, but the whole family could use it. And that is, especially in the light of everything that's going on with current events, I think people are starting to wake up to the fact that they need to start taking charge of their own health.

They need to kind of start building their own nutraceutical pharmacy in their own house. They need to start. building their own clinic in their own house that their family and extended family can come to and utilize because the practice of medicine is getting more and more corrupt.

It's not getting better. It's getting much worse. And people are starting to wake up to go, oh, boy, if I'm going to really take care of myself, I need to be my own advocate and keep myself healthy and gain as much knowledge as I possibly can to be able to to regain health if I go the wrong way or a family member goes the wrong way.

So having this as a tool in your house, I think, is just another essential that the people need to have. I think a rife is essential. I think PEMF can be essential.

I think saunas are fantastic to have. Just have it building this array of tools that their family could use is just a beautiful thing. Where do you recommend people go for information?

Well, I recommend they go to your site. That's the best thing. Well, and I do like your site because you're not unbiased. I mean, you carry a bunch of different products.

It's not like you're just a rep for one thing or something like that. And you give honest advice. I mean, I was talking to you the other day and you said, well, this is a good machine.

I really like this machine, but here's the downside of that machine. Or it's like, you're not defending weaknesses in a product line. You're just telling it like it is and then we can make the best decision.

My personal goal is to help the person. I don't care what technology we use or what approach we use to help the person. Unfortunately, there's a lot of misinformation online about PEMFs.

And as you said, the vendors, usually it's coming from the vendors. The vendor is kind of defending their product idea and their product concepts. So there's a lot of stuff that says low-intensity magnetic fields are all you should use.

And there are other people who say the high-intensity magnetic fields is all you should use. And they're both wrong. There's a spectrum, you said at the very beginning, there's a spectrum from the very low intensity to have their place and there's a need for high intensity.

And in cancer, probably high intensity is probably one of the most important things. But one of the things that most people are missing is that a whole body magnetic field therapy in cancer is critical.

Like we talked to them, as you discussed, we talked about breast cancer and the fact that by the time a woman is discovered to have breast cancer, even though she has definitive treatment for mastectomy, whatever else is done around that time, 40 to 50% of women, 40 to 60% of women have been found to have breast cancer stem cells in their bones.

Oh, yeah. So one of the most problematic problems with breast cancer is not five years after your breast cancer. Typically, it's 10 to 20 years after your breast cancer when all of a sudden the bone metastasis show up.

Right. Right. So what should you be doing? We talk about inflammation. You have to protect the whole body against inflammation, which means you need a strong enough whole body magnetic system that you're going to be able to use for the rest of your life.

Right. Right. In order to truly, truly protect yourself. Yeah. That's right. Well, thank you, Dr. Severus. Very illuminating, very helpful. I'm sorry to hear about your own personal journey.

I'm glad to hear you are a survivor. Yes. And that we hope to work with you to have you continue to live a long and fruitful life as long as you want, right?

Yeah, that's right. That's right. Well, that was great. Hopefully some people got some more information on this so they're going to make some good decisions in their life.

Well, having your experience is going to be very helpful to a lot of people. I think it's one thing to be technical and scientific and have all that knowledge, but it's another issue to walk the journey yourself.

That's right. Well, thank you again. God bless and enjoy the rest of your day and spring is coming. Thank you for tuning into Dr. Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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