Introduction to Dr. Pollock and His Background

Well, if you take your cell phone and put it to your head, you're basically baking, you're cooking your ear. You look at your ear after you finish talking on your cell phone.

It's going to be bright red. Exactly. We all know that, right? Yeah. Well, that's what we're doing. These microwaves and they're being absorbed. So EMFs are absorbed and they're broadcast into the environment.

PEMFs are made in a completely different way. PEMFs are made by current flowing through a wire. This is Dr. Talks. Today's episode was previously recorded on the Pain Solutions Summit that I hosted.

Hi there, it's Dr. Jenn and welcome back to the Breast Cancer Breakthrough Summit. I am so delighted to have my next guest. This is Dr. William Pollock.

In addition to being a conventionally trained doctor, He is also trained in acupuncture, in nutrition, in herbs, in energy medicine, which is what we're going to be talking about today, but also homeopathy, hypnosis, bodywork, and multiple other therapies.

So he is a breath of information with an amazing life and work experience. and he's been on the Dr. Ah show. He's the author of two books, Power Tools for Health and Supercharge Your Health with PEMS Therapy.

So Dr. Pollock, welcome. I'm so happy to have you. Thank you, Jen. I appreciate you having me on and I appreciate having some time to spend with you and provide some information to your listeners.

Yeah. So you clearly have amazing training and you have a very broad training. So can you talk to me about how a medical doctor also gets trained in acupuncture, nutrition, herbals, the magnetic field?

Like, how does that happen? Because having gone to a conventional medical school, I know for a fact that they don't talk to you about any of that. I call it leaving the house of medicine.

I love that. I call myself an unhappy doctor. I'm not happy. What happened? I'm not happy until I can solve your problem. And I have to go get some other training that I have to do that.

But the first thing you have to do is you have to say, fine, the House of Medicine doesn't have all the answers. And how I came to that and what prompted me to study acupuncture was because I had three patients in the hospital in a very short period of time.

I had a group practice that I shared with other doctors. We rounded in the hospital. And within a very short period of time, within a week or so, we had like three patients almost die of GI bleeding, gastric bleeding.

And the common denominator of those patients was ibuprofen. So they almost bled out because of ibuprofen. From ulcerations, is that what happened? Right.

Ulceration? Ulcerations, basically, ulcers. So they almost bled out. 30,000 people a year die from ibuprofen. Yeah. Unless you wear an anti-inflammatory face.

That's a huge number. And we still do it today. Yeah. Back then, I said that, well, I was practicing stupid medicine.

Leaving Conventional Medicine for Acupuncture and Magnets

So I could use opioids, I could use ibuprofen or Tylenol, or I could refer them for a procedure. But that's about all

the choices I had. And I said, well, that's, that's too limiting.

I know there's more that we could do. And I knew about acupuncture, but I said, okay, fine. I'm going to leave the house of medicine. And my partners would go like this, you know, yeah, the house of medicine.

How could you dare leave the house of medicine? We have all the answers. Well, So I learned acupuncture. And after I learned acupuncture through a UCLA school for professionals, I discovered that people in 1990 didn't know what acupuncture was.

So they didn't want to do acupuncture. Well, in this country. Well, in this country. Exactly correct. And there were about 300 doctors that were trained by this program in the US.

So it's only 300. in the US. Yeah. The need is much bigger. So I said, okay, well, I can't do acupuncture with needles. Let me do acupuncture, find some other way to do acupuncture.

So I studied magnets, discovered that in the Orient, people were using magnets on acupuncture points. Okay, fine. Then I can, let's do magnets. So I started working with magnets and discovered they were doing other things.

So wait a minute, they're doing acupuncture. No, they're doing other things. I'll give you an example. I took a magnet. I was going to read on my deck.

I was going to read for about two or three hours, read a book. And I noticed I had a spider bite on my leg. I didn't even feel the bite, but it was a nice big round red area, nice with a little bit to it.

So yeah, spider bite. Once you've seen them, once you've seen one, you recognize it. You know what it is. I'm being a family physician by background. I knew what it was.

Three hours later, the magnet gone, gone. This is not supposed to happen. Right. Right. So let's start off with what is happening. So why does a magnet change the usual course of events, which would happen with a spider bite, which is a huge inflammatory response?

Correct. And that's the key. So magnets, basically a magnetic field goes into the body. As it goes into the body, then it begins to influence the cellular environment in the body under that magnetic field.

And the magnetic field, nothing in the body stops the magnetic field. Nothing. Bones, fat, brain, nothing. Nothing stops the magnetic field. Which is why we can have MRI.

Which is why we are doing MRIs. Exactly correct. And now we have other devices that we're doing for treatment resistant depression. They're very powerful machines that can actually cause muscles to contract when you stimulate the brain.

So as the magnetic field goes into the body, all sorts of things begin to happen. Because what the magnetic field is doing in the body is it's introducing or increasing with the availability of something called charge, electrical charge in the tissues.

So all the tissues have charges associated with them. All the molecules in the body have charges associated with them. And when that happens, then you're influencing that charge and you're increasing the amount of charge production in the body.

Now, what I was using was what we call static magnets. It's a fridge magnets. It's a permanent magnet, like a horseshoe magnet or a bar magnet. But I discovered and began to work with pulse magnetic fields.

It turns out in Europe, they were using them for a long, long time. In fact, one of my books that written besides the ones that you mentioned is one called Magnetic Therapy in Eastern Europe, a review of 30 years of research.

And I published that book in 1985, 88. That was 30 years of research up to that point. And now it's a lot more since then. And of course, we know a lot more about magnetic fields now in the West.

But as that second book, the first book actually was because of an MD PhD in the Czech Republic who got his PhD in using PEMF's pulse magnetic fields in rehab.

And he had to summarize all this science in Eastern Europe for his PhD thesis. And he had a manuscript and we started talking. He said, let me give you my manuscript.

So then I published the book. We worked together. We published the book. Basically, that science, 30 years of science in Eastern Europe now was available in the West in English.

Otherwise, it was in obscure journals and written in Cyrillic alphabet and just inaccessible largely. Right. Right. While we're on that topic, I mean, this is largely why I do this.

Why I put on these summits is to bring information that is otherwise unavailable to people and make it available to people so that they know that they have choices outside of the conventional medical world so that they can safely leave the house of medicine and get what they need.

As you said, safely leaving the house of medicine. You don't have to leave the House of Medicine where you can attach something else to the House of Medicine.

Absolutely. And the House of Edison has not attached it yet, largely because of money and fear. Fear. Fear, there's control, there's power, there's all sorts of reasons.

Yeah. Doctors very much fear what they don't know. And so I say this all the time. They say no when what they should say is I don't know. But they're so uncomfortable with I don't know that they use no instead.

And once you've gone outside the House of Medicine, you begin to realize that it really is a very limited sphere of information and knowledge. There was a study done by one of the major government agencies on technology assessment, and they discovered that something like 70% of the decisions that doctors make are not made out of science.

70%. They say it's based on science because there's some science behind it, but the decision is not directly related to any science that's available. So really, even in the House of Medicine, we're largely flying blind.

Yeah. Well, we're being Guided and blinded.

How Magnetic Fields Work in the Body

Guided and blinded. Good way. Yeah. Okay. So you started off working with static magnets, and then you started to work with pulsed electromagnetic fields.

So first of all, what is that? What does that even mean? All right. So there's an elephant in this room, and the elephant is EMS. I beg your pardon. Okay.

There's an element in the space between you and me. We can't see it, it's transparent, but there's a note in this room. It's on people's minds, and that is EMFs, 5G, Wi-Fi routers, microwaves, and so on.

Well, that is true, and that technology was developed for a different purpose. It was developed for communication, but it has effects on the body, and those effects are similar to PEMFs.

So EMFs are broadcast into the environment. They're high frequencies and high frequencies get absorbed by tissue. That's the purpose and the premise behind a microwave oven.

Put the oven and you bake it, right, with microwaves. Well, if you take your cell phone and put it to your head, you're basically baking, you're cooking your ear.

You look at your ear after you finish talking on your cell phone. It's going to be bright red. Exactly. We all know that, right? Yeah. Well, that's what we're doing.

These microwaves and they're being absorbed. So EMFs are absorbed and they're broadcast into the environment. PEMFs are made in a completely different way.

PEMFs are made by current flowing through a wire. So basically you have a piece of equipment that's driving current into copper wires, typically, and those copper wires are then wound into what we call coils.

And as that coppers, the current flows through that coil, it's producing a magnetic field that's perpendicular to the flow of the current. We call that the right-hand rule.

So my thumb is the wire, and the current is flowing down that wire. And so the magnetic field that's produced by current flow through a wire is perpendicular.

Like my hand, it's flowing in an opposite perpendicular direction. That's the principle we rely on. We're producing current in a wire that's, even though the wire is shielded, the magnetic field still goes outside the wire.

And that magnetic field can then be pulsed. And a pulsed magnetic field is a lot more potent than a static magnetic field. It's just not moving at all.

So the pulsed magnetic field then passes into the body, in and out of the body. The analogy, the metaphor that I use is like the wind in the trees. You can't see it, and the only way you know it's there because the leaves are moving.

or the branches are moving. Well, that's what essentially a magnetic field is doing in the body. It's called the evidence. All right. You see the evidence of it.

You see the evidence, the proof. Yeah. So like the wind, the magnetic fields are stirring things up in the body. They're producing charges and energy.

The principles of physics are that magnetic fields interact with electrical charges. So a charge on a molecule, a charge on a metal, a charge on an ion, all of that is then influenced by magnetic fields.

And as you pass the magnetic field through those tissues and through that material in the body, you're now increasing charge. You're increasing energy in the tissues.

And what happens when the body has more energy? Lots of good things. Work. Work. How efficient is a body in turning energy or fuel into work? I don't know the answer to that question.

By 25%. How efficient? Not that efficient. How efficient is a car in turning fuel into work? I have no idea. About the same. Oh, wow. It's about the same.

So what we're doing then with magnetic fields is we're increasing the amount of energy production in the tissues above normal. Right. So then we're actually giving the body more energy to do the work it needs to do.

So this is why a magnetic field can heal a wound in about half the time. Wow. Well, if you're a surgeon and you do your surgery, At the end of the surgery, you close things up and what you do is you cross your fingers, because now it's up to the person.

Yeah. Right. Yeah. They got to heal themselves. And what does a surgeon do to help you to heal yourself? Hmm. That? Mostly nothing. Mostly nothing. You're leaving things to chance.

You're expecting the body to do the work it's supposed to do. And we know there's a huge amount of variability in how well people heal. Well, what we're doing with magnetic field therapy by increasing charge, by increasing the amount of energy available in the tissues, Now the body becomes much more efficient to do the work it needs to do and it doesn't leave as much to chance.

It's much harder and better and longer and stronger. So what are the indications to use PMFs and are there limitations? Let's start with limitations. There are almost no limitations.

We have to be careful with pacemakers or anything implanted that's electronic because magnetic fields interfere with electronics. We know that. But a lot of the implied electronics these days are MR compatible.

They're called MR conditional. And if they're MRI conditional, then they're pulse electromagnetic field acceptable. Typically, the only true contraindication to magnetic field therapy is transplant.

Why is that? If you have transplanted anything, even a cornea, you're on immunosuppression. And magnetic fields influence the immune system. And you don't want the immune system to be stimulated.

Oh, because it increases rejection. Right. Host versus ground. Got it. Got it. Are you tired of living with chronic pain? Medication only masks the symptoms, but real healing starts at the cellular level.

I'm Dr. William Pollack, the leading expert on PMF therapy. The policy electromagnetic field therapy is a science-backed, drug-free solution that helps reduce pain, speed up recovery, and improve overall health, right from the comfort of your home.

Take advantage of an exclusive 10% discount on DrPaul's.com PEMF systems. visit drpauluk.com, that's D-R-P-A-W-L-U-K.com, to register and claim your savings.

This limited time offer is available only to registered listeners. Don't miss your chance to experience the benefits. Terms and conditions do apply. Don't just manage pain, transform your health.

Visit drpauluk.com today and let's get started on your healing journey together. So you're in contraindication. Otherwise, you have to just be careful sometimes.

The thing is that your body may not be ready to do the amount of work that the magnetic field is allowing the body to do or trying to coax or convince the body to do.

So if you just spent a month in ICU, you're totally depleted, you're nutritionally depleted, you know, just a whole lot of ways, you just don't have the energy anymore to do what you need to do.

So you have to recover from that. Well, in that situation, you go low and slow. And we have protocols on in my book, my Supercharger Help book on how to go low and slow.

You gradually. And that's like athletic training. You don't get off the couch and run a marathon tomorrow. You better train. So what does that look like?

What does what look like? What does training look like? What does low and slow look like? How does one start to use this healing modality? All right, if you're just dealing with a cut or like I have a spider bite on my leg, you probably don't have to worry all that much.

If you're a 270-pound linebacker on a professional sports team, you probably don't have to worry all that much. In fact, they're masochists. They like to be chapped.

I know. I gave birth to one of those. Oh dear. I'm a very proud football mom. Football mom? You know what I'm talking about. I have a 200-pound linebacker.

Linebacker. They love to get beat up. They love to beat and to get beat up. Yeah, they do. Well, normally people don't, and the most frail among us have to be really, really slow.

So there's two aspects of magnetic field therapy. The dose, in other words, the strength or the intensity of the magnetic field, and it's the amount of time that you're doing treatment.

That is another aspect, too, is how often do you need treatment? And for most processes in the body, you need a certain amount of time. So there have been magnetic devices approved by the FDA to heal fractures that won't heal.

They're called non-unions. So the intensity of the magnetic field in these devices is about 16 Gauss. So Gauss is the measure of magnetic field intensity.

It's G-A-U-S-S. And the company that developed this and got FDA approval said that you have to treat for nine hours a day. Wow, that's a lot. You have to put a magnet over that fracture for nine hours a day to heal it.

And they've done studies and looked at the people who did it and then how much treatment time they did and then how long it took them to heal. And if you did nine hours a day, you'd heal it in three months.

And if you did three hours a day, it took double the time to heal. So it would take three times the amount to heal if you didn't do it?

PEMF Therapy Basics, Safety, and Dosing

It would take you two to three times. So instead of three months, it would take you six months. And also depends on the environment, depends on the tissues of the person, the recoverability, the age, all those other factors.

My point is that when you have a magnetic system, you have to know how much time you need for the problem that you have. It will get the best results.

And if the intensity of the magnetic system is too low, you're generally going to need more treatment time. There are newer devices now that you don't need nine hours a day.

You only need three or four hours a day. But you still need a large enough amount of time to stimulate those tissues to not only re-initiate the healing process, but make new bone.

They're not only decrease the inflammation and the damage that is causing the soft tissues as well as the bone itself. They have to stimulate all of that.

But the body doesn't heal overnight. You don't make new bone overnight. It takes time. All healing takes time. Yeah, for sure. So I'm curious because I'm thinking of my women who have had chemotherapy and, you know, are walking around with white blood cell counts in the twos.

And you said that this is stimulatory for the immune system. So for these ladies, would this be an appropriate modality to help them to recover? without question, without any question whatsoever.

So anybody having any surgery, I'll give you an example on myself, I had to have an elective appendectomy. So I took a small portable magnetic device.

This was done midday on Friday at three stab wounds. And I was told that probably I had to be off work for two or three weeks. So I put a small portable battery operated magnetic device onto the stab wounds and I left the third one as a control.

Are you talking about like, did you have a laparoscopic appendectomy? So your stab wounds are the poor? Laparoscopic, yeah. Okay. Surgeons don't like their entry points to be called stab wounds.

We like to think of ourselves as a little kinder than Well, you got to remove a wart. We call them incisions. Incisions. OK, incisions. I call it stab wounds.

I know. So, but it is a stab wound. It is. Mantix. Well, an incision is a scalpel cut. It's a nicely controlled cut. A stab wound is… You got to penetrate that paradigm.

Yeah, with the trocar. I get it. I was back to work on Monday. Okay. And so you used two of the sites and you use PMFs on that. Right. And then the third site you left without assistance.

Cross my fingers. Okay. And what did you find? I was back to work on Monday. I had virtually no pain. I can bend. I could get up. I could roll over in bed.

I could walk. I could go upstairs. Now, is this a matter of like directly applying a device to an area? Yes. So in terms of recovering from chemotherapy, I mean, are you getting an intent?

How are you covering your entire body? You don't need to. Well, but we do. We do recommend in breast cancer. Typically, I recommend a whole body magnetic system for lots of reasons.

One of the reasons is that your stab wounds are not just there by themselves. They're connected to the rest of you. Yeah, right. So you have to you have to think about the whole person.

I'll be talking about chemotherapy. You're talking about a whole body involvement of the chemo. It's not just going to the cancer itself. It's affecting the whole heart.

Right. And the big pro is connected to the head bone. It's all connected. And so if you stimulate the health of the body, the vitality of the body in general, the body now has more resources to do the work it needs to do.

And it may be that your breast incisions or mastectomies or lumpectomies are, well, they're local. But let's say you have arthritis in your knees and you have MS or you have some other health disorders, you have an autoimmune disease.

Well, you've got you got to amp up the whole system. You have to make a whole body healthier. So that the body has less work to do for the problem that you're especially interested in.

Yeah, that's the key mode magnetic field therapy helps the body to heal better from the chemo makes the chemo more effective, because they're actually working synergistically together.

So I have two questions to ask. The first is, Is this having a direct effect on the mitochondria? Is that how it is creating more energy? It's way more than that.

So in my Power Tools for Health book, I outline 25 different actions of magnetic fields and I provide scientific evidence. I provide the actual references for each of those actions.

So we're not just dealing about a technology that does one thing. We're dealing with a technology that is basically affecting the whole body's ability to function, whether it's local or systemic.

And so basically everything begins to benefit. So it's not just disease or condition specific. It's about what the magnetic fields are doing in the body.

So mitochondria increased ATP production and mitochondrial repair and mitochondrial recycling, in fact, is supported by PMF therapy. But you also have anti-inflammatory action.

You have increased circulation. You have decreased edema of the tissues. You have decreased bruising. You're stimulating stem cells. You're stimulating fibroblasts in order to repair wounds.

So 25 different actions of magnetic fields. And you and I can't control those actions. The body decides what it wants to do with this non-specific stimulus.

And then the body will do what it wants. And the low hanging fruit is pain reduction. So one of the natural things that magnetic fields do is right away they reduce pain.

They do studies on snails. Put snails on a hot plate. If you put a snail on a hot plate, what will a snail try to do? I assume it would try to get away.

It'll try to get off. Right. So they've actually got models that they've evaluated for what it takes to get a snail to bleed. Sounds really, really cruel, but OK.

Yeah. It depends on how hot it is. Anyway, so what they found is that treating snails with PMF is like equivalent to 10 milligrams of morphine. Wow, wow, that's really, that's really amazing.

So there's a natural pain killing effect. And then there's all the pain is not just caused by pain itself, pain is caused by something, which is usually inflammation is usually some kind of trauma, some injury to the tissues.

But inflammation is probably the most important. And so magnetic fields decrease inflammation. And the pain that you're talking about, does it work as well for emotional pain as it does for physical pain?

Not in the same way. Clearly. So emotional pain is still a memory based issue. Typically, plus the emotional attachments to whatever the cause of the pain was.

It's a much more complex situation, but we can use magnetic field therapy to help the brain to chill. So interesting. And is it adaptogenic in that? Totally.

Totally. Yeah. Yeah, that's really fascinating. So in terms of breast cancer, what are the advantages? So breast cancer, even if you did nothing, magnetic field therapy did nothing, no treatment, no chemo, no radiation, no surgery.

Magnetic field therapy has actually been found to reduce the cancers themselves directly. I'll give you a case in an e-book that I wrote recently. It was a 48 year old woman who had stage three breast cancer.

She'd been cheated with chemo radiation. You know, she'd been treated conventionally. So this is Russian researchers from Moscow. They had a research Institute.

They did a lot of this kind of work. So she was not a candidate for any other treatments because her white counts were too low. Well, then let's just give her some magnetic therapy.

I mean, that's, that's good for everything. Yeah. So anyway, so she had 30 treatments with a special device that the Russians had developed. which is a rotating magnetic field, is almost like an MRI machine.

The magnetic field just goes round and round and round. So she had 30 treatments, and the infiltration in the breast decreased considerably, with the direct inflammation in the breast decreased considerably.

60 treatments. One metastatic node disappeared, and the other metastatic nodes were soft and smaller. 110 treatments, complete tumor regression, and the metastases were gone.

12 years, they followed her for 12 years. 12 years after the PMF treatment, she was still in great health. Did she continue the PMF treatments? No, she had 110 treatments.

Total. And then that was it. And that was like probably pretty well four or five days a week. Based on that research, that one case, they developed the whole research program around magnetic field therapy.

They did it before surgery, radiation, with radiation, without radiation. So different kinds of comparison groups. Yeah. PMF therapy made everything work better.

Amazing. So for the people that are watching this that are at all different stages, some of them are just getting diagnosed. Some of them are inactive treatment right now, either in chemotherapy or they're getting radiation.

Some of them have completed that acute part of their care. Maybe they've already had surgery, chemo, radiation, maybe they're on hormonal blockade, maybe they've refused that because they've had enough.

Maybe some people are living with metastatic disease. Maybe some people are are, you know, way past their diagnosis and trying to figure out how to not have a recurrence.

So are there different approaches depending on what stage of diagnosis and treatment you're at? Not so much for the magnetic therapy itself. But for what you put around it, you can't repair the body without the body have the nutrients and the ability to repair.

Right. So you have to make sure that they have adequate nutrition.

Using PEMF for Recovery and Whole-Body Healing

You shouldn't be pouring gasoline on the fire. Right. You should avoid the things that should be avoided if you have cancer. Because if you keep stimulating the cancer, then, of course, you're defeating it.

You're battling whatever therapy you're doing is going to be battling what you're still doing to the body. So all of that's still very important. So you're talking about looking at the patient in as a whole in holistically and trying to figure out the root cause why they got cancer in the first place, which is always very difficult to figure out.

Yeah. Right. And these days, of course, we know some of the reasons are obviously too much estrogen. And that may be because most breast cancer actually happens post-menopausal.

Right. So that's why I struggle with the too much estrogen explanation. But it's been there for how long has the cancer been there before it's discovered?

Right. 12 years. Research from Germany, Engel, I have a paper in my cancer and PMF's e-book, which is available to your viewers and listeners. Actually, it may be available as a bonus for the summit.

Oh, that would be great. So basically what we found is that where were we going with this? We were talking about estrogen and you were saying that the kind of development period of a tumor is somewhere around 10 years, 12 years.

And I think the point that you were gonna make is that there might have been a hyperestrogenic state in a premenopausal woman, but then the tumor's not discovered until she's postmenopausal.

Where I struggle with that is that if it's really a hyperestrogenic state, Why are we seeing the preponderance of it when that hyperestrogenic state no longer exists?

It has been building for a long time. It's been in the work for 12 years before it's finally discovered. And then we puddle around, we decide what we're going to do with this tumor.

So let's throw some chemo, let's throw some radiation at it, then we'll do the surgery. Well, the research is showing that the longer the tumor is there, the more cells are being shed off, the cancer And with every millimeter of growth of the tumor, you have more stem cells being shed off, right?

And so we know now that 40 to 60% of women with breast cancer at the time of diagnosis, 40 to 60% already have breast cancer stem cells in their bones, 40 to 60% already.

So what are we doing? We're not doing enough after the time of diagnosis. We're still, as I said, piddling around trying to do the things that conventional medicine says we should be doing.

I'm recommending that every woman should have that lump removed. As fast as possible. As soon as the diagnosis is made, remove it. As the more it grows, the more opportunity it has for shedding.

But in terms of the risks, what we are doing, we have plasticizers in our environment. How much exercise does a typical breast get? How much lymphatic drainage does a typical breast get?

We wear bras, right? So we don't allow the breast to exercise. We have ligaments in our breasts that allow the breast to move, to bounce. And that bouncing of a breast is lymphatic drainage.

Yeah, just like rebounding. Rebounding, whatever, just walking without a bra. So if you have the ability to do that as much as possible, you probably shouldn't have a bra on.

Never mind the wire stuff that's controversy around that. So what happens then is that if you don't do a lymphatic massage to a breast, It's going to build up all this material inside it that's inflammatory.

The plasticizers that are in our environment, all the cosmetics, all the shampoos and so on that are basically estrogen positive, right? They're basically estrogenic in their activity.

Big overweight is also a predisposition. And what is the breast mostly? Adipose tissue. And so what does fat have in it? Fat has lots of cytokines, has lots of inflammation, have a foundation that's been building there for a long, long time.

All these little things, all those little straws on that camel's back. They're adding to it and I actually think as our environment continues to deteriorate which it certainly does and when we have More and more and more chemical compounds that we are coming into contact with day in and day out multiple times a day Whether we're putting it on our face or we're washing our dishes with it or washing them clothing with it or washing our homes with it It's in our toothpaste, our shampoo, our conditioner, what we're washing our skin with, what we're hydrating our skin with.

Like it's literally everywhere. What is the burden? Yeah, it's more breast. Yeah, yeah. I mean, we store these toxins in our fat cells. So with that, breast being mostly fat is going to be a reservoir for all of these toxins.

Clearly, the bigger the breast, the more fat the breast has in it. It's like the rest of the body, the more fat you're carrying, then the more risk there is.

Also, the reason they talk about menopause is because progesterone by itself is anti-inflammatory. Progesterone, natural progesterone, we're not talking about progestins.

Right. Right. It's the off button. If estrogen is the on button, progesterone is the off button. And what happens to our progesterone around age 45? Yes.

It's actually happening a lot earlier now, unfortunately. Absolutely. And then the amount of estrogen overbalances the amount of progesterone you're producing, which only gets worse over time.

Which is, again, why breast cancer tends to be a problem with women postmenopause. Yeah. But the other thing that's happening in a postmenopausal woman is that glandular tissue, which previously occupied a greater percentage of the tissues of the breast, then gets replaced with fat.

And so that only increases the fat percentage and the storage capacity of toxins in the breast. Absolutely agree. So PNF therapy can help with all that.

before the breast cancer. Oh, wow. So in a preventive way. So PMS work in three ways. I call it the pregame. Okay, the game and the long game. So the pregame is prevention.

And the way you do prevention is you decrease the amount of inflammation in the breast. Actually, you have to do it in the rest of the body too. But if you just want to focus on one place, just treat the breast.

But you don't know if you're going to get breast cancer or not. So then theoretically, ideally, all women should be doing PMS therapy before Well, for the rest of their lives.

What does that look like if you're talking about it in terms of prevention? What does that look like in terms of time commitment and frequency? Well, obviously, for prevention purposes, you don't need as much, but it depends on the total burden the body is dealing with.

Because if you have a lot of inflammation elsewhere in the body, that also compromises your immune system. So how do people know that? How do people know what their inflammatory burden is?

What do you say? 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.

Well, I think that we can tell if you're metabolically healthy or not. We can look at markers of inflammation. We can look at indications that you are in a pro-inflammatory state.

For instance, when we look at a lipid panel, and most people think that we're looking for cardiac risk, but LDL is an anti-inflammatory molecule. And we know when people bump their LDL, that's their body's attempt at putting out a fire.

Right. So I look at things like that. I look at high-sensitivity C-reactive protein. I look at sed rates. I look at ferritin. I'm also looking at body composition.

I'm looking at a waist to hip ratio. I'm looking at where you store your fat and, you know, whether or not… I don't look at BMI so much, but I look at whether or not you're overweight.

But BMI actually is very important. It increases the risk of death from cancer. Mm-hmm. by significant amount. Yeah. But there are some people with a normal BMI who do not have a normal waist to hip ratio.

And you know that those people always there are skinny fat. So all of those things that you mentioned, I think are absolutely appropriate. And I used to do those as well.

But it's not enough. Yeah. Right. It's not enough. If you don't know for sure, you can have a normal CRP. You have a normal Cedric, a normal fibrinogen level.

Well, all these different markers, and you still have that risk. Yeah, right. Clearly. So it's important. And if you have those indicators, they're all there and you know, your risk is already very high.

Yeah. And you have to deal with that. How long does it take you to deal with that? Typically, it's going to take several years for you to deal with that.

In the meantime, you had decades, usually by that point of exposure and risk.

PEMF, Inflammation, and Breast Cancer Prevention

Yeah. So everybody should be doing PMF therapy anyway, preventively, regardless. Anybody over 25, you stop growing. Entropy kicks in. Your body's now on a down slope.

You may try to take that slope and flatten it out as much as you can, but nobody gets out of here alive. And you're still doing the other things. I mean, you're still watching your diet.

You're still trying to avoid plastics. You're still trying to get movement. You're still prioritizing sleep. I mean, you're still doing the things that we know promote health.

Have decreased risk. But in addition, you're adding in PEMF therapy. Because you don't know what else is left that you haven't dealt with. And so PMS then gives the body a fighting chance.

The body more ammunition, more energy to be able to take care of things that are silent. Because what happens with magnetic field therapy, one of the reasons I quit doing acupuncture is I found that magnetic field therapy heals.

Acupuncture doesn't heal. It makes you feel better. It doesn't heal. It heals at the tissue level, at the cellular level. And there's something called the cell end remodel.

If you look at the cell injury model, reductions in ATP production, increases in ROS, reactive oxygen species, mitochondrial damage, both protein misfolding, all the sort of effects of inflammation in the body that happen with a cell injury.

So you want to get ahead of the cell injury. I mean, if you drop a brick on your toe, then you got to deal with that damage. And some of that damage is not going to be repaired.

Right. But ideally, if you're dealing with you're doing magnetic field therapy beforehand, you're getting rid of damage that's beginning but hasn't crossed the point of no return on irreparability.

Yeah. So how much treatment are people doing? How many times a week? OK, let's go back to that. That's a good question. It's an important question. It goes back to inflammation.

Related to that point, how many cells do we have in our bodies? Trillions, I don't even know. A hundred trillion. How many biochemical processes per second in every cell?

Millions. Yeah. Millions. So how much treatment do we need? Everyone's different. I would say all day every day. Right? That's not practical. So to get back to your point.

Right. That's not happening. Not happening. I would say. Plus, you know, all of my people have to exercise and they have to be in their sauna and do all those other.

They have a lot of stuff to do. And I found that if you do magnetic field therapy with the right system and you do enough of it, there's a lot of things you don't need.

Good. But you do need nutrition, absolutely fundamental, and you have to have the proper nutrition. The key with magnetic field therapy is inflammation.

Actually, there's another key that relates to cancer, and that's called hypoxia and tumor microenvironment. Say more about that. So inflammation causes hypoxia.

Hypoxia causes inflammation and you end up with a vicious cycle. In case someone doesn't understand what that word means, can you define it? Hypoxia is low oxygen.

Now, when oxygen leaves the lungs and then is delivered by the heart to the body, it's about 140, 160 millimeters mercury. By the time it comes back from the venous system, it's down to 40. And why is hypoxia particularly a problem in people with cancer?

It's particularly a problem for people to get cancer, number one. Then it promulgates the cancer, makes the cancer, promotes the cancer development. Then not only does it promote cancer development, it causes the cancer within itself to have areas that are hypoxic, which means low oxygen.

And that means that they're now struggling to survive and they create all kinds of genetic changes, metabolic changes. They go into even more survival mode.

They go into even more survival mode. Yeah. And how do we do in hypoxic situations? Not well. Not well. And inflammation is the key to hypoxia. Anywhere in the body, anywhere in the body you have any inflammation, if you got inflammation in your joints and your elbow or a knee or hip or a brain, you have hypoxia in those tissues because of swelling, edema.

And then that edema chokes off the oxygen supply. And then that's a perfect environment for a cancer to develop. So getting rid of hypoxia, getting rid of inflammation is absolutely the key in the tumor microenvironment.

And if you have hypoxia in a tumor microenvironment, all the nutrients you're pouring into your body Don't get into that area. So you have to you have to deal with the information.

You have to deal with hypoxia in other ways. Nutrition is not enough by itself. It's still supportive to get you to recover better faster. But it doesn't take care of the hypoxia.

In fact, actually, there's a big industry developing now in the pharmaceutical world on creating oxygen therapy and nitric oxide. Nitric oxide, in fact, magnetic field therapy increases the nitric oxide.

Yeah. So you have to do all the other work. and then adding in PEMFs will help to prevent the development of cancer. What if the horse is out of the barn?

What if you have a cancer diagnosis? Well, you don't want the horse to run too far. You want to be able to corral that horse. All right, so the sooner you can get at it, the better.

And once you start getting at it, because it goes deep into the body, there's nothing that stops the magnetic field. But the key is having the right magnetic field.

And this is the biggest mistake people make with PMF therapies. Inflammation requires 15 gauss, one five, optimally at the adenosine receptor, at the receptor site that controls inflammation.

And that means you have to account for the fact that the magnetic field or light or heat or cold drops off with distance. So the deeper you have to work in the body, the stronger the magnetic field has to be because of the loss of intensity.

So, for example, If you want to work six inches into the body, you need a 4,000 gauss magnetic field to deliver 15 gauss. So you need a whole body magnetic system, preferably a strong enough magnetic system that's going to take care of business throughout the body for the most part.

Not 100% still, but it's getting very close to doing that. And if you do that, you get the right magnetic field intensity. Maybe you don't have to spend as much money and you can again do prevention.

There's a family history of breast cancer. And you know you have your overweight, you know that you may have a triple D breast, well then you're probably going to have to do something to help your breasts.

And the earlier you start, the better. And so decreasing the inflammation, it depends on the person, but I usually

recommend with the right magnetic field intensity, I usually recommend a half hour twice a day for prevention.

And then if you have stage two or three cancer, breast cancer, you do your lumpectomy and just do magnetic field therapy to your breasts for the rest of your life.

Because you got rid of that lump, that doesn't mean you got rid of the risk. Because we have stage one cancer. So you are talking about stage two or stage three disease.

So this means someone with lymphoma disease. No, I'm talking about stage one as well. Oh, okay. But my question was going to be, is this in lieu of systemic therapy?

Because everyone with stage two and stage three disease is getting a recommendation for chemotherapy. Well, and I can't argue that. That's going to have to be a personal decision.

The problem that I find is that most women who do magnetic field therapy want to spend maybe $200, $300 for a machine. It's not going to work. Yeah. And there are lots of people who are selling machines that are multi-level marketing.

They're selling $5,000 machines that are only one gauss. Only one gauss. And that's not going to work. We need 15 at the tissue. So you have to judge the magnetic field intensity for the size of the breast as well.

If all you're doing is treating the breast. So you need 200 to 500 to 1,000 gauss just to treat the breasts themselves. So how does someone go about knowing what they need?

Well, you can get my ebook. Which book is that? It's called PEMF's and cancer ebook. Okay. So we'll be sure to have that information available. Like we'll provide that for you.

That would be amazing. I'm sure I have the two books. Yeah. Oh, that's that's a big resource. There's lots of information on Dr. Pollock.com and I have people who want more of the science.

There's more of the science and the power tools for health book. There's over 500 references, not just on cancer, but across the board for general health.

Yeah. Amazing. And so I guess my last question is, how does someone get the right equipment? Because you talked about people getting the wrong equipment.

So how does someone go about getting the right equipment? So in the books, I have tables of different devices and machines and their magnetic field intensities and whether they're whole body or local.

You can always contact us at DrPolick.com. So that's D-R-P-A-W-L-U-K dot com. You can just call info DrPolick.com. If you are more advanced, if you have more advanced cancers, stage two, stage three, particularly stage four, then you're probably going to need a consultation.

Choosing the Right PEMF Device and Final Takeaways

And we provide free consultations to women to help them to get the right piece of equipment. Yeah, this is amazing. I just want to go back and review for anyone who might have come on late or just want to remind you about what we talked about today because It's really been an awesome discussion.

The two books that we talked about are Power Tools for Health and Supercharge Your Health with PEMF Therapy. And then you're going to provide us with a guide for PEMF therapy for cancer.

You started off by telling us why you left the House of Medicine, because like everyone here knows, it's just incomplete. It just doesn't give us enough And you learned about magnets and the magnetic field and how that helps to alter these processes that are happening in the body, these inflammatory processes, and significantly

improve outcomes, accelerate healing, reverse disease.

And of course, there are some limitations, transplant being the most important one. This therapy is actually helping the body to be more efficient by literally creating energy, helping with mitochondria, mitochondrial repair, recycling of ATP.

It helps with the circulation. It helps with stem cells, stimulates fibroblasts, improves immune function. It can help to reduce pain. And it's adaptogenic and there are actually 25 different things that it does in the body.

And of course, this is done in conjunction with exercise, improvement in lymphatic drainage, careful nourishment and nutrition, eliminating toxins in your environment.

And you think about it in three different categories. The pre-gain, someone who is using it for purely preventative purposes, when you have a diagnosis, and then of course maintenance for the future to prevent a recurrence.

The key is getting rid of inflammation, getting rid of the hypoxia, and creating this healing environment, which these PEMF machines can only help to improve the entire state of the body.

What did I miss? Not much, actually. I just want to emphasize the point that you were making. There's lots of science behind this. This is not my guesswork.

I don't have a hypothesis. I have over 500 references in the Power Tools for Health book, and that's just scratching the surface. I have a library of 30,000 abstracts on magnetic field therapy effects.

Wow. So we're just scratching the surface. So science, medicine has not kept up with the science. They don't want to know about it mostly. No, they don't.

They don't. And we know that. We know that there are so many things that exist that we know heal, that we know promote health, that are not talked about within the confines of conventional medicine for a variety of reasons.

But that doesn't mean that they don't work. That doesn't mean that they're not scientific. That doesn't mean that you shouldn't look for these things and incorporate these things into your health journey.

because we know that where health happens is at home. And it happens because of what we do for ourselves. In the body, yes. Yes. So Dr. Pollock, thank you so much for being with us today.

This was an awesome talk. I'm sure people really, really appreciate your years of experience, your knowledge, your insight. And I know that this is going to be tremendously valuable.

Well, thank you. I hope so. But knowing about it is not enough. You got to do something. You got to do it. You got to do it. So you heard him. You got to do it.

It's Dr. Jen. Bye for now. Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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