Introduction to PEMF and the Interview

it starts in one spot. Breast cancer is a good example. It's been brewing by the time a breast cancer has been discovered, right? It's been there for at least 12 years, typically.

So that we'll call it doubling times. So an initial one or two cells, maybe 10 or 15 cells or 20 cells or 10,000 cells that are barely detectable, cells are so small, right?

So they've been doubling for a long time before they finally get big enough for you to detect it with the tools that we currently have. So you should be doing prevention even then to protect yourself against that.

And we know that estrogen is inflammatory. Estrogen is important for your bones and for your skin and your body and so on, but it's also inflammatory.

Welcome to the PEMF Effect, where breakthrough science helps take control of your health. I'm Dr. William Pollack, and I'm here to guide you in tapping into the power of PEMF therapy for recovery, vitality, and total body wellness.

From overcoming chronic pain, optimizing brain health, boosting energy and aging with strength. This podcast is your path to cutting edge solutions for lifelong well-being.

If you're ready to move beyond symptom management and tap into your body's natural healing ability, you are in the right place. Let's dive in. Today's episode is a previously recorded session from a summit where I was a guest speaker.

Well, Dr. William Pollack, it is always such a pleasure. So, I mean, you come with such charge in your presentations.

Why Long-Term Cancer Prevention Matters

Charge for sure, charge for sure. You're somebody that we all rely on when it comes to really understanding that the post electromagnetic field is science.

There's so many tools out there, there's so much information out there that we it is important for individuals to be able to navigate that appropriately and understand what is accurate, what's not accurate, and then to have somebody that's done the legwork, the research, and they've really led this field to have that, you know, something we can connect to and ask.

I appreciate you being that individual. Thank you. It's my pleasure. And you know, like you, because my background is not just pulse magnetic field therapy.

My background is holistic medicine. I also have a background in managing and doing healthcare management or managed care. I was a medical director for a team of nurses who did home care.

They set up home care services. So we had to manage all of those needs for them as well. So somehow we have to find a way to combine the best of both worlds And you, like me, we never relied on one tool, right?

There's no such thing as one tool. And we learned right over time, we learned the strengths and the weaknesses, the value and the risks of all the tools we have, right?

And ideally you have a shed, a tool shed with all kinds of tools in it, right? To be able to do the most gardening, if

you will. Yeah, that's the thing.

I am an accumulator and I know you are as well. And that's the thing is that especially when you deal with something as serious as cancer, it is an ever evolving learning curve and ever evolving kind of seeing what pieces, what holes do we need to patch and where where do we feel we can do better?

And obviously, one of those tools is pulse electromagnetic field that we're learning more and more of the benefit and what it does in regards to not just when you're dealing with cancer, because at the end of the day, we really don't want to have cancer.

And so at first step, we want to prevent and that's where prevention, you know, your tools. But even when somebody is in active disease, you know, there's so much research has come out in regards to how pulse electromagnetic field can benefit.

Well, that combined with everything else, right? So everything works better when you're using them together. You know, we talked about this a little bit before.

I've never talked about this with somebody else during these interviews. But the key, having practiced medicine for 50 years, I have a different sort of perspective.

And when you are a primary care doctor and you are a doctor for primary care for people over decades, you see a lot more. you touch a lot more, and you see the consequences of your decisions.

So one of the problems that I have with conventional oncology, and it's something that we have to be careful of in what we do, in conventional oncology, they see people intensively for a short period of time, and then people disappear.

So the oncologists have this perspective then basically that they're okay now, because they're gone. And then unfortunately, they may not come back to them 10 or 15 years later when they get their stage four disease, because now they've graduated, if you will, to somebody else.

So there's the continuity, there's a big continuity problem then in the non-primary care world where you don't see the longer term consequences of a system that basically fails.

And oncology is now recognizing the fact that what we're not dealing with in these traditional oncology systems is we're not dealing with the biggest risk of all, which is the stem cells.

And you and I, we deal with the stem cells. Exactly. Because we know that the tools that traditional oncology has, they impact the stem cells, but not in a positive way.

They really kind of make them more active.

Inflammation, Hypoxia, and Breast Cancer Growth

So here you have, to your point is that the individual, they go through traditional oncology care, and they get to the point where there's no evidence of disease, they ring the bell, they're done with the treatment, and now there is really no follow-up.

And the reason for that is that medical doctors really don't have any tools in that interim. Yeah, all the tools they have are destructive tools, which will then wear down the body even more.

And that's why they're saying that you're done, but that is when it becomes so important to step into, if you haven't already, step into the integrative holistic space where the tools exist that can then impact the cancer stem cells and that can support the immune system, that can support the mitochondria, that can control inflammation, that can detoxify, that can do all these different things that the traditional oncology system is not built to be able to do.

The insurance companies are the same, so they have short-term perspectives. What's the average residence How long do people live on average in a residence in this country?

That's a good question. I'm curious. It's about five to eight years. So every five to eight years, people move. So insurance companies have a perspective that they're only going to have that person as an insured for two to three years.

So they don't have a longer-term perspective either. And so the doctors don't, because the patients move. They're gone. They're gone somewhere else. So they're out of sight, out of mind.

But when you have that sort of long-term vision, then you have to live with these folks, especially if you're living in small communities, or you're the GP in a small community, or primary care doctor in a small community.

Well, you see them through generations, in fact. And then you see the consequences of your decisions. So oncology is not designed for longevity. So the way the oncology world works in conventional medicine is people have very short term perspectives.

And we talk about five year survival rates, right? But we know now that like say with breast cancer, it's not about five year survival. It's about 10 or 15 year survival.

And as I said, the people who did the primary treatments had the tools they had because that's all that they could get the funding for. And they were toxic and they eventually have to stop doing the toxic stuff.

Because otherwise then you really do kill the organism. So we know that it's long term. And we have to take that perspective. And we can't do toxic things long term.

And even though I still think it's also a question of whether we should do toxic things at all. Yes, so talk a little bit about that, because I mean, obviously, here we have a disease and we know that the percentages of people that are impacted by disease is skyrocketing, it's increasing every year.

And so obviously, we don't want to just wait until the disease is here, we want to do preventative things. And there are lots of tools available, but one of the powerful tools obviously is what you're educating providers, practitioners like myself, and then the public in how to use it.

And that is how the electromagnetic field using healthy pulse frequencies, how that impacts a body and how that can be beneficial. Do you mind just kind of running through a little bit to give a picture of how it benefits an individual from a preventative perspective?

And then I would like to be able to go in kind of for people that are active care and then post-care so that people can understand what, you know, how this would benefit them.

So let's go through the spectrum. Ideally, if you and I don't have cancer, everybody's got risk, right? But at this point, we don't have cancer. But let's say you're 40 years of age or 45 years of age, then what do you do to keep yourself healthy so that you don't get that cancer?

The way that you keep yourself healthy is to keep the inflammation level down in the body in general. That's the most important thing that we could be doing.

And why is that important? Why cancer and inflammation? Why is that important? So now we get into the mechanics of a cancer, right? And what happens, it's about the tumor microenvironment.

That's where a cancer starts. It doesn't start all over the body all at once. It starts in one spot. Breast cancer is a good example. It's been brewing by the time a breast cancer has been discovered, right?

It's been there for at least 12 years, typically. So that we'll call it doubling times. So an initial one or two cells,

maybe 10 or 15 cells or 20 cells or 10,000 cells that are barely detectable.

Cells are so small, right? So they've been doubling for a long time before they finally get big enough for you to detect it with the tools that we currently have.

So you should be doing prevention even then right to protect yourself against that and we know that estrogen is inflammatory estrogen is important for your bones and for your skin and your body and so on but it's also inflammatory and so uh when that's inflammatory and you have an inflammatory diet right you have a typical western diet then you're adding inflammation on top of inflammation and those little cells that are beginning because of inflammation in that breast those little cells keep growing because what does the inflammation do?

One of the key findings now is inflammation causes a reduction in oxygen levels in the tissues locally and that decreased oxygen so the rest of the breast is healthy but you've got this one little area in the breast that doesn't have enough oxygen and that's caused by the inflammation.

And so the oxygen says, okay, the breast says I need more oxygen as I'm going to turn on various mechanisms to deliver more oxygen. So they get angiogenesis.

You build new blood vessels to bring in nutrients to the cancer. But then the blood vessels are not healthy blood vessels. They're cancerous blood vessels, right?

So they're not healthy either.

Using PEMF During Cancer Treatment

So the cancer tries to take care of the lack of oxygen in its own way, but unfortunately that way also causes the cancer to grow. So prevention then is to decrease the inflammation in the first place, which then decreases the hypoxia problem, which then prevents the cancer.

So we now know that the hypoxia problem causes the resistance to treatments, to almost all treatments, whether it's radiation or chemotherapy, but hypoxia can also even cause resistance to nutrients, even to supplements.

You know, I've done some research on that and supplements don't get into health and into cancer cells that well either. right, because of the hypoxia issue.

They're not being delivered because there's no blood supply to deliver it. So we had a compounding problem. So the idea then is if you keep working at decreasing the inflammation, that's prevention.

So you prevent it from growing and you can actually cause that cancer that's grown already to a few cells, you can stop it from growing any further. You may not kill it, but if you stop it from going further, you know, that's still a win.

Ideally, you want to be able to cause it to reverse itself. And we've seen it, right? We've seen cancers reverse themselves. Absolutely. Without toxicity.

Yeah, exactly. And that's the beauty is that when you bring these kind of tools in, it's restorative, regenerative, supportive, and it doesn't bring a bunch of toxic substances that leaves the body weaker after the treatment.

So here you're talking about the PMF being a powerful tool to reduce the inflammation, and with that also you're able then to increase the oxygen within that tissue.

And because you're increasing the oxygen, reducing the inflammation, you're also more able to do treatment in that tissue, whether it is nutraceutical or pharmaceutical, whatever it is, the appropriate delivery mechanism and the receptivity of that tissue is increased.

It's enhanced significantly. So the magnetic therapy can help with the prevention, but then it also helps with the

treatment. So even if you're beyond that point where you now have the cancer now you have to do a lumpectomy and I recommend lumpectomies by the way in breast cancer all the time get the cancer out of there because it's seeding itself it's already spreading itself if there's a cancer there get it out as soon as you possibly can there could be a lot of women listening who are going to say no no no that's not what I hear I hear that you shouldn't do disturb the tissue you shouldn't cause cause cause a problem Well, but you know, it's seeding and it's been seeding all along.

So do you want it to seed anymore? Get it out. If you get it out and then you do the treatments around to protect the breast from the rest of the damage caused by the surgery.

than longer term. I don't know, you probably know this. I think I've mentioned this before. When you look at the 15 year survival rates for women who have had radiation to their breasts, and I don't disagree with radiation fundamentally, but I think there are other ways to do this.

So when you have your lumpectomy, they recommend that you do radiation to protect the breast from recurrence. And yes, recurrence rates are higher in people who don't have radiation.

If you go through the standard approaches, right, to taking care of the breast. when you look at the 15 year to 20 year survival rates in women who have had radiation, it's only three to four percent different than women who didn't.

So long-term survival, it doesn't protect you that much more for long-term survival. So you still need to be doing other things. Back to our point, right, this is a lifetime problem now that you have to be dealing with.

So magnetic field therapy then helps you with the local prevention, that helps you with the treatment, Whatever treatments you're going to do helps you recover from your surgery better faster or you protect the breast and then you have to protect the other breast as well Because the next biggest area for recurrence or the cancer coming Starting again is the other breast.

So then what you do is you do prevention then for the rest of that woman's life that person's life the good thing is that when you you're not just doing cancer prevention and with magnetic certainly with magnetic therapy you're not just doing cancer prevention all the things that we do help the whole person It's going to help their arthritis, it's going to help their vascular disease, it's going to help their diabetes, it's going to help their autoimmune processes.

All the things that we do for prevention help a lot of other problems as well. 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. 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. I mean, the key to health is always to be able… I mean, it's kind of like a city.

We shut down all the highways and we shut down all the major streets. You know, the ability then for trash to exit is decreased. and also the ability to transport food and things, tools that we need to keep infrastructure alive and also support to people living there becomes greatly decreased.

So if we can do the same in the body where we can make sure that all these pathways are open, things are flowing

appropriately, all the metabolic waste is able to leave the tissue, all the nutrients that are needed, all the oxygen and everything that's needed to get into the tissue for it to operate optimally is enhanced, then we are putting ourselves in a place where cancer is not as likely.

are not as likely to happen in the first place, also is not as likely to spread, and also is not as likely to have another cancer, a different cancer happen at the same time.

So we're not talking about one modality. And I'm not talking about magnetic theory therapy being the only thing that people should do ever. I'm not gonna say that.

It's just not enough. You don't know what's gonna be enough. That's the problem. We don't know what's gonna be enough. we know that whatever it is that we're doing in addition is greatly enhanced because you are then supporting the delivery of whatever that agent is and you're controlling that tumor microenvironment, reducing the inflammatory signaling that's taking place.

What I see now, I see younger and younger people being impacted by cancer. So it's not like we all of a sudden can wait until we're 50. And I want to do prevention now because now I see that more and more people are getting cancer.

We literally have to start in early ages to be able to really make sure that we support that tissue and support inflammation and regeneration from an early age.

Totally, and when you talk about breast cancer, to go back to that, what's the cause of breast cancer happening earlier and earlier? There's lots of environmental causes, right?

And the breast is fatty tissue, mostly, right?

How PEMF Supports Recovery and Energy

So what happens is that all those environmental toxins, the endocrine disruptors are loading into that tissue and interacting with the normal hormones that are there to create inflammation.

And then on top of that, maybe this is going to be controversial for some people. I had a book, I read a book a while ago called Dressed to Kill. I don't think I ever read that book.

It's worth reading. I haven't. That sounds, yeah, because I'm sure all the clothing that we have, the wires set in the bras, all the synthetic material and all the dyes.

But one of the factors about breast cancer with the bras is the bras themselves. And it's not the material or the wires. So what is a breast supposed to do?

A breast is supposed to move like everything else in the body. Because how do you get the lymphatics moving in a breast? Breast has ligaments for a reason.

That means the breast needs to be bouncing. And what it's doing then is it's milking the lymphatics and getting rid of any congestion to be able to help the breast be healthier.

So bras are a big part of the problem. That's where that book, Breast to Kill, has a very interesting hypothesis. And I got into a big argument with a surgeon about it.

Academic surgeon, mind you. So I'm curious, what were their counterarguments? Because to me, that sounds really obvious that we know that when we're running, lymph only moves with our movement.

And so I'm curious, what was the argument against something that seemed so logical? Science. there's no there's no there's not enough science it hasn't been proven yeah so you know what you know what you know well listen

you're a phd so i better be careful what i say you know what phd means Well, I mean, I've forgotten, but it's somebody that, yeah.

Well, it's called piled higher and deeper. Yeah, yeah, exactly. So we add more, we have a lot more information. That's how you get to be a PhD. Well, the problem is that PhDs have blinders on, right?

They often have PhDs in their specific limited area of knowledge. Their knowledge base is deep, really deep, fantastic, but it's very narrow. So as a result, the breast cancer, the breast surgeons don't read a study on bras and look at the history of humanity and cancer rates in the past when there were no bras, but there's too many other conflicting factors.

We can spend all day, but we don't want to. Yeah, and this is an important point, though, because people make that statement, well, there's not enough studies for it.

But if we kind of take that to the ultimate, how many studies, is it scientifically proven that you die when you jump off an airplane without a parachute?

Has there been a study for that? And how many people… Has there been a randomized control study? Yeah. They have to throw mice out of airplanes. Yeah, but that's on animals, so we don't know if that happens on humans.

So it's just kind of showing the ridiculousness and that you can't just kind of go there. You can't randomize everything. No, no, exactly. So talk to me a little bit about, for people that then go into cancer care, here they're doing chemo, they're doing radiation, doing surgery, these different things.

Let's say an individual now is at that point, we were beyond the preventative and they're dealing with it. How can PMF be a tool while they go through that care?

And again, we accept people with their beliefs. We accept people with whatever they've chosen to do in their path. It's their choice. And so, yes, it's your choice whether you have surgery or radical mastectomies or whether you have radiation or whether you have chemotherapy.

That's fine. There's no judgment. Nobody gets out of here alive anyway. So we do the best we can for as long as we can. Magnetic field therapy helps all the therapies.

There's no contraindication with magnetic therapy for radiation or for chemo or for surgery. In fact, actually it's very beneficial for surgery because you recover better faster after surgery.

So there's less drain on the organism after you have a procedure. But magnetic therapy also enhances chemotherapy and enhances radiation. The Russians have done a lot of research on this, on breast cancer in particular, and they found all of these things are benefited with PMF therapies.

They can work by themselves. We know that radiation does the following and we know the chemo does the following But when you add magnetic field therapy one plus one doesn't equal two When you're adding comp and your complementary therapies, but they're they're working together and synergistically then the benefits out, you know out outperform anyone alone and Then if you continue it over time there there was a case report of a woman who failed chemo and She couldn't do anymore because her hematology was too whacked out.

It was too low. Her blood counts were way too low. They couldn't do any more chemo on her. So all they did is magnetic field therapy. She did about 110 sessions in a clinic.

That's a lot. 110 sessions of magnetic field therapy. And that's all she did. She didn't do anything else. And as long as they watched her, which is about 12 or 15 years later, she was still alive.

she was stage four. That's incredible. And so, when you say that it enhances chemotherapy, we talked a little bit about that and I have my ideas, but what does it show that it makes it better, that it makes it more effective?

Well, I think there are two things, and unfortunately what happens is the oncologists don't reduce the dosages. Some studies have shown that magnetic field therapy makes the chemo at least twice as effective.

So if it's gonna be twice as effective, then ideally what you do is you cut back on the chemo so you don't have the toxicities, right? The toxicities are often related to the dose.

So at this point, we're doing magnetic therapy and the chemo at the same rates that they normally do their chemo. So magnetic field therapy opens cell membranes.

And when you open cell membranes and you talk about the hypoxic environment, you talk about the inflammatory environment, if you decrease inflammation and you increase oxygenation of the tissues, the chemo gets into the tissues better.

And then the radiation is the same thing. The radiation causes damage. We want the radiation to kill cells. That's the purpose behind radiation.

Cancer Types, Field Intensity, and Dosing

There's no point doing it if you're not going to kill the cells, but you don't want collateral damage. So the magnetic field therapy helps radiation decrease the collateral damage.

And people who do radiation get nauseous, they get fatigued, they get all kinds of side effects of the radiation that are not direct, they're indirect, including on the vascular system and the blood cells and so on.

They get affected significantly by it. So magnetic field therapy makes all that better. So you survive those therapies better and they work better. So that's a win-win there as well.

And we know that radiation, chemo, they're oxidative therapies. And in order to be able to oxidize something, you need oxygen there. So if we have high level of inflammation, not enough oxygen into that tissue, we bring in an oxidative therapy, we're going to have limited results because we don't have enough oxygen in that tissue.

Right. Correct. Right. That's why it becomes resistant. Yeah, exactly. And obviously, when you deal with chemo radiation, you also get the component of pain.

That's always a big, big component that you're dealing with. And then with chemo, it's not only then the cancer cells, because it goes after fast dividing cells, But you have gut lining, you have your nerves, you have all these different…

The brain, chemo brain. So how can then the magnetic field therapy kind of assist in those areas? So the good thing is that magnetic field therapy supports and enhances the value and the effectiveness of the chemo.

But at the same time, it's making all the other cells in the body healthier and they become more resistant. So when they're healthier, they're able to shrug off the side effects better.

They recover better faster. So if you do surgery, if you have an appendectomy and you do magnetic field therapy, you'll heal in about half the time that it normally takes.

So why? The reason is circulation, inflammation, increasing stem cell production of regenerative tissues, increasing ATP in the cells and tissues. The body has more energy, it could defend itself better.

We did one little study, actually it was an anecdote almost, a guy at a biohacking conference, I believe it was in Miami. And what we found is that he had about a 20% increase in energy, in the cellular energy from the magnetic field therapy.

We did it before and after the magnetic field therapy. This is a healthy person. So what would happen to somebody

who's not as healthy? It really could probably be even more than that.

Yeah. And so here we have then a therapy that enhances the delivery, enhances the effect of the drug when it is delivered because there's more oxygen tissue.

Then at the same time, we know that or we're seeing more and more pointing towards that cancer is a metabolic disease and you're talking about ATP being the production of ATP is being increased and ATP is obviously that is kind of the energy currency of the cell.

So here we are then arming the rest of the body to not move in that direction of becoming cancerous. And in fact, actually, it's interesting, but cancers in the micro environment, the micro environment, the cancer cells increase mitochondrial function, they increase ATP.

But they also stop it from increasing too much. So in other words, the healthier cells want more, they could deal with more, they can deal with as much as you can give it.

But not a cancer. Cancer limits how much ATP it will allow or produce. So we are flooding the cancer then with ATP, along with oxygen, along with other factors as well, growth factors and so on.

We're limiting the growth factors. So multiple strategies, multiple approaches that magnetic field therapy works at. It's not just one strategy, one tool or one metabolic pathway.

And from my understanding is that in cancer cells, we're looking at the mitochondria, and you were talking about the cancer cell is wanting to control the amount of energy that's produced within the cell or how much the mitochondria, the energy factory of the cell is able to produce.

But because the mitochondria is so dysfunctional within the cancer cell, And if you drive that function, then it's kind of like driving a car that's about ready to just fall apart.

And you put it on Autobahn in Germany, and now it's supposed to drive 300 miles per hour. And lo and behold, pieces fly all over the place. And so it's kind of like the same on a cancer cell when you push a mitochondria.

It's too much, too fast. Cancer can't control it. No, and then you have all these reactive oxygen species within the mitochondria that just kind of bleeds into the cell and kills the cell.

Blows up the cancer cell. Yeah, so that's a beauty about bringing in the strategy of magnetic field therapy, pulsed electromagnetic field therapy, which is fantastic.

So go through a little because you've also kind of gone through to kind of, there's research and studies in regards to the different types of cancer and how you can then apply the pulse electromagnetic field therapy for that, like for pancreatic, the benefits there and how to do it.

Liver, we talked a lot about breast, lungs. So are there differences in how to apply it with these different therapies or with these different cancers?

The answer fundamentally is that most cancers are the same. We give them different names because they come in different tissues and they have different phenotypes under microscopes or different biochemical signatures, but essentially the process is very similar.

to each kind of cancer. And so magnetic field therapy, because it's a non-specific treatment, it has many different actions in the tissues, then those tissues will take from the magnetic therapy what they need.

So magnetic therapy doesn't control the results. It doesn't control the actions of the body. The magnetic therapy is basically a stimulus. It's a non-specific stimulus that increases the energy in the tissue.

tissue has more energy, the tissue says, okay, I need circulation, or I need ATP, or I need to decrease inflammation. So the body then in its own wisdom decides which ones are going to happen first, at what rates and at what levels.

So then it really doesn't really matter what the cancer is. The key though that I think that most people sort of miss with magnetic field therapy is the intensity of the magnetic field.

This is the key message that I want to deliver to people, is that at least if you do the adenosine receptor from that perspective, magnetic fields decrease inflammation in a lot of ways.

But one of the key mechanisms of action is through the adenosine receptor, which is on the white blood cells. And where are white blood cells? Everywhere, right?

But you need, optimally, you need 15 Gauss. So Gauss is the measure of magnetic field intensity. But light, cold, heat, all these physical phenomena drop off very rapidly as you move away from the source.

So like radiation therapy, you have to try to calculate the dose that you have to start with to deliver the right dose at the tissue. So the problem that we run into with pancreatic cancer would be that people don't have the right magnetic field intensity to deal with that particular cancer.

But you and I know that we have to know our tools. Now we have to know the limitations of our tools. And we have to know when we have to add the next tool, right?

Home Devices, Treatment Duration, and Protocols

Or we have to amp it up to a certain point, but we can only amp it up to a certain point because beyond that it becomes toxic by itself or becomes harmful by itself.

So then same thing with magnetic field therapy and inflammation. We have to adjust the dose that we're delivering. Unfortunately, most of the time magnetic field therapy is not toxic.

Because the body has to produce the energy, the body has to produce that pathway that you need for like ATP or mitochondria or growth factors, etc. So that's the saving grace of magnetic field therapy.

It doesn't matter what it is, but you have to have the right dose. And that's where I think most people tend to fail. In my webinar interviews that I've done, I've shown people that you need a certain level of magnetic field in order to be able to have the most benefit.

And so that's the biggest failure is people don't do the right magnetic fields. So you could spend $6,000 for a machine that gives you one Gauss at the surface, nevermind going deep.

If you're only delivering one dose at the surface, you're wasting your money and you're spending time away from something that's going to help you. So it's actually harmful to you to waste your time doing something that's not gonna benefit you anyway.

And in addition to that, increase your risk because you're not doing therapy the right way. So the intensity is the key. So people need to buy the right piece of equipment.

And for that purpose, we do consultations to guide people into the right equipment. And then they need to be educated and informed that they're not wasting their money, you know, spending money on, when they're already spending a lot of other money, spending money on and wasting their money on equipment.

But then you gotta do it right. So once you get the equipment that you have to do it right, apply it correctly to be able to get the best results. 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 dot com. because real healing starts at the cellular level.

Okay, so you said a number, like 17 gauss, is that what I heard? 15, 15. 15 gauss, and that needs, so let's say the pancreatic, so here you're dealing with the tissue depth as well.

Correct. And so as you apply the magnetic field, then that tissue is gonna absorb some of that, then you'll lose, just with the distance, you're going to lose some of the intensity.

So what kind of intensity would you need kind of hypothetically for a normal individual that's not excessively overweight? So in my book Supercharger Health, I have tables.

On DrPollack.com, on my website, there's a blog about adenosine and inflammation, and I give tables in that blog. So if you're trying to treat across a brain from one side to the other, you need about 4,000 gauss.

So for six inches into the body to deliver 15 gauss from here to the other side, you need 15 gauss. So you figure you need to go that far. How deep do you need to go for a pancreas?

How deep do you need to go for a lung? How deep do you need to go for a belly? with carcinomatosis. How about the kidneys? How deep do you need to go for the kidneys?

So you have to get a sense of the calculation of the dose that you need in all of those tissues. The pancreas is not just one point. The pancreas is about this long, typically.

It's got its own width and depth to it. So you have to account for how deep it is in the body, and then you have to account for the size of the pancreas itself.

So if you have somebody who's 400 pounds, even though the packers typically would be more than say three to four inches into the body, now you have to deal with all the tissue that's in between.

So you have to account for that as well, the size of the person. So generally you're gonna have to have the strongest magnetic field you can get and it's not wasted.

So you have to worry about wasting. And here you're making an example of tools out there that are $6,000 and one gauze. And obviously here you're talking about numbers like 15,000 gauze in order to be able to deliver the 15 gauze at the target area if you're doing passive skull.

So obviously, I mean, are there tools out there that are that powerful that people can use in the home? Safely and powerful, and it won't bankrupt you.

So we have devices that are in doctor's offices that are $40,000. I think that we need to try to keep the cost down as much as we can. This is expensive equipment because it has expensive components, and those components have to live for a long time.

So you can't go cheap on this. Unfortunately, that's just the way the world is. It's not like magnetic therapy

machines. You're making a million at a time.

They're not sort of disposable that way. So typically, you're going to be spending somewhere between $12,000 to $13,000 for a machine to get the right machine.

Again, if you get less than what you need, you're going to have to compensate in some fashion. And one of the ways you can compensate potentially is to spend more time doing treatment.

Well, the last thing people want to do is to spend more time. So if you're thinking about all the supplements we take, I personally spent probably about $4,000 or $5,000 a year at least in supplements, just supplements alone.

So if I'm going to spend $4,000 a year in supplements, I'm not buying it all at once. I'm paying for it over time. So it doesn't seem as much. because I'm paying for it over time.

With magnetic field therapy, you're making an investment. It's like buying a house or a car. You're making an investment. You're going to have a big chunk at the beginning, which is going to last you for a long time and provide benefits to you for a long time, not just for your cancer, again, for the whole body, and not just for you, but also anybody living in the house, including your dog and your cat.

all organisms, all biology in that environment, they can get a benefit from that. Simple therapy. And that's a beauty, like you mentioned. It's like an insurance policy that you're taking out.

You make that investment but it's an investment that keeps on giving for the rest of your life. If you ring the bell and now you know evidence of disease, it is beyond that because now we are healing the tissue, we are restoring mitochondria, we're reducing inflammation, we're doing all the things that needs to be done to repair the tissue post-trauma of oncology care.

But I think that what we do in the practice setting is we use high intensity systems because we know we're going to only see people for a short period of time.

And I know people travel to your clinic as well from a distance, so they can't keep doing this. So they'll get intensive treatment with you or in many other doctor's offices, but then they have to go home with something in order to be able to continue that benefit that they got temporarily with the treatments with you or any other doctor for that matter or in Mexico or wherever you go.

And so what does a protocol usually look like? I mean, is there like a minimum that you should, you know, let's say you are dealing with cancer, is there a minimum that you should deal with?

I mean, it's like half an hour every day, you know, half an hour a week, or I mean, what are we talking about that would be that, you know, this is what you need to do?

So the most important thing about all this is that you're doing it regularly. So cancer never sleeps. How often do you have to hit the cancer to keep it under control?

So we take the brakes off, right? How fast is it gonna try to catch up to not having the brakes anymore? So the answer to your question is we don't know.

We're guided to some extent by the research that is available. So we know that if you use a weaker magnetic system, you're gonna have to spend a lot more time.

It could be several hours a day. If you have an appropriate system that's strong enough, then you might be able to get away with half an hour twice a day.

But let's not forget, most people with cancer have other health issues too. But they're not just dealing with the cancer. And those other tissues are impacting the cancer too.

So if you take care of the other issues and the cancer, then you get a benefit from both. So typical, I recommend a minimum of half an hour twice a day.

with the right intensity. So if you get the intensity that's going to meet the needs for the distance and deliver the 15 gauss at the right distance, then you probably need less treatment time.

Women who have cancer, breast cancer for example, are often menopausal. And because they're menopausal, they often have osteopenia or osteoporosis. So that needs to be treated too.

And that needs extra time. Fortunately, if you treat the whole body with a strong enough magnetic field, you're treating the osteoporosis or osteopenia at the same time that you treated the cancer.

And if you're diabetic, you treat the diabetes, parts of the diabetes process at the same time as you're treating the cancer.

Low-and-Slow Approach and Closing Remarks

Right? So half an hour to an hour, typically twice a day. If you want more assurance, especially at the beginning, and you're measuring your markers, you're doing your imaging studies and so on, you're seeing that you're getting some control over the process, then you look at backing off.

If you back off and you see your markers changing and going back up again, well, you backed off too soon, right? And too much. So then you have to keep up the therapy.

And we're gonna be talking about six months, a year, two years of continued therapy over that period of time to make sure that we have control. So I think a minimum of a half hour twice a day My answer to people is that we have 100 trillion cells in our bodies, let's say, right?

And we have about a million biochemical processes per second in every cell. How much treatment do we need to keep everything humming optimally? We don't know, right?

It's gonna be different for every person. And the more risk factors you have, right? And the more other conditions you have, the more time you're gonna need to spend.

So that's a reality. There's no such thing as a magic bullet. There's no such thing as a one-pill solution once. This is, again, lifetime management. And is there something that you need to gradually step into or can you just kind of jump into it full-bulk or immediately?

So good question. What would you do? Well, I would gradually step into it because if you just fuel a body with a huge amount of energy, a lot of stuff is going to happen immediately that can just overwhelm the individual.

Absolutely, totally correct. So we're in sync here. I have a protocol called going low and slow and we do this as clinicians, we do this all the time.

We get a sense of the person, we try a treatment and they react to it, then we back off and then we change the protocol. If we have somebody who's going gangbusters and you could accelerate that protocol, but you're always monitoring the results and changing the protocol based on the results.

So the protocol has to be determined by the person, not by you or me, not because the dose is so on by, you know, the pharmaceutical company says this is the dose.

Well, that's a place to start. So we're gonna do that, we're gonna adjust it. I biggest concern magnetic field therapy doesn't cause problems. Key rule.

It doesn't cause problems. It reveals problems. So if you're reacting, you're revealing problems. And so what you

do is you back off and you go low and slow.

You gradually have to figure out a protocol that could work for you both in the short term and then you adjust your protocol for the longer term and so on until finally you're, you're basically humming again.

So we have on the website, we have a blog called Going Low and Slow, which is also an appendix in the Supercharger Health Book. So going low and slow is very important.

Yeah, and I usually tell patients, you know, it's kind of like you have somebody that whole house is at disarray and all of a sudden you give them a huge amount of energy.

And so now things are pulled out of the closet, you know, things, all the projects are done and the living room is just a mess. Yeah, because they're just pulling out all this garbage from elsewhere.

That's the same in the body. You have all these toxins in the cells. You have tissue that needs to be repaired. And if you just throw a bunch of energy, all these toxins, all the immune system activity going after pathogens, all of that happens at the same time.

And that's just a lot for one person to handle. You're going to drive the body crazy trying to figure out what… So the magnetic therapy in this case then becomes another problem that the body has to deal with.

We don't want it to be a problem. We want it to be a facilitator, not a problem. So going low and slow becomes important. So I think consultation, this is why we offer consultations for people with cancer, because it's complicated.

And ideally, you know what else they're doing, and you know how to combine it, and you know how to time it. Because in some cases, you want to time the magnetic therapy.

Like if you're doing ozone, or you're doing hyperbaric, what's the timing? Which one do you do first? And how much do you do? Because you're doing something else, then again, you want to be maybe a little bit more careful with the magnetic field therapy.

Because one plus one doesn't equal two. Adding too many therapies at the same time becomes something the body has to cope with too. Yeah. Yeah. And that's why people like us exist, so we can guide them through that journey.

People like us who have experience and knowledge, it's not just knowledge, it's experience. And then the wider the experience, the better, because the more experiences you've had and the more tools that you've touched and used, the more you understand the place of each one.

Exactly. Well, Dr. Pollack, thank you for for bringing this message loud and clear. And, you know, because at the end of the day, you know, the challenges, all disease in some fashion relates to inflammation, mitochondrial, you know, lack of energy and lack of transport of nutrients, you know, circulation and have a tool that address all of that becomes really powerful.

And thank you for really bringing clarity into this field. Well, you're very welcome. The field. Yes, I'm in the field. Thank you. Thank you. I appreciate it.

I appreciate you having me on. We're asking great questions and having a great dialogue. Thanks so much. Thanks for joining me on the PEMF Effect. I hope today's conversation gave you new tools, insights, and inspiration to take control of your health.

If you enjoyed this episode, don't forget to subscribe, leave a review, and share it with someone who could benefit from PEMF therapy and holistic healing.

Your body has the power to repair, recover, and thrive. Sometimes it just needs the right charge. Until next time, stay curious, stay proactive, and keep powering up to better health.

you