Refining Your Approach To Cancer Treatment Transcript

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Introduction to Dr. Michael Karlfeldt

Welcome to the Cancer Breakthroughs Summit today. Is it delight to interview my dear friend, which I have a lot of respect for, not only as an integrative doctor, but as a human being that really cares about people.

Dr. Michael Karlfeldt, ND, PhD Michael is one of the pioneers and pillars of integrative ecology, starting his practice in Boise, Idaho, as early as 1987.

He is the medical director of the Karlfeldt Medical Center, where Michael really integrates pioneering treatments, cutting edge treatments from different parts in the world without forgetting the essentials and the different multilayered levels of our health, of our being and our healing journey, a lot of which he actually was able to put down finally, in his new book that just came out A Better Way to Treat Cancer.

Michael, as you all know, is the host of of the Cancer Breakthrough Summit with me. And Michael, I'm so delighted to talk to you. You usually interview me, so what a delight to interview you and for you to really share what you do.

How amazing it is to please, of course. Welcome to your own summit. Thank you so much. I think I need to revise my bio to what you just said. That sounded so much better.

I will think about bios not to read it, but just to get the sense you have about the person at this incentive about, you know, I'm co-hosting this with you and here I am.

I have an opportunity for you to tell your story. You always give it this really warm, authentic, supportive platform with so many other people. And it's such a such an honor to get to be interviewed by such a dear friend.

And yeah, so I'm really looking forward to this is going to be fun. Absolutely. So. Michael, do you want to share in, if you would, your path, how you got to where you got and what made you focus on integrative ecology?

Yeah, so I, I actually believe it or not, my, my initial path was to become a studying engineer, and I wanted to be a particle physicist at the accelerator at Stanford.

So I wanted to be one of those just to study small little things. And at the end of the day, I was thinking, well, you know, the human being is so much more complex than just looking at tiny little particles.

From Engineering to Integrative Oncology

And so to work with human beings and to kind of see the changes and people's lives and I had the opportunity was a gentleman as a father, like a father figure to me, as a leading naturopathic doctor in Sweden.

It took me under his wings and I studied with him for four, seven years. And that really kind of gave me that that true passion to see, you know, working with people and and seeing the changes in their lives and instead of just symptom management, which you do with pharmaceuticals, which, you know, have has its place, but to bring in natural agents, to really kind of look at the course and really turn on the healing and the optimum healing within the individual know.

So that was my first step. And my my second step was my, my father while I was here in the United States. And I didn't have that great of a relationship with my father.

He wasn't very close to it. You know, being German, I guess that that says a lot. But yeah, so we, we, I didn't find out actually that he had passed away until he Yeah.

Until six months after he had and he passed away from colon cancer and learning about his journey and learning what he went through. And it, it was just the regular kind of traditional oncology path and he just kind of withered away.

He was a big man, big, strong man, and he just withered away to nothing. And he really didn't have very many choices other than what was presented to him.

And my passion is to be able to offer choices so that people can can see that they're alternatives, you know, so instead of just doing traditional oncology, that there are other places to look in addition to or maybe, you know, their other pathways when traditional oncology is not a choice at all.

And that's why I wrote my book and that is why also I'm so passionate in the work that I'm doing and to really guide people towards health and especially cancer, is just a riddle that has been so hard to add to solve.

And so I feel that we as a whole need to step in and really bring in kind of like all hands on deck to be able to figure out what can we do to turn this around, because this is truly an epidemic here in the United States.

Michael, you've put it in such eloquent words, a really skillful, masterful integrative practitioner. Our role is to offer people choices and really present it in in in an objective without an opinionated way.

That's how you practice. That's how I think why we are drawn to to connect with each other. And it's really very different than forcing somebody conventional treatment or just alternative treatment.

And with options, there's optimism and there's optimism. There is hope and there is hope. Things do get better than when there is no hope. So in this in mind and really looking at oncology over all these years, what do you think of the current challenges in medical oncology?

Well, I mean, we've been dealing with and essence medical oncology hasn't changed much. I mean, we brought in you know, they brought in recently like immunotherapy that that's kind of the new wonder wonder direction.

They brought in a little bit more of the hormonal therapies, but in essence, the main components are still the same that it was back in the fifties. You know, they refined a little bit in regard to, you know, how much to give and when to give, but it's still pretty much the same.

And and we haven't they haven't really been as successful as as hoped. And that's why we are needing to look in other directions for other possible solutions and maybe how to understand cancer.

And that that's why, again, this summit and that's why, again, doing, you know, writing my book is to really kind of delve into the understanding of of cancer and the issue with a lot of the therapies.

Obviously, that that is offered for people dealing with cancer is that the therapy in itself is cancer causing and the therapy in itself is destroying the immune system.

And the therapy in itself is only addressing that, the fast growing cancer cells.

Challenges in Conventional Cancer Treatment

So it's not really the the ones that we really concerned about, you know, the the ones that are laying dormant and have protective mechanisms like the cancer stem cells.

It's really not effective against that. But it is giving patients a sense of that. They are achieving something when they see things shrink on the on the images, you know, because it's going after the fast growing cells and doesn't mean that that doesn't have any value.

But, you know, we've just seen after all these years that that is not the whole solution. So we need to figure out

other other avenues and other directions to go.

And that's why bringing this kind of information becomes so, so crucial. You know, I agree with you. And even if there are more certain treatments that are more effective these days, the basic concept of just looking at someone who has cancer, just looking at the cancer and not understanding the intricacies between the person in the disease, that's really an essential flow that is missing.

And that's really where we're to integration happening and understanding in science. We chose the more aggressive the treatment, the more the cancer stem cells survive.

Actually, just like when you attack a beehive, it's a queen that survives. You know, this year, supposed to reproduce, ending up with more aggressive cancers.

We see. So hopefully in after after chemotherapy. So maybe with this, you can a little bit highlight for us the importance of a multifactorial therapy and how you really see it.

Yeah. And, and that is that is become so important because we cancer is so complex and it's so multi level and it is something that you need to address on so many different in so many different ways and it's kind of like when, when a tissue I always look upon cancer as a loss of identity within that tissue.

But in order for it to to kind of separate itself from the rest of its environment and function independently, it is pushed far in so many different directions that may not just be that it toxins, there may not just be that there are certain, you know, pathogens, there tends to be also an emotional factor.

So you got to look at all these different levels on the emotional, the spiritual. You got to look on chemical exposure, you got to look on the immune system function.

You know, is it turned off too much is turned off too little. You know, what are some of the drivers that's really driving this cancer and you know what?

What how what's the mitochondria? What's it doing? You know, so you get a you get to surround that person with all these different therapies in order to be able to, you know, number one, if you're able then to shift and convert, you know, cells back to saying, hey, that, you know, I was wrong, you know, to separate myself from from the whole sort of say and and, you know, choose my own path, then, you know, we're able to then convert them into normal functioning cells.

Obviously, that is the most optimum and there are ways to do that. And then if the tissue in itself has just gone too far, then to support the body so that it more intelligently then can surround that cancer and go after cancer and kill it off as so.

And that's why it becomes important to look at it energetically, spiritually, emotionally, physically and nutritionally. And you know, so because it impacts so many systems at the same time.

Multifactorial View of Cancer

You know, you said something really, really important that they think it's worthwhile highlighting the cancer cells become metabolically different, become a cancer cell not out of the blue.

Something caused it to go on the highway in a certain way. And this is a two way highway where certain conditions can allow the cancer cells to go back into a normal that it always is a choice.

If the environment around the cells, the cells itself, we just get to a place where the energy production becomes normal, when the cancer becomes again part of a community, it will become a normal cell.

And this is fundamentally different than the conventional approach that we have to get rid of the cell and then we

do, as you and I know many times, but it's a dance between these two approaches, between creating harmony, and between the need to kill.

And it's really it's really what is needed here. And it's fascinating, really, to hear it from you in this way. And, you know, you've you you are very interested in photodynamic therapy.

You're one of the pioneers in this country. And really, it brings in generally the power of light in general, you know, and I mean, it's really what would create our reality.

And so maybe you can little bit share with us the science of photodynamic therapy. Yeah. And it's to me actually I'm fascinated by light because obviously to me like this so foundational and I think that as we talked about, you know, cells that are not getting the light or not, you know, spiritual, enlightened or energetically enlightened, you know, that's when they kind of lose their path.

So to bring in and light into the body to me is such a spiritual aspect in itself and so foundational. But the the photodynamic it is it's a fascinating science.

And I think that that's where when you deal with cancer therapies, we're going more towards like, you know, more targeted and more energetic type of therapies.

You know, the the photodynamic, you know, it's, it's the kind of the which say that the foundation of it is utilizing that. And if so, to sensitize her that you introduce those and you can introduce that intravenous orally, you know, you can do it interstitial where you kind of inject it into around the tumor.

And we do all those things at the cultural center and and the beauty with these photosensitive researchers, they then collect them into the in the tumor at a higher concentration.

And then if you have then oxygen in that tissue as well, you expose that then that to light and that triggers oxidation triggers oxidase of that cancer tissue.

So it becomes very targeted, it becomes very selective. And that way you are saving the rest of the tissue. Like if you would do chemo, you know, chemo would just go everywhere, you know, and in fact, you know, chemo.

I was talking to a friend, my medical oncologist, that says, well, we're lucky if we get about 5% of the chemo into the actual cancer, you know? So where does the rest of it go?

Well, it destroys all the rest of the healthy cells, you know. So we're weakening the the the host with photodynamic you're then everything gets targeted and your target the tissue that you need to target and then the rest know the rest of the light actually charges the healthy cells and turns on their mitochondria and they get stronger and they, they become less likely then to move in towards that that cancerous process.

So that that's the beauty of of what photodynamic therapy. So it's the challenge with photodynamic therapy has been that and it's something that's been around for a long time.

But the challenge has been to get to tumors that are not on the skin surface.

How Photodynamic Therapy Works

You know, it's been for like melanomas or any kind of skin cancer where you were able then to apply for the sensitized or externally against absorbed.

And then you can use laser directly onto the melanoma wherever it's at. So the technology that we use and it's that kind of next step where were then able to to access and get enough laser light then into tumors that are internally like lungs and pancreas and breast and lymph wherever it may be.

And so that we can get it enough to that location but also not forget that cancer is not just a localized disease, it is a systemic disease. So you have to address it systemically.

And so with that, your concern then about circulating tumor cells, you're concerned about circulating stem cells and cancer stem cells that are floating around.

So then to treat then the whole bloodstream, which you can then do with using that an optic needle that you introduce intravenously, you know, that becomes then is sterile and enclosed environment and you're treating the blood as it's passing by that optic needle.

And since the blood passes by each location in the body about once a minute. So 60 minute treatment, you treat the whole blood volume, you know, 60 times.

So here you're then treating the blood. And all this is circulating tumor cells, the cancer stem cells are floating by. You're killing them off, they're breaking up.

And then they have little components that are become visible to the immune system and then the immune system then start to recognize, hey, you know, this is what the circulating tumor cells look like.

This is what the you know, the cancer stem cell looked like. And they can we can then create an appropriate antibody response. So in addition to killing what's floating by, you're actually getting a personalized vaccine with what whatever is floating around in your body at that time, which is exactly the type of cancer that you're dealing with at that moment, because cancer is complex, it evades systems, it evolves.

And so to be able to treat it real time becomes becomes amazing, you know, and that these are some of the things that I think is just incredible with the photodynamic therapy and and the results I see is as pretty spectacular.

Amazing, really. It's amazing. You know, it's unique because light has the ability to potentiate the immune system and it has the ability to fight inflammation and it really is the recipient of and sale will be the one who will determine.

So in your practice, would you treat people externally and in the in the and using a vein. Mm hmm. Yeah. Yeah. So we we would hit it from several angles at the same time, you know, so we would do like, you know, if it's a breast, prostate, colon, wherever it may be, wherever we can kind of get it and we inject it then with a photo sensitize around that.

And then also you can inject like ozone or combination of hyaluronic acid and higher peroxide, you know, to get oxygen into that tissue in addition to other therapies like type of hyperbaric or we have something that's called the hot get or yeah.

So that you can oxygenate that tissue and then you can bring the needles and laser needles into that location to really get a strong concentration of that laser life.

Then within that tumor, to trigger down the oxidation of those cancer cells. So so that is the interstitial component. And then you can then also do the intravenous that I was talking about so that you you treat both at the same time.

And we have done several different types of lasers and we also have like a laser bed at, you know, like 800 watts. Yeah. To really can I get that deep penetration of, of the laser light so we can really turn on the oxidation and cancer cells so yeah, we, we try to hit it from so many different angles at the same time.

You know, people are busy, you know, when they get here. You know, it's remarkable because this surface skin and use of infrared and light therapy is really studied in in in in, in, in, in dermatology, you know, using photosensitivity there is actually in T-cell lymphoma, T-cell cutaneous can form and then melanomas, they make so much sense to integrate a systemic approach with a localized approach not only from the skin, but even injecting and coming with, with with the laser guide into the tissue.

It just logically it makes sense. And how free, how how many how often would you treat a patient with this treatment? So so we have people coming here because most people fly in.

So we have a two week intensive protocol that we that we run. And so they would come then on a, on a monday, you know, they get the filter sensitized.

There's Monday, Tuesday and this it's a certain type of sort of sir. One is nano and a liposomal non and ice version of ikeji as a good friend that a at a university in Germany that that created it and the beauty of it is that it accumulates over time and this stays in the tumor tissue for a longer period of time because that is that's one of the issues as well is that you you introduce a photo sensitized there and then you don't have it kind of washes out too fast.

So this one stays in the tumor tissue. It allows us then to treat it over a two week period.

Using Photodynamic Therapy in Practice

So then we would treat it with as much laser, you know, Monday through Friday, two weeks in a row, in addition to a number of other therapies like Poly MVA, DCA four and I work in on the the mitochondrial aspect and how the cancer cell gets energy their fermentation path vitamin C and artisan aid to trigger oxidation hydrogen peroxide production and also peroxide from the ion curcumin to shut down a bunch of cancer drivers ozone I. V.

And so we we do quite a bit that we hit at the same time in addition to detox colonics and ionic blood bath and laser energetic detox and working on the emotional component.

So we do sun bowl with your prayers. We do all, all, all the all the things that I feel that needs to be there in order to be able to really change the energy of that tissue.

And you're really using these tools to open the door for the for the photodynamic therapy to really do do its job. And what kind of side effects or risk do you do you have with these treatments?

The really the beauty of it is that there really aren't that there really isn't any risk there because you're bringing this light. And it's not a I mean, when when we go into the tumor tissue, then we kind of do it a little bit stronger so we can kind of hit it with a stronger laser.

So we'll be maybe a little bit of burning that you may feel. But we adjust that to comfort. But other than that, there it is just restorative. It's nothing like chemo or nothing like radiation where you have a detrimental effect for a longer period of time.

And this is we really don't see any kind of adverse reactions that at all. So and that is that is the beauty of it is that it's it's a safe as very effective it's restorative regenerative and it pushes cancer cells while then, you know, healing healthy cells at the same time.

This is this is really remarkable and important for the audience. Photodynamic therapy is based on science. You know, it is there's certain angles of photodynamic therapy are used in conventional oncology again and in much oncologic in the beginning, you know, if only for a few reasons, is the treatment used even for organ rejection.

So there is a balance of the integration of how to balance the immune system with it. So really amazing, really amazing job. Michael And it's I mean, if people would go like on PubMed and you type in photodynamic therapy and cancer, I mean, there are thousands and thousands of research articles and studies.

So it's not like like you mentioned this is not something that is new. It is just and it's something that's been heavily researched as and so we know the effect.

We know what it can do. We know that it kills cancer cells. And so it's just kind of utilizing clinically in the most effective way. Remarkable. Really good for you and for the patient, of course.

So, Michael, I know you're interested in PD and platelet derived nanoparticles is is a delivery vehicle for therapeutics so can you share a little bit with us this cutting edge treatment, what it does, how you utilize it with other treatments at absolute.

Platelet-Derived Nanoparticles as Delivery Vehicles

Yeah that that to me that is another kind of next step and in the evolution of integrative oncology. So right now I'm, I'm using platelet derived nanoparticles.

So what that means is that we're actually we're extracting blood from the patient, we're spending it collecting the platelets, and then we are bringing in therapeutic agents and that can be I Artemisia or, you know, artisan aid or it can be milked milk thistle, mistletoe or it can be a photo sensitize or it can be a peptide like by in Alpha one if you want to kind of modulate the microenvironment of the tumor so you can use any kind of agent or you can bring in key my agent like Doxorubicin.

That's been heavily, heavily research, you know, using this type of mythology. And so you mix that, you use that ultrasonic device where you make cells and as so that the agent becomes incorporated into the platelets and then you do a microfiltration technique to non and ice these particles to make them very small so that they have the ability to move anywhere in the body without any kind of resistance.

And we know that platelets are a attracted to any kind of inflammatory tissue and cancer, obviously, and the tumor microenvironment is highly inflammatory.

They send all these inflammatory signals. So these platelets will then be drawn, you know, to that location and then add the can. We also know that cancer loves platelets.

You know, they utilize platelets for their own good, you know, to create a create by fibrinogen. They create an environment using the platelets. So they will then gobble up the platelets and then whatever we have loaded the platelets with will then be kind of offloaded into the cancer.

So it becomes like a a Trojan horse. So if you would use something for, you know, like Doxorubicin instead of Doxorubicin, which is a chemo drug and going everywhere and only 5% going to the tumor tissue.

Now you have these these delivery mechanism that that moves all this directly into the tumor environment. So it becomes really an elegant way of doing things.

It's remarkable because you are really using that cancer strength and turning it into its weakness. You know, cancer excrete what we call sticky molecules like Integrins and the integrating the ugly galectin three.

Those are involved. They help to account for the platelets to stick with tumor cells. The metastatic process has to use platelets. You know, most of the initial metastases are platelets.

And we give a lot of growth factors in the platelets. And really what you are doing, you're letting cancer have the platelets, but once they get it, they have a surprise.

I really I love one the concept but again it's logical use it tumor's strength, it's weakness instead of just fighting it. It's really what what HP is about, right?

I mean, really, I love it. So wow. It's really thank you for highlighting two unique ways out of your arsenal. With everything else it is even some it is commonly used, not commonly used.

And I can see why you are getting the results that you get and of course you are spearheading the whole energy around it. So Michael, tell us a little bit about your book.

What made you write the book? What the book contains. I know I, I read it. I endorsed it. I think it's it's a must for

cancer patients. It really gives the roadmap I'm kind of answering a little bit.

But please tell us really why you wrote the book. You know, there are many books about how to treat cancer.

Why Michael Wrote His Book

And what does a book offer that you feel is important for the cancer patient and for the practitioner? Well, and to me, and it's what we've been talking about is that cancers, such a complex disease and it there's so many components that needs to be considered and needs to be addressed when looking at cancer.

So I wanted to kind of dig in a little bit deeper into all these different factors in regards to, you know, really what is cancer. Because I think a lot of people that have cancer or are concerned about cancer, they don't have that deep understanding of what it is.

They just look upon it as an entity. You know, it's me and the cancer. There's a separation and I just want to get rid of it and kill it, not understanding, you know, what is it that we're dealing with?

And it's like with anything, if you have an enemy or you have a friend, I mean, you need to understand how they function in order to be able to be effective in any kind of engagement with, with and within that relationship.

And I look around that, assess the relationship. So you know, so first and foremost, I wanted to really kind of paint the picture of what is out there in regards to the understanding of what cancer is and a in a way that is as complex and simple enough.

You know, I didn't want it to be too much fluff. I wanted to have enough substance, but still so that people could really understand what it what it was all about.

And then once understanding that, understanding the different components that are important to address and and and how to address them, you know, like immune system.

What how does that relate to the cancer? You know, because cancer utilizes immune system for its own good. But at the same time, we want a strong immune system in order to be able to, you know, to battle cancer.

So to understand, you know, what is the gas pedal on the brake that needs to, you know, needs to be applied? And also, obviously, you know, how do we integrate things with conventional therapy?

You know, because all convention, all therapy, I mean, they it has its place. And to understand what is the conventional therapy and how would we be integrated?

And then also understand more of the spiritual and the emotional and the traumas that also drive than the cancer process. So you can then reflect and ask questions about yourself and understand, you know, what kind of questions should I ask in order to be able to be effective?

And the treatments that I do, because many people they keep they it's kind of like they look upon their body as a car almost, and they just drop off the car to their oncologist here, just kind of fix my car and and can I pick it up on Monday?

And instead of going deeper and learning the lesson that cancer is really bringing to them and look, understand, you know, why is it there? And I feel that that is more of how we can then really resolve this issue and and all these things to highlight in the book and very practical ways, you know, so that people can can be more effective.

And I feel that we just need to address it in a better way. Yeah. You know, so well said because if you just use it technologies, the conventional, the complimentary, then it's a bunch of trees and we don't see the whole forest.

How to Reach Karlfeldt Medical Center

It's really when we have the high level view and understanding multifactorial that these tools can be tailored and fine tuned for better results. And I know it's your philosophy and you really delight me to see how you're putting all of this into practice.

And Michael, how do people find out about you? How they can reach out, especially to your medical center? Well, they will have a lot of information at theKarlfeldtcenter.com as so it's theKarlfeldt my last name center.com.

And we do offer free 15 minute consults for for cancer patients you know that want to see if they may be a good fit for the therapies that we offer. So you can just call or email us.

Our phone number is on the website. And we also for you know, I in addition to the book that that I, I yeah, I'm very obviously very passionate about it.

We also do I also do podcast called Integrative Cancer Solutions and their links on my website for that and where you get to hear stories about patients that have gone through integrative cancer care and how they were successful, what they did.

Yeah so people can you know, that are diagnosed, they can heal real care, real stories from real people instead of just kind of theories of what's written by, in books, but just hear real life stories of what they did, you know, that, you know, and so that they can feel that if that resonates with them and incorporate that into their care.

Michael, thank you for the opportunity to interview you and thank you for being the driving force behind making this summit happen in the summit. We helped so many people. So really thank you.

Thank you very much. Thank you so much. It's been an honor. Always an honor.