What If You Could Starve Cancer Safely? Transcript

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Summit Introduction and Guest Welcome

Hi, everybody. And welcome back to our next session of the plant based Cancer Summit. And we're very excited about the information that we're projecting in the and the people will have joining us.

And today we're so thrilled to have with us Doctor Joseph center Joseph Anton, he's the CEO and chairman of the of the board of neutral of l Neutral Income Inc..

And after Anton, he drives l nutritious groundbreaking health and longevity initiatives and under his guidance, l neutral has emerged as a trailblazer in biotechnology, leveraging the power of fasting, mimicking diets and optimal nutrition to maximize health and longevity. And, you know, my work and, you know, is rooted in research.

And he's a he's a researcher who's done a lot of work in this field, who's he's been over two decades of rigorous clinical research sponsored by NIH and also by the, conducted at USC Longevity Institute.

So getting a lot of work done and we're seeing that people can really change the trajectory in their future and control their health destiny. So doctor Hunter, thanks so much for joining us today.

Thank you, Joe, and, thank you for inviting us to this summit. And thank you for doing a summit. Summit like this one. Not a lot of, you know, are MDS and and PhDs, but a lot of the conventional medicine is not addressing lifestyle medicine and plant based medicine.

And it's not a side topic today with the science that we have, it should be at the core of the discussion between doctors and their patients, or at the core of preventing or decreasing the rate of onset of chronic conditions.

So this is this is the new health care. Yeah, absolutely. And I, I had to do this summit because, you know, you have both conventional doctors leaving out any type of, of the major.

Like the most powerful thing people can do is improve their health and nutrition. And then you have the alternative community confusing people with all types of crazy recommendations and moneymaking scams and the things that really work are left.

Why Nutrition Belongs in Cancer Care

And how are the people going to interpret what's the scam? What's the sell? What's the magic Ivy you're getting? And and that's were heavily treatments, you know, in the apricot pit.

Well pits and all the versus the really stuff that has the research behind it, you know. So I'm hoping to make this to clarify things here and to give a different voice, you know, you know, 100%. Right.

The conventional medicine is open to anything that can have I mean, every oncologist is open to any. They can help his patients. The problem is the clout of books and marketing and ideations that govern what's on social media and what's being pushed on people.

And unfortunately, the amplifies that reach more people are the ones less embedded in science and the true scientific ideas and values don't get transmitted.

So doctors like yourself is a good filter and is a good, you know, promoter of the of the credible evidence based medicine and, and and so happy to share a lot of those, outcomes that we uncovered through throughout over now 23, 25 years researching plant based solutions for cancer, for diabetes, for Alzheimer's, etc..

Yeah, terrific. So let's get into it then. So let's say first, first of all, we know all the things we can talk about it later about preventing cancer.

But when a person gets a diagnosis of cancer then they're faced with the decision to either, you know, the chemotherapy may be indicated an aggressive cancer, it may be an a slow growing cancer. It's not indicated.

But still they get this diagnosis. And let's say they they're they're a type of cancer where treatments might be indicated. Then what could they dive into and cooperate with their treatment or in conjunction with the treatment to make it more effective and less toxic, you know? Yeah. So that's a critical question because, you know, once you have cancer, cancer is a cell that replicates with that with that stoppage.

Right. It's not with losses inhibition. So it keeps growing once once it grows locally it goes everywhere in the body as well. So what I'm trying to say is is the fastest growing organ when you have it and it requires nutrition to grow.

And there's a wrong ideation within, within the community in general is like, oh, if you have cancer, you're going to lose weight because of chemo. So make sure you eat a lot of high proteins and eat a lot of meat to eat less it the more you bring nutrition that supports that provides very high spikes of insulin, meaning a lot of short, short, little bit short carbs.

Right? A lot of because a lot of sugar or a lot of protein, especially from animal sources. So you're spiking IGF and other growth factor. The more you're over nourishing, the more you're nourishing.

Cancer, right? Cancer. Cancer is the fastest growing again organ once you have it. So the big challenge we have in nutrition is how can I nourish the body and give the body the minimum without over triggering the growth of cancer?

How can I also play with nutrition so that I, I instigate, I induce immediately to better attack cancer. And how can I play with nutrition to make cancer less equipped to resist when the chemo or the immune therapy or the tyrosine and whatever therapy the patient is getting. So.

And number four, how can I use nutrition to protect the normal cells of the body from the side effects of the treatment? So these are the four goals. Nourish the body without the cancer.

Do not over accelerated cancer growth sleep immunity against cancer and protect the normal cells from the side effects of cancer. Then guess what? We can do this with nutrition.

And this is what we have specialized for 25 years. And we call it a differential stress versus a differential separation in the body between what cancer needs and likes and what the normal cells with needs are like.

So let me let me talk about all this.

Diet Strategies to Avoid Feeding Cancer

The first thing I had to eat on a daily basis when you have cancer and I'm going to talk high level, I cannot specialize because cancers are different and people are different, and then starting weight is different.

I'm just going to give general themes right. So scheme number one you don't want to increase. You don't want to spike insulin and growth factors in the body.

And you don't want to over nourish the cancer. So the the general food that you want to eat is based on complex carbs. So you know, over spike the incidence, the healthy fats, because fats do not increase neither insulin nor IGF and protein sources try to go plant based because animal source of protein would spike IGF big time, which is what cancer loves to grow.

So and again I'm generalizing. Nobody here takes me to the it's always has to be tailored and under the

supervision of the. That's a bit of general feed right. Okay.

What are other ways to not excite or accelerate cancer is not we're going to start touching a little bit on intermittent fasting and limit the prolonged fasting. Right.

Going back to what you were saying before, you know, there's an article published in Jama oncology 2016. Okay, Jamal Khashoggi is probably the second or third, you know, the highest impact.

And, when it comes to the ecology field and it shows up in thousands, I think it was 8000 women with breast cancer. It's a huge data. It was observational.

But he just looked at them at who eats within 11, 11 hours period, meaning they're fasting for 13 hours and who eats within that. So who extends the overnight fasting by, say, a couple of hours just for having 13 hours of fasting versus those who eat with less than they eat over 12 hours.

So they're not they're not spending 13 hours. As I said, there was a statistical significance in the degree of cancer recurrence with people, with the women who were eating within an 11 hours or less window, so their fasting was 13 and plus hours.

Statistical significance. On top of that, every extra hour was correlated with a lower, recurrence rate of cancer. I mean, as simple as that. Is that because you're less frequently nourishing cancer, right?

Again, for everyone listening to us cancer lawsuit, cancer loss growth factor. The more you give it to the number of time you give it and the number of posts you give it through food, cancer will grow faster.

So it's always amazing to me how a journal anthology article on 8000 plus female. This is like this is like phase four. You in the biotech world. It's a huge trial.

It's observational, but it shows you such an interesting thing to just go 13 hours or more when you have breast cancer. Breast cancer is a cancer that female increase.

Wait, so one of the rare cancer when you gain weight as a woman when you get it. So even better this on the metabolic perspective to do the 13 hour task.

But just to give one example of how to slow down a little bit, that takes extra nourishment. And except for the cancer. So I mean, think we can talk about what you said already, and I know how much I know how much you know about my work, too.

But, you know, the American diet has animal fats and oils, is a source of fat, and we use nuts and seeds as a source of fat, which then contain which contain protein as well, but not high amounts of protein come in.

And so we're doing low glycemic fat adequate protein adequate. But with the right combination of plant foods. So you can be relatively low glycemic without spiking the animal protein, but too much in the blood at one time, which then we call it the caloric rush.

Too much sugar, too much fat, too much oil coming in so fast spikes the calories in the blood. And that, of course, creates an overgrowth, the raising of IGF one, all these things you're saying.

So they were were putting together and then combine that with this earlier and later dinner finishing dinner early. Right. So you have like four hours of time where you haven't eaten calories before.

You had a better night.

Intermittent Fasting and Overnight Fasting

So you're sleeping on an empty stomach while you're not digesting and reflecting food up, because obviously you have more immune function healing. And when you're getting your full benefit from sleep.

So you're talking here about, the science that makes the recommendations, what the recommendations are built on. And that's what we're trying to get people to eat within that narrow window and not eat after 5 or 6:00 at night.

Yeah, yeah, it seems to agree. And everything you mentioned, and even what you mentioned at the end, I call this, we call it the front end, the intermittent fasting.

We don't like people to stay during the day with other foods because you need to nourish your essential organs. We like them to finish dinner early, right.

And then go. And there's a lot of explanations. You mentioned the reflux, the immunity, the inflammation. But again, at night your growth factors are up.

So you're this when your anabolic this is where the body likes to store. And this is where the cancer gets nourished. So you want you want you want the body to sleep.

And it's not spending calories on a low calorie setting. You want to see the body during the day, what it's spending the calories. So that is not an over push for the so we beyond the beyond the general guidelines of nutrition that we talked about when you have cancer, beyond intermittent fasting, we studied and we're the most excited about if you go longer on fasting, what happens because we said cancer, cancer, love the food because it's the cell, the cage.

Supplicating. And there's one thing that we took advantage off is cancer doesn't know how to stop. So when you fast the body, the normal cells of the body, they know how to stop replicating.

They stop mitosis when there's no growth factor. It's a it's a part of the body protecting itself against prolonged fasting cancer. Doesn't it know how to do that?

By definition cannot respond. But by stopping the replication. So it's like somebody running a marathon is goes under nutrition cannot stop, cannot take a break. It collapses.

So we started studying. Hey, if I go one day to day, three days without food, is the cancer so vulnerable, is so starving but cannot adjust to it? And then when you bring chemo on day three or 4 or 5 where you bring immune therapy, whatever therapy the doctor prescribes is that the super weakened, super sensitized cancer that can then defend itself and cannot resist.

So when you talk to other colleges, their biggest problem is cancer resist. And then there's a lot of side effects. So they have to decrease the dose or change the therapy.

But if you can maintain a very high toxic dose of chemo on the body while the cancer is getting most of it and the normal cells, so the normal cells of the body, when you fast them, they know how to hibernate.

And you know, chemotherapy kills cells and replication. Right. So by fasting the body on a longer period you're weakening cancer and cancer cannot resist chemo.

So you can give a higher dosage. The normal cells are off mitosis so they're not impacted by the chemotherapy. Chemotherapy is a weapon of mass destruction.

It kills everything replicating. Right this way you lose hair replicate spots on those white blood cells. So now you're protecting this side, this newness from the side effects.

You're sensitizing cancer. We call this phenomenon a differential stress resistance. These are differential stressors. This is it was described by Walter Longo, the founder of our company.

I know you're going to interview him as well. And he just launched two weeks ago his book on cancer, fasting cancer. It's called fasting cancer. That's a big book for people to read.

Prolonged Fasting, Differential Stress Resistance, and Chemo Support

It describes how you can eat around cancer and by chapter by this intensive breast cancer, colorectal cancer, etc.. So it's a very important read called Fasting Cancer by Valter Longo.

So what we have to uncover as you go along, you're sensitizing cancer. You're protecting the normal cells from the chemotherapy or the side effects. And what we're seeing is a rejuvenation of the white blood cells.

We know that every time we assess is in regeneration. The body regulates the white blood cells. So now you're bringing in an acute setting a new set of white blood cells.

They attack cancer. So what we have shown on biopsy is that there's a higher infiltration of what else. Immune cells in the cancer. And so you do the prolonged fast.

So now we had the tree that we want. We can cancer protect the tumor cells and rejuvenate immunity to better attack cancer. We okay. Let me let me see if I can, get you to be more specific here.

So we want the body to actually, we don't want ketosis long term, but we probably want some ketosis short term around chemo. So it takes probably 36 to 48 hours to get into ketosis with fasting.

So what are you doing? You know, strict fast. You know, either you know, pure fasting or or a modified fast to get a person in ketosis. So we're saying like the two days before or because it takes a couple of days to get into ketosis to really stress out the cancer cells.

So we're talking about two days before the chemo was given to be either doing fasting or at least a modified fast. The person is like taking steroids with the chemo.

Maybe they're worried about the steroids irritating the stomach lining, how to take food at certain times, but at least they should be severely for restricted or total fasting for the 48 hours the day of chemo and then one day after the chemo was given.

Is that so? It's like a four day fast, right? Yeah, it's a four day fast. We'd like to stack it before the end. The day us to say that again, we, we do four days before, four days before and the day off. Why?

Because the immune. So yes, you can start cancer with 2 to 3 days. Yes. You can, protect the normal cells from from the side effects the hybrid in. But if you want to regenerate immunity, it means the immune regeneration happens after day three of fast.

So you need a little bit of a deeper fast. So what we do we do four days and the day off. And of course we don't want people to fast on water for four days.

This is why this is we were a water fasting research company and then we developed the fasting mimicking nutrition. Exactly for this reason. And what people don't know, Joel, is the fasting mimicking diet was born for cancer patients to not water fast.

And we were not a prolonged people no less. And the prolonged product the five day fast. Maybe that's the story. The true story of our company is when we discovered that four days after fasting gives you 4 or 5 days, gives you real good benefits for the for for cancer patients.

Or we wanted to test that. We knew in mice. In mice, we took the cure rates from 36% to 93% and multiple cancers just by doing in animal data, you only do three days because they have high metabolism, which is equivalent to five days, 4 or 5 days in humans.

But we went to do the human trial and water fasting with Mayo Clinic and both of us, we couldn't recruit more than 30 patients in one and a half years because nobody wanted to water fast for 4 or 5 days.

Wait, I'm talking. This is 2013 to 2015. It's hard to get people want to water faster. And so we showed our data that in mice that we can cure cancer in mice again in humans.

What we will tell you the results in humans. But it was getting, say, free, free cancer free survival in mice from 36% to 93%. And so the NIH gave us, they gave the research lab at USC behind this, $10 million, then another $10 million and gave us directly as a company, $3.4 million to accelerate the development of the fasting mimicking diet.

So the patients are eating something over 4 or 5 days while they still the cells still in a, fasting mode. And this is how the fasting mimicking nutrition technology was born.

It's a plan based, super precise nutrition formulation that we have studied now for, for 13 years, $48 million in research with and last 18 universities Stanford, Mayo, USC, UCLA.

And they did the randomized clinical trials on the fasting mimicking diet to make sure it mimics a fasting state on the body. One actually, now the patient is eating food.

So today we are against people fasting on water for several days. Were also fasting for 12 hours, 13 hours. We talked about anything that goes for several days.

Do it with nutrition in fasting, mimicking nutrition. You call that the modified size and this is the healthier way. It's a more acceptable way. It's it's the most safe way and compliant way to fast before the chemo.

And then they're not going to have these side effects. We have to take any drug that can be irritate their stomach lining in an empty stomach, either many side effects or at least a slow grace you if you only do water fast headaches.

The body. The body is in pain when you water fasted lead. So when you do the fasting we recognize your urine a much better. You're you're about 500 calories a day or under.

And what about the grams of carbs? Because we want to be in ketosis for the fasting, they may be like a 20g of carbs a day, but it would give me a little bit of a guideline.

What you. It's a little bit, you mentioned the ketosis a few times. It's different than the ketogenic way. The ketogenic diet has to go super low on carb because it has it contains proteins to a certain amount that the Tor pathway detects, and therefore the cells don't don't rejuvenates with the ketogenic because they're detecting the proteins.

So I'm fasting mimicking like we don't have to go this low in carb. You don't have to even get that low. Right okay. Yeah. We we measure that. We balance proteins and sequences of proteins.

So we studied special sequences of amino acids that don't trigger the tau receptor. And therefore we didn't have to go this low on carbs. We were where oak were low.

But but okay on carbs. So that and we have we have a there's a lot of specificity which complex carb which part of the day incident is higher in the morning versus in the afternoon.

So there's a lot of and and the and the added and the added other you know fats and sources together when, when the fasting when we can light is ingested in the body when the patient is eating and there's no insulin spike, no IGF spike.

And then when it gets to the cell it doesn't trigger the nutrient sensing pathways. The cells do not sense the food the tau peak and the rest pathway.

So different formulation. And the ketogenic diet. As you mentioned, ketogenic is for every day.

Fasting-Mimicking Diet Research and Clinical Trials

We're not big supporters of the ketogenic every day because it's it's it's good for blood sugar, but it's not as good for the cardiovascular system and everything we study.

We tried to give you the max effect on the short term but allow you to also rebalance that. So yeah, I'm very clear about the ketogenic diet also being not good for cancer patients for long term.

Only if you even if you go in ketosis with this fast right before the chemo, it's that long term it could push cells to sloughed off the tumor and encourage metastasize.

That's you right. But if you want to regenerate the cells, especially immunity add that immune. It's like the immune that'd be in the market. You can add that immune attack which we have shown on biopsies is a big immune attack on the cancer cells.

And we just published actually last year and the first ever overall survival. We have an OS now. Triple negative breast cancer extending survival very aggressive triple negative.

We extend the survival of some, 17 months on average to 30 months. So a full year of gain. And when you do the biopsies you see a much bigger aggression, some some immune cells into the cancer.

So you need that triad to impact not just the PCR, what we call the PCR, which is unbiased. You're seeing if you have, a free a cancer free biopsy that's the short term output, but it's going to impact overall survival.

Again, one trial only that looked at overall survival. We have strong data on PCR, but on OS overall survival we only have one article. So I'm not here to claim that people should do it in the live longer.

I'm reporting the science and the excitement that we're seeing now in the early trials on this thing. But but it's important for us to say, yeah, the first thing we can write is different.

I think it's a deeper farce. It's a play on both protein and carbs, and it's a play on the nutrient sensing pathway so that the cells not only not sense the food, but they rejuvenate and regenerate in order to better attack the cancer.

So we want to and we want to, protect the normal cells with enough restriction to. So what? So where would you say you could? You mean you tell me the caloric range of what you're striving for in the days before chemo?

Would this be in the fasting mimicking state? Yeah, we try to be first to, well, it's it's a it's an issue if I share because I'm reaching all of the patterns and the and the sequence in here.

And also a lot of people were to die and then they don't regenerate and they get bad results. And in the past we published actually we published in in detail this and what we've seen is a lot of doctors and dietitians started doing it and it doesn't work.

Even Mayo Clinic tried to do a full research on it, and they couldn't do the DIY, and it didn't work. It took us till $48 million to really get to that precise be.

It's not just a proportion, because how about the how about the survivors? How about the day, the time of the day? What you eat in the morning is different and differently treated by the body than what you eat at night.

So we follow cortisol and insulin spikes. We follow the activity of the day and we follow each. Cancer is also a little bit different, right. And I'm not saying this to, to again for people here to sell the founder who's the high shareholders all along the donated all the shares in the company.

So we are almost pre donated as a company to the Cures Foundation. My view is not to go and sell extra legs at this is to give people what was scientifically tested and and the scientific method is the fasting mimicking light, as is with all its specificities.

And to ten years those how those outcomes so. Well good. Yeah. And obviously I've spent a whole career on this working in the field freaking care of cancer patients.

That's and getting, you know, astonishing results with. Because that's what we see because obviously people may survive at the beginning after chemo, but then even five years later or eight years later, they can get recurrence of the cancer from some cells that escaped the initial treatment and that recurrence, these cancer cells are now replicating or untreatable, less responsive to chemo, and then they ultimate have a secondary cancer, the recurrence that kills them.

And that's what we're seeing where we're getting people to not get those secondary recurrences to be able to live ten, 15, 20 years without having to turn to the cancer, because the body of the stray cells that escaped the initial tumor.

Yeah. Are not coalesced into a mass, and the immune system can better attack those and not be weakened by the standard Americans and oncologists get this wrong, right?

The entire just don't utilize nutritional nutritional excellence hundred percent. I mean, we're very happy with ten years ago when we talked about all this, there was no there was no echo within the doctors because oncology had many mainstream colleges.

But then people like yourselves and now all the big hospitals are killing those integrative oncology department. Right. And they're starting learning how nutrition and how stress, how sleep, how meditation can impact cancer.

And we're not talking it's not like what the most doctors would tell you today, oh, eat healthy or yeah, I'm all I'm all about whole food. You know, it's all great. Like it's not about that.

We're talking about part of the therapy. We're not talking about us. Hey, just just do no harm. We're talking about a lot of therapy.

Plant-Based Protein Products and Practical Cancer Nutrition

So we're very happy today to see all these negative and functional oncology and other problems being created. Top up, medical centers and and why I'm saying this because you know what we're talking about today, whether it's the fasting, mimicking diet or eating healthy every day.

And we are developing like we develop the longevity protein, but a lot of women, we've we never shared this with you before. We have we have something called the L protein.

The longevity protein. And it was developed between us and the cancer Center Institute. It was working is we're set up seeing seeing people drinking ensure and boost away protein and animal just defeating cancer first and then feeding the cancer.

Right. So we spend millions of dollars sitting and researching sequences of amino acids within the plant based cancer. So you rightfully recommend to your patients to go plant based because it's spikes less eggs.

We started looking specifically within the plant based. What a we created a subcategory that even spikes IGF cells that even have a special within the plant base that even super under spikes spike the IGF further.

And we patented this as well. It's called the longevity attrition. It's a product that has 25g of protein. So anyone minerals and vitamins. It has, extra virgin olive oil and the patient can take it.

It will help them protect their muscle and their activity and get the proteins. But within it would it over spikes IGF as if they're drinking whey protein.

Are you're using is it less in the in this one. If that's one of the that's one of the thing. But there there's there's more of that. There's more of that.

But that's one of the things we also have a fast bar in the morning. I'm passionate a lot about the fasting, the fasting bar, because this article that I mentioned on Jama, if 13 hours, if just an extra hour and every extra hour had a statistical significance in their occurrence rate, I mean, that's mind blowing because it's it's easy for doctors to talk to their patients about this is it makes sense that if you're not always eating, you're not always nourishing kids.

Right. So it makes sense when you start that answer intermittently, little by little, it can that it cannot grow that fast. We we developed a product, we called it the fasting because we we know how to mimic fasting with food.

Right? It's called the fasting bar. And I'm not positioning this for patients to take it. And as part of any cure or any promise under undergirds, but at least things that make sense.

It has healthy fats like is exactly what you describe healthy, fast, the plant based source of protein sequence, a little spike IGF, very low glycemic index.

So you don't push incident. So basically in the morning, instead of eating a breakfast, it's full of carbs and proteins in the fasting. Why your blood sugar is not spiking.

We have a randomized clinical trial showing it's flat as water. You'll see the water line and the fasting blood line and glucose parallel, literally parallel.

You see ketones statistically also the same as if, as if you were simply ketosis. And people, at least in the morning, nourish themselves because the, the cancer patient, you know, loses weight.

You want to nourish them more from healthy fats rather than from high proteins and high carbs. And I'm passionate about those products. I'm not. Again, I'm here to mention them as part of therapy, but it's far as cancer nutrition.

If I'm a cancer patient, this is the lifestyle I want to have to support my doctor's prescription to support the standard of care and that go and listen to the marketing based companies and drink all these super high protein, high sugar things.

It's thinking that I'm losing weight. I should pray that you're feeding. Cancer is the fastest growing organ. It will suck your food and your growth factor the first.

So you got to make sure you don't over trigger it. You know, good points. Of course we know from, you know, decades of experience that when people's neutral, when their diet is poor, with mostly processed foods and animal products and they're deficient in phytochemicals and antioxidants, then they feel more uncomfortable fasting or not eating, or they want to.

They have to overeat or keep the body putting extra calories in because they both are. So the cells are so nutritionally depleted and they have so much buildup of toxic metabolic waste.

So almost the detox becomes overwhelming. So they have to overeat to prevent the detox. So it's what I'm saying right now is the healthier a person eats, the more comfort and ability they have to control their calories in a favorable range.

And to do the fasting when you need when you need to do it for a therapeutic reason in.

Closing Remarks and Future Collaboration

And again, going back, I agree with what you're saying and I want to go further with this differential stress of this is because when you protect the side effects of chemo, then you don't lose the appetite.

You don't have all these signs so you can go back to eating again. This is the beauty we're trying to make sure that this patient, the the weapon of mass destruction, whether it's chemo or is dealt, is mainly targeting the cancer.

While the body is rejuvenating immunity and while the body's protecting the B cells. And this is how the fasting mimicking light is designed to do and support, so that then you gain your appetite back faster and you go and eat back, and you don't have to go all the way to cachexia.

And that's that's the beauty of this. While when you go back to eat the the patterns that we talked about, you do intermittent fasting front ended and you do some, you know, the right proteins and the right, and the right bars and the right formulations.

Yeah. All right. Well, thanks so much for your input being part of this. And although actual work and science and research you've done over the last few decades really appreciate that and glad you're being part of this.

Now, you could do great. Well, I'm looking forward to continue relationship, talking about this and working to help people with this information to thank you.

Thank you. All right. Take care everybody. Thanks.