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The Cancer Expert: "This Common Food Is Making Cancer Worse!"



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Dr Thomas Seyfried is a Professor of biology, genetics, and biochemistry at Boston College. He has over 150 peer-reviewed publications and is also the author of books such as, 'Cancer as a Metabolic Disease: On the Origin, Management, and Prevention of Cancer'. [00:00](#) Intro [01:59](#) What Would Dr Seyfried Say He Does? [02:37](#) How Much Of A Problem Is Cancer Globally? [04:30](#) What Types Of Cancer Are People Dying From? [05:02](#) How Many People Will Develop Cancer? [06:56](#) Where Does Cancer Rank In The Probabilities Of Taking My Life? [08:12](#) What Is The Fermentation Process? [12:16](#) How Have You Arrived At This Conclusion? [16:52](#) Why Do Cancers Grow So Rapidly? [19:17](#) What Are Ketones? [21:23](#) What Can We Learn About Cancer From Our Ancestors? [24:36](#) What Role Does Exercise Play In Fighting These Diseases? [00:25:44](#) What Lifestyle Choices Are Causing The Cancer To Develop? [29:07](#) Is Cancer Genetic? [31:09](#) How Do We Keep Our Mitochondria Healthy? [32:42](#) Is Cancer Genetic? [36:27](#) Why Haven't Opinions Changed Based On Dr Seyfried's Evidence? [38:27](#) If We Adopt This Mindset, What Will Happen To Cancer Statistics? [39:17](#) Are The Current Cures Working? [00:41:50](#) The Current Technologies Used To Prevent Cancer [49:10](#) How Do We Prevent Cancer? [51:06](#) Should I Be On A Keto Diet? [54:57](#) Dr Seyfried's Dog Study [57:14](#) Human Cases Of People That Have Followed Your Research [01:03:39](#) What Is Metabolic Therapy? [01:04:36](#) What Should Someone That Has Cancer And Is Listening To This Do? [01:07:52](#) Keto Plus Hyperbaric Oxygen Study [01:11:57](#) Can You Have A Pre-Disposition To Cancer? [01:12:28](#) Should I Restrict What I Eat, To Stave Off Cancer? [01:13:16](#) What's Your View On Fasting? [01:13:58](#) How Do I Get Into The Keto State? [01:17:10](#) Do We Need More Discipline? [01:18:36](#) What Happens When You Fast? [01:20:52](#) What Advice Would Dr Seyfried Give To His Kids? [01:22:14](#) Why Isn't Dr Seyfried Trying To Be Metabolically Perfect? [01:23:04](#) What Food Laws Would Dr Seyfried

Introduce? [01:25:18](#) Is Dr Seyfried Hopeful? [01:28:14](#) And What If You Are Successful? [01:29:10](#) Are There Any Studies That Have Broken Dr Seyfried's Heart? [01:30:50](#) What Would Dr Seyfried Say To Someone Listening? [01:32:55](#) Guest's Last Question You can purchase Dr Thomas' book, 'Keto for Cancer: Ketogenic Metabolic Therapy as a Targeted Nutritional Strategy', here:

[https://g2ul0.app.link/1FotHad2pNb Fo...](https://g2ul0.app.link/1FotHad2pNbFo...) Dr Thomas: Instagram -

<https://g2ul0.app.link/cwAePGF1pNb> Twitter - <https://g2ul0.app.link/0yuLM6l1pNb> If you found this information helpful, please consider donating to support Professor Seyfried's cancer metabolic therapy research. This can be done in the below ways: Professor Seyfried's Biology Department -

<https://g2ul0.app.link/qqiEVKOUfOb> Foundation for Cancer Metabolic Therapies -

<https://g2ul0.app.link/urNJEbUufOb> A message from Professor Seyfried: "Please consider a donation ONLY if the information helps you. Your donation will keep our work moving forward." 🌟

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cancer is very preventable when the medical establishment acknowledge what I know about this disorder what's causing

0:05

it and what we're not doing to prevent it or treated it it will be recognized as the greatest tragedy in the history

0:10

of medicine Thomas CA freed is a professor of biology genetics and biochemistry who has dedicated the past

0:16

30 years Gathering scientific evidence on what could be the true origin and prevention of cancer cancer is getting

0:22

worse and there's no major advance in reducing death rates and I can speak to the reasons for that all major cancer

0:29

research PL think cancer is a genetic disease you believe otherwise it's not whether you believe it's what the data

0:34

tell us and the evidence is massive to support that cancer is a metabolic disorder and the problem is we're doing

0:40

everything we possibly can in our lifestyle to induce it the scientific evidence is there like for example we

0:46

know that cancer was extremely rare in African tribes that were living according to the traditional ways but

0:52

when modern lifestyle entered into their societies cancer out of control we even did a study on THS we know that wolves

0:58

in the wild don't die from cancer but cancer is the number one killer of domestic dogs why it's because of our

1:05

lifestyle issues and a lot of us are doing things without the knowledge that it would put us at risk but with

1:10

metabolic therapy you can use it as both a prevention and a treatment and we're seeing more and more of terminal cancer

1:15

patients outliving their predictabilities because of this and let me tell you one thing and remember it if you do metabolic therapy you can

1:22

actually reduce risk for cancer you can take away the fear and when you say metabolic therapy tell me what those

1:27

things are number one before this episode starts I have a

1:32

small favor to ask from you two months ago 74% of people that watched this channel didn't subscribe we're now down

1:38

to 69% my goal is 50% so if you've ever

1:44

liked any of the videos we've posted if you like this channel can you do me a quick favor and hit the Subscribe button it helps this channel more than you know

1:50

and the bigger the channel gets as you've seen the bigger the guests get thank you and enjoy this

1:58

episode Professor C if someone walks up to you on the street and they're you know they know nothing

What Would Dr Seyfried Say He Does?

2:03

about science and they know nothing about medicine Etc and they asked you what do you do and why do you do it how would you respond I'm a professor of

2:10

biology at Boston College so uh in that role I spent a lot of my time working

2:16

with undergraduates and graduate students in training them to be scientific literate in in various

2:23

aspects of biology the research program that we have at the University is also

2:29

Focus fed on understanding uh how to manage cancer better how it originates

2:35

and how to prevent it how much of a problem is cancer globally what are the

How Much Of A Problem Is Cancer Globally?

2:40

sort of headline statistics on the macro view of cancer for someone that really doesn't know yeah well it's getting

2:46

worse uh I can't say there it's in the millions I I know precisely what's

2:52

going on in this country because the American Cancer Society uh every year uh

2:57

distributes the data on on cancer um we have almost two million new cases

3:04

diagnosed per year in the United States and we have 1,700 people a day

3:10

dying from cancer in in the United States which comes to about 70 people

3:15

per hour in the United States now when I went to China I looked at some numbers

3:22

there and it was 8,000 people a day are dying from cancer obviously the population is so much

3:28

larger and uh I don't know what it is in the UK I mean we'd have to go to their cancer

3:34

Registries but but what we do know is that it's supposed to be a lot worse by

3:39

2050 than it is today so there seems to be no reduction in death suffering for

3:45

this disease and I I can speak to the the reasons for that but right now I

3:51

would say it's a global uh epidemic of cancer it's not it's not getting better it's getting worse more people are dying

3:57

from it there's no major advance in in reducing death rates so it's a great

4:03

tragedy so um and when we when we understand what's causing it and what

4:08

we're not doing to prevent it or treat it it'll it'll be recognized as the singular greatest tragedy in the history

4:14

of of medicine worldwide when it when when they come to know what I know about this disorder and then they realize what

4:21

we've been doing in in in in in a misdirected way it will be recognized as

4:26

the greatest tragedy in the history of medicine what Tye types of cancer are people dying from what is the most

What Types Of Cancer Are People Dying From?

4:32

popular types of cancer for men and women well it's always been lung cancer pretty much for men and women uh lung

4:38

cancer has always been the number one but but we have pancreatic breast cancer colon cancer these are all on the rise

4:45

colon cancer is on the rise pancreatic cancer is on the rise in this country I I I can't speak for other countries

4:52

they may dare very slightly due to diet lifestyle issues but lung cancer has always been recognized as as the number

5:00

one cancer how many people in the United States then based on the statistics would develop cancer well it seems to

How Many People Will Develop Cancer?

5:07

increase every year so it's kind of a moving Target it doesn't seem to go down

5:13

you know what it is today I don't know but what I do know is the numbers of people that are dying each day because

5:19

the um American Cancer Society comes out with I think it's 612,000

5:25

people uh will die this year 2024 uh from cancer

5:30

in this year so divide it by 365 and it comes out to just about 1,700 people a

5:36

day divide that number by 24 and you get about 70 people an hour based on the

5:41

numbers provided to us from the American Cancer Society when they say we've made

5:47

major advances in man in cancer incidences right so in the 1990s they

5:53

instituted the uh anti-smoking campaigns all right so today if you read they say

5:59

we have reduced cancer deaths by 30 31 or 32% wow that sounds really impressive

6:06

so what they do is they take the number this is what the national the American Cancer Society has done and published in

6:12

their papers okay if we didn't stop smoking in the 90s and everybody

6:18

continued to smoke the trajectory would be very very high because we stopped

6:23

smoking or this it's we have 33% lower death than if we didn't stop smoking but

6:30

the trajectory is continuing to increase maybe not as steep as it would have been had we continued to smoke so it's it was

6:36

clearly a prevention it had nothing to do with a a treatment it had to do with prevention that was giving the the the

6:43

oh we've made major advances in in reducing cancer death rate yeah because people sto smoking for the mo for many

6:49

many people more people would have died had they not smoked so we have um people

6:55

that are not not real people we're just looking at what would have happened if if we didn't stop smoking what are the

Where Does Cancer Rank In The Probabilities Of Taking My Life?

7:02

leading causes of death worldwide in terms of diseases is is I I hear that

7:07

heart disease is number one I think that's heart disease is number one uh cancer is number two okay and there are

7:15

many different types of cancer right there's hundreds of different forms of cancer if you look under the electron

7:21

microscope or a correction even a light micro this is how most cancers are diagnosed by by light

7:27

microscopy uh you look under the microscope and you see a bunch of cells that are dysmorphic in the way they look

7:33

and then they all have genetic defects and all this kind of stuff but they all have one thing in common they depend on

7:39

a on a fermentation energy without oxygen so all cancers are a singular type of disease it's just that they

7:46

happen in different tissues but when you look at the underlying problem they're all very very similar they can't live uh

7:51

without a fermentation which means energy without oxygen so that's the common pathophysiological problem in all

7:58

cancers whether it's a colon brain breast bladder skin uh lung we we've

8:04

looked at all these cancers and they're all they're all essentially using the same mechanism to to grow out of control

8:11

so what is that F fermentation you mentioned fermentation is energy without oxy what does that mean uh we breathe

What Is The Fermentation Process?

8:17

air and we uh exhale CO₂ and water vapor and those are the waste products of the food that we eat we break everything is

8:24

broken down and combusted in our mitochondria of the cell and the waste products are Co₂ and water Vapors those

8:31

are the waste products but if you and I were to stop breathing for any

8:36

particular time period uh uh our bodies would fill up with uh lactic acid and

8:42

succinic acid like if we were to have a heart attack or when somebody has a heart attack um they don't die instantly

8:49

uh if if they if they're there without for five or seven minutes without oxygen they they may die because the brain dies

8:55

but if you can get the heart to beat again and get oxygen back in the system you can come alive again but when we

9:01

have that massive Interruption of oxygen into our body um the cells fall back on

9:08

an ancient they up they immediately turn on these ancient Pathways to get energy

9:14

without oxygen for a short period of time and that's the sugar glucose which

9:19

is already in our bloodstream from the food we eat and the amino acid glutamine which is a high amino acid in our

9:26

bloodstreams highest level of amino acid is the glutamine these two fuels are now

9:32

burned for energy obtain energy without oxygen there's no there's a these

9:37

Pathways upregulate and you can get ATP which is energy to keep you alive for a short period of time but your

9:43

bloodstream is filling up with the waste products called lactic acid and succinic acid lactic acid is coming from glucose

9:51

to sugar and succinic acid is coming from the amino acid glutamine and they build up and that tells you you're

9:57

fermenting you're getting energy without oxygen because you're not breathing very simple you're not breathing but I'm Not

10:02

Dead Yet now of course if you don't get it for very long you die it's just that

10:07

now the other way you can stop uh oxygenation in our bodies quickly is

10:13

with the poison cyanide so if we God forbid we were to take cyanide we'd be

10:18

both dead within within a minute we just just because our bodies are completely shut down of energy from oxygen now

10:26

here's the cancer cell the cancer cell lives in in can live in in cyanide

10:32

cyanide does not kill a tumor okay War a warberg showed this a long time ago and we've also shown the same thing in our

10:39

lab others have shown this the interesting thing is when you look at cancer cells even in the presence of

10:44

oxygen even in oxygen they're throwing out lactic acid and succinic acid what

10:49

does that mean that means the en the organ organel inside the cell that

10:55

generates energy is not efficient it's inefficient and the cells are using

11:00

ancient fermentation and when I say ancient fermentation you have to realize the Earth is 4 and a half billion years

11:06

old um the organisms that existed on our planet uh two and a half billion years

11:12

ago were all fermenters there was no oxygen in the atmosphere till the photosynthetic bacteria started making

11:18

oxygen they were living cells they had no oxygen and they were growing like

11:23

crazy unregulated growth just unreg what's going on here and they would die

11:28

as soon as the mble fuels were dissipated as they gobbled up everything they would just die so they lived as

11:34

long as they could reproduce and have fermentation fuels the cancer cell in our body is doing nothing than falling

11:40

back on these ancient fermentation Pathways that become accelerated up regulated in the tumor cell because the

11:48

efficiency of the energy coming from the mitochondria is now uh depleted it's

11:53

defective in many different ways so this is very clear and this happens in lung cancer colon canc we've looked at all

12:00

the major Cancers and we found out these common defects are seen in all the cancers so they're all very similar in

12:06

their metabolism they're very different in what they look like under the microscope lung doesn't look like colon doesn't look like brain um they're very

12:13

different genetically they're all different from each other but they're all common in a in a dependency on this

How Have You Arrived At This Conclusion?

12:19

ancient pathway of energy metabolism can you take me back you mentioned a guy called Walberg there yeah can you take

12:26

me back on the journey that the scientific community or at least you have been on to arrive at the conclusion

12:31

that the central sort of causal Factor at least an indication of a causal factor of cancer lies in this shift in

12:38

Energy Systems where did this understanding start in in research well it started with Oto warberg for sure uh

12:44

in the 1920s uh the other linkage before I tell you what OT warberg did because I

12:50

was like everybody else I thought cancer was a genetic disease and and I heard about warberg didn't really know what

12:56

what he was talking about or invested any time thinking about what he said but

13:01

Linda nebling was a PhD nursing student at Case Western Reserve University and

13:07

in Ohio and she took these two little hopeless kids brain cancer we call

13:12

hopeless cases when they have no um predictability of long-term survival and

13:18

she gave them a ketogenic diet to lower blood sugar and she was able to rescue

13:24

these kids one one one eventually died the other one was lost to followup and she said it her strategy was based on

13:30

what OT warberg had said about glucose and cancer so then I said warberg I said who the hell what let me go back and

13:37

check out who this guy was and what he did because I was seeing similar things in the in the mouse with that drug it

13:42

was lowering glucose and and we were sh shrinking these tumor cells and we published a paper uh the first one of

13:49

the first ever papers linking that how high your blood sugar is determines how fast your tumor will grow in the mice

13:55

and now how this been replicated in all human cancers the higher your blood sugar the faster the tumor grows the

14:01

lower the blood sugar the slower the tumor grows undeniable for all different human Mouse cancers wow so warberg had

14:09

said this a long time ago back in the 1920s he he was taking slices of all

14:14

kinds of human and rat mouse tumors and slicing them up and he noticed something really strange about these um cancers

14:22

they take in less oxygen compared to the normal tissue from which they came wow

14:27

so they're kind of like oxygen deprived and they were throwing out this lactic acid waste product that he was that he

14:33

was saying and they were taking in so much more glucose than the normal so the normal cells take in just a little bit

14:39

of glucose and they can make tremendous energy from a tiny amount this guy was taking in huge amounts of glucose but

14:45

not fully metabolizing it to CO₂ and water but dumping it out as lactic acid

14:51

which is a breakdown product of glucose that is not fully metabolized in the cell wow he said this is

14:58

unbelievable and then he did all kinds of tissue I looked at his data was unbelievable he was cutting humans mice

15:04

rats and seeing the same thing over and over again and uh he was saying the

15:09

origin of cancer has to do with something in the ability of the mitochondria the organel to generate

15:16

efficient energy from oxygen so the sorry the mitochondria is the part of the cell that creates energy it's the

15:22

part of the cell that creates energy through oxidative phosphorylation which is burning energy using oxygen okay okay

15:30

so it's like an engine it's an engine a very highly efficient engine that this is an organel you have to realize we

15:37

have the cell yeah and we have a nucleus that every everybody knows about this nucleus and then we have all these

15:42

little organel in there we have lysosomes and we have the mitochondria which is like a spaghetti Network inside the cell

15:50

they fuse it's actually a second living it's a second living organism inside our cells and to simplify what they do the

15:57

mitochondria they convert oxygen and glucose into energy yes and they combust

16:02

uh energy uh they they take the foods that we eat have carbon hydrogen bonds

16:07

okay and we break those down inside our mitochondria and we and we and we when we break those bonds down we create a a

16:14

hydrogen gradient and we dissipate that gradient through an impeller mechanism that generates energy like crazy it's

16:21

unbelievable very efficient highly efficient but the cancer cell has corruption in that system but it doesn't

16:27

happen overnight as warberg said if you break that system too acutely and too fast the cell will die it doesn't have

16:34

the so you have to have two things to get from oxidative phosphorylation to uh

16:40

energy with with with minimal oxygen fermentation sorry just to keep it simple from a normal cell to a cancer

16:46

cell from a normal cell to a cancer cell doesn't happen overnight okay it's a chronic damage to the ability of of that

Why Do Cancers Grow So Rapidly?

16:53

organel inside the cell to generate efficient energy okay so all we have to

16:59

know with cancer is that they're how are they growing so rapidly why are they going out of control how come it's so

17:04

hard to kill them because as long as you have those fermentable fuels that drive

17:10

this ancient fermentation pathway um they will continue to grow they're very hard to kill and the fermenting fuels

17:17

are glucose and and glutamine glutamine yeah okay so here let's let me tell you

17:22

in a nut are are you ready brace yourself are you ready I'm ready are you braced are you braced sufficiently bra

17:28

sufficient he's sufficiently braced okay so uh a solution to the cancer problem

17:35

to manage cancer without toxicity is to simultaneously restrict the two fuels

17:42

that are needed to drive this disregulated growth while transitioning the whole body off to a fuel that the

17:49

tumor cells can't use which is fatty acids and Ketone bodies so when we take

17:55

the cancer patients or the mice we put them into a calorie restriction lowering

18:00

the blood sugar uh that I said is one half of the two fuels you can lower that down really really low and then we use

18:08

specific drugs to Target the glutamine and together we can selectively restrict

18:14

the two fuels while we transition the whole body over to to ketones we as a

18:20

species evolved to be in nutritional ketosis for the the majority of our existence as a as a species like one and

18:26

a half million years for for centuries and centuries thousands and thousands of years our species you and me our

18:34

ancestors were always in a state of nutritional ketosis because there was very few carbohydrates in the

18:40

environment for them to be consuming right so the cancer cell the body you and I could if we stopped eating and we

18:46

took a low carbohydrate diet and just did water only fasting we would get into nutritional ketosis where the normal

18:53

cells our brain our kidneys our heart can be burning these Ketone bodies

18:58

because they have a good mitochondria and they can burn these fuels effectively the tumor cells have a bad mitochondria they can't burn those fuels

19:05

they're dependent on glucose and glutamine we can replace glucose and glutamine with Ketone bodies in the normal cells of our so we selectively

19:12

marginalize these tumor cells slowly over time uh we they slowly start to Die

What Are Ketones?

19:18

the blood vessels disappear and the body comes in and dissolves them so for someone that has never heard the term

19:24

keto before ketosis or ketones in a simple way what are KET ketones ketones

19:31

are water soluble breakdown products of fatty acids okay they're beta hydroxy beate acetoacetate these are small

19:38

molecules that are water soluble the liver throws them out like crazy kidney a little bit but mostly liver so as I

19:45

told you earlier when we don't eat um you get anxious mainly because

19:52

our brains are addicted to glucose it's like cocaine and nicotine and whatever

19:57

you start getting all antsy haven't eaten anything you know uh what's going on um so you then once the body realizes

20:04

you ain't going to eat anything we have to start mobilizing out of our fat resources and the fats uh go into the

20:10

bloodstream as triglycerides which are three fatty acids attached to a glycerol

20:16

backbone they go to the liver the liver chops them up and puts out these little water soluble Ketone bodies that the

20:24

name Ketone body is kind of a weird thing from biochemistry but but they're called Ketone bodies um and they can

20:31

supply the brain with energy the heart with energy and not only that they're a super fuel it's unbelievable that

20:38

mitochondria Burns these ketones okay but they ener remember I was talking about how energy efficient the

20:43

mitochondria become when they burn ketones they become even more energy efficient it's unbelievable how you you

20:49

they don't need as much oxygen to generate more en that's why they my colleagues called and some of the greats

20:56

in the bio in the biochemistry field called them super super fuel because you

21:01

can get more energy bang for buck burning a ketone body than you can burning a pyruvate coming from glucose

21:07

or even a fatty acid uh and the biochemistry for that is is interesting

21:12

but but the bottom line is when you transition away from these fuels to ke we don't forget we evolved our our

21:19

ancestors were always in a state of ketosis you get into that state by consuming very few carbohydrates and

What Can We Learn About Cancer From Our Ancestors?

21:25

having a lot of energy and this is the way our ancestors were so what can we learn from our ancestors about cancer

21:31

how prevalent was cancer um when we look back at our ancestors if they were often in a state of ketosis yeah well um it's

21:39

hard to determine uh from skeletal records uh but I think we can look at U

21:45

um modern pop modern man who live according to their traditional ways um

21:52

you know uh Albert schwitzer the Great humanitarian physician went to Africa and looked at Africans that were living

21:58

according to the traditional ways and he said one of the weirdest things they don't have cancer it was like what what

22:04

uh cancer was extremely rare in Africans in ints living in in the in the areas

22:12

British when they came you know in in in looking at the health conditions of folks that lived in the Arctic Circle

22:18

cancer was not there they had other things but they didn't have cancer um Aboriginal folks so it seems as though

22:25

uh our living we we can't go back 50,000 years ago because we don't have people

22:30

to examine but we have people to examine today and that was one of the things schwitzer and several other Physicians

22:36

from Europe would go to Africa and they would look at these some of these tribes that were traditional and they would say

22:42

whoa what's going on with these Africans how come they don't have but when modern diet lifestyle entered into their

22:48

societies cancer out of control what about what about our the primate cousins

22:54

yeah um there's never been a documented uh case a breast cancer in a female

23:00

chimpanzee uh and they're 98% similar to us in Gene and protein sequence uh you

23:05

know what's going on with that um monkeys uh they don't generally form cancer they're eating they're not eating

23:12

what we eat okay don't forget we did not evolve to eat pork pies and Dunkin

23:19

Donuts jelly fil donnuts and pizzas we did not our ancestors did not eat this right we were killing and eating Animals

23:26

As I said we ate everything that walked crawled flew or swam on this planet became part of our diet um we did not

23:33

have Donuts on every corner delicate essin on every corner our we evolved over this period of time just like our

23:40

primate ancestors uh the animals chimps and gorillas and things that you see in

23:46

the zoos are fed their natural diets as if they were living in in their habitat

23:51

their natural habitat whether it was in South America Africa or wherever it was were're not throwing in jelly donuts

23:57

every day and pizza pie into the chimpanzee pen and as a matter of fact I even went to the zoo down down here in

24:04

in Boston Franklin Park Zoo and also at the San Diego Zoo I said how come how

24:10

come you guys don't give these guys run down and get a big pizza for these for these animals oh no it' be animal

24:16

cruelty their systems aren't Geared for this well neither are

24:22

we we have an obesity epidemic we have all these different chronic diseases why

24:27

we didn't have to eat all this crap that we're eating today so what I've told many people in these podcasts is that

24:33

our food science and technology and our society's technology has evolved so much

What Role Does Exercise Play In Fighting These Diseases?

24:39

faster than our biology can you explain to me in simple terms the role the exercises playing in staving of cancer

24:46

well exercise lowers blood sugar you know you and and also lowers glutamine so uh the two fuels that are driving uh

24:53

now we can't completely remove glutamine by exercise that's for sure um but we my

24:58

my late good friend George kahill published some papers on showing how exercise could actually lower uh

25:04

glutamine availability so it's a it's a little bit of a push but you're also when you exercise you're burning and

25:10

you're not eating a lot of carbs your mitochondria burning ketones and the oxygenation from all the exercise is

25:16

keeping those mitochondria super healthy at their highest level of Energy Efficiency so exercise you're building

25:23

muscle as well aren't you yeah you're building well you can build muscle but you're certainly getting aerobic exercise to oxygen is coming in and

25:30

you're burning ketones which I already told you is a super fuel so your body is super healthy uh these bodies from the

25:37

Paleolithic period these men were jacked there was no obesity in these people they had tremendous energy they're

25:43

they're not dying from uh the things that are killing us they're dying from injuries and infections when you

What Lifestyle Choices Are Causing The Cancer To Develop?

25:49

described this slow and gradual shift in the cell as it moves to this sort of

25:55

ancient system it sounded very gradual so in my I thought okay so does that mean that the cancer is a gradual

26:03

process that is kind of building up in me or isn't building up in Me based on the lifestyle decisions I'm making and

26:09

my environmental factors right now like I'm trying to say does is does

26:15

cancer start slowly years before you you you know you find it is a gradual process but it can

26:22

be impacted by several provocative Agents from the from the micro environment um lack of exercise okay so

26:30

we're not exercising nearly as much as our Paleolithic ancestors Bar None right

26:35

we have massive amounts of processed carbs in our diets we have a lot of emotional stress uh um mental emotional

26:44

stress that's impacting negatively on on our biology um we we have lack of sleep

26:52

sleep uh a lot of us because we we have stresses you you have to have when you put all of these impact act ful things

26:58

together in one person you can put yourself at risk for Cancer all of which

27:04

will damage and reduce the efficiency of mitochondria and also the joy of living

27:11

uh having friends and friendships and and this kind of thing reduces stress in a lot of different ways makes people

27:17

enjoy getting up and and having a a nice day rather than being depressed or or these kinds of things um you put all all

27:24

this together and you put yourself in a a diet and lifestyle that puts you at risk for damage to oxidative

27:31

phosphorilation and the transition from one form of energy to a fermentation energy and what I'm trying to understand

27:36

is that a it's a grad a gradual transition you have to be able to do that and how long does it take for a

27:43

colon a group of cells in a in a in a crypt of your colon to transition from

27:48

one stage to another you have to be constantly under stress those cells and that organ now why somebody gets colon

27:55

cancer another person gets breast cancer another person gets black cancer and some person gets a brain cancer and all these different kinds of cancers what

28:01

whatever happened the process was dis was causing a gradual disruption of

28:07

oxidative phosphorilation oxidative respiration and a and a gradual transition to a fermentation like in the

28:14

brain the neurons rarely if ever get cancer but the gal cells that support neurons they are usually the source of

28:21

the origin of cancer in the brain for those kinds of cells and you can look at different cells and some are more or

28:27

less prone and why this guy got lung cancer from from smoking cigarettes this guy got bladder cancer from smoking

28:33

cigarettes how did it all start it all started from a population of cells in one of those organs having an a chronic

28:41

not instant a chronic Interruption of oxidative energy followed by an upregulation of this fermentation energy

28:48

so really we need to be thinking about all the things that have caused dysfunction in the mitochondria absolutely I want to get a list of the

28:54

key things that are associated with causing this dysfunction okay carcinogens okay so carcinogens and you

29:00

know there's many asbesto there's all kinds of chemicals in the environment you hear about this oh there's a whole

29:05

list of carcinogens we and they put them on the on the labels on different chemicals they say carcinogenic

Is Cancer Genetic?

29:11

potential and whatever you have what are the types of things that are C cogenic that most people don't realize oh well

29:17

now we're talking about microplastics we're talking about um is that in part what causes breast cancer cuz I always

29:25

think about dooen with breast cancer and and the stuff that we're kind of lathering onto our arm yeah well the the

29:30

one that was most interesting was the talcum powder one how does talcum powder would cause ovarian cancer okay

29:37

it's taken up into the urogenital tract and it forms a foci in a part of the

29:42

ovarian tissue what's a foci a focus like a collection of material a foci is

29:49

an area where say talcum materials would be accumulating and that leads to a

29:56

inflammatory area of the body and our immune

30:01

system comes in to see what's going on our immune system is a healing machine and they see something that's not

30:08

normal normally they would clean it up but they throw growth factors on there leading to

30:14

disregulated damage to mitochondria and disregulated it and then you get this tumor that starts so if I get a talcum

30:21

powder granule or whatever and it goes into my body my body then tries to

30:26

attack it to sort of out and in doing so it creates inflammation which leads to damage to mitochondria in a particular

30:32

group of cells near that foci okay and this this is applicable to I guess a lot of different Nano particles and yeah and

30:39

microplastics are this now they're looking at this but then we have chemical carcinogens tetrahydrochloride there's all kinds of other things that

30:45

can actually damage arsenics and and these kinds of chemicals um urethane uh

30:52

anything that could chronically damage uh a mitochondrian forcing over time for

30:58

ing it to upregulate the fermentation energy without oxygen isn't this most things I'm trying to figure out what I

31:04

how to live my life yeah well that's what that that's why it was called the oncogenic Paradox but but you can you

How Do We Keep Our Mitochondria Healthy?

31:09

can avoid that that's why I'm saying if you can keep your mitochondria healthy how exercise and reduce uh consumption

31:17

of Highly processed carbohydrates do I need to be avoiding these microplastics as well you you know the problem with

31:23

microplastics they're very ubiquitous we're not really sure uh we just now becoming aware of it nobody really knew

31:29

that before um look it up it's but it could it could cause U small fosi in

31:35

different populations of cells but you know it's very hard to really chronically damage mitochondria

31:41

mitochondria a tough organel the problem is we are chronically abuse it without realizing what we need to do to keep it

31:47

healthy so even if you are exposed to chemical carcinogens even if you are exposed to all these things but you're

31:53

keeping your body as healthy as you possibly can you could possibly delay or

31:58

even prevent the damage to the mitochondria even though you have the even though you are being exposed to

32:04

this so it's a it's actually in your hands um you can actually reduce

32:10

risk for cancer by knowing what keeps your mitochondria healthy vigorous

32:15

exercise uh fasting water only fasting um you know it's very hard some but

32:21

sometimes we when we were putting mice on calorie restriction it was hard to get them to get tumors their body was so

32:26

healthy this was shown Years Ago by by a couple of scientists in mice using mice

32:32

with that developed a lot of breast cancer if you put them on a calorie restricted diet the incidence was way

32:37

way down so cancer is very preventable it's a very preventable uh disorder it's

Is Cancer Genetic?

32:42

just that we're doing everything we possibly can induce it in our diet lifestyle a lot of big institutions

32:49

believe that cancer is a genetic problem

32:54

um you believe otherwise the evidence is striking I mean to believe it's not

33:00

whether you believe it's what the data tell us okay so according to the somatic mutation theory of cancers mutations in

33:07

the nucleus lead to disregulated cell growth that's the sematic mutation theory in the mitochondrial metabolic

33:13

Theory it's a transition from oxidative phosphorylation to to a fermentation metabolism inside inside the cell um the

33:22

mutations are largely irrelevant what do you mean by that when the mitochondria become defective they throw out

33:29

Ros reactive oxygen species that are carcinogenic and mutogenic W what does

33:36

that mean causing mutations so a lot of the mutations that we see in the nucleus of the tumor cell that is the subject of

33:42

the sematic mutation Theory are Downstream effects of the dysfunction of the mitochondria so the mitochondria is

33:49

causing a downstream effect which are mutations which according to the sematic mutation Theory are the cause of the

33:54

disregulated cell growth let me tell you why that's absolutely untrue there's some cancer cells growing

34:00

out of control have no mutations and normally not discuss how can that be that's a a challenge to the theory if

34:07

the theory says that all cancers have mutations and you have some cancers that have no mutations and they're growing out of control that should say who bell

34:14

ring one uh then they the the sematic mutation uh people people who think this

34:20

said oh okay we have we have a problem here not all mutations are the ones that cause the disregulated only some and we

34:27

have a name for those some that's called driver mut okay now it's a nice term because some of those mutations are

34:32

called passengers they don't really do anything but the drivers are the ones that lead to the disregulated cell

34:37

growth so we should be focusing our attention on these driver mutations new evidence from the recent scientific

34:43

literature can you believe this they're taking tissue normal tissues from patients different organs and things

34:49

like this from not patients from normal people no cancer perfectly like yourself here we would take tissue from you and

34:55

say oh my Christ look at the you got driver mutation in your esophagus and your different parts of your body you

35:00

got driver but you don't have a tumor what's going on with that how you explain that these driver mutations are

35:05

causing disregulated cell growth when we have thousands of driver mutations that are there that are not causing

35:11

disregulated cell growth oh okay that's a another problem the biggest devastating information against the

35:18

somatic mutation theory is if you take the nucleus from a tumor cell cleanly take it out of the tumor cell and you

35:24

have another normal cell here you take the nor the nucleus out of the normal cell and you put the tumor cell into

35:30

that cytoplasm you get regulated growth no disregulated growth but if I have the normal cell and have a tumor cell take

35:37

the tumor nucleus out of there and take the normal nucleus and put it into the tumor cytoplasm which contains

35:43

mitochondri defective mitoch disregulated cell Dr this has been seen over and over and over again so just to

35:48

summarize that so if you take the tumor nucleus side of the cell and put it into a a normal healthy cell yes um

35:55

everything's fine everything is fine but if you take take healthy cell nucleus and put it into a tumor cell you still

36:00

have the same dis regulated cell growth tumor growth so which means that it's not the nucleus absolutely it's

36:06

something else it's something else and that's the mitochondria and I told you then you have cancer cells with no mutations and then you have driver

36:12

mutations and normal cells that never become cancer you put all those things together and you have to be uh a

36:19

hopeless ideologue to think that cancer is a genetic disease um it's a silent

36:26

assumption in the field that cancer is a genetic every textbook of biology cell biology and bio cancer is a genetic

Why Haven't Opinions Changed Based On Dr Seyfried's Evidence?

36:31

disease why hasn't people's opinions changed despite the evidence that you

36:37

present it's a very difficult thing it goes back to um when you have one Theory

36:44

replacing another theory it's called Paradigm Paradigm shifts and in all in

36:49

history of science Paradigm shifts have been met with great great resistance uh the clear the clearest one was the

36:56

Kernan Revolution when uh for eight 1,800 years astronomers in

37:04

our early Astron astronomers thought the Earth was immovable in the center of the solar system for 1,000 this was Claudius

37:12

TMI Aristotle and the Bible and all these Earth is immovable and the Sun and

37:18

the Moon and the planets all revolve around the earth 1,800 years even

37:24

Cernic's uh was working with these mathematical formulations this kep was being constantly confused until he said

37:31

what happens if we put the sun in the center of the solar system and consider the Earth as simply another planet that

37:37

would revolve oh all of a sudden things started to make sense and gardano Bruno

37:44

uh a theologian was put to death for suggesting that cernus was right um

37:50

there was a tremendous resistance on the part of the Roman Catholic Church at that time and this is the same thing

37:56

that happened when when and um Lewis Pastor said the germs the germs rather than bad air are the cause of disease so

38:04

uh and when Darwin Wallace theory of evolution came it's not special creation it's it's natural selection that that

38:10

can explain this these were massive Paradigm changes in the history of Science and what we're seeing today is

38:17

the same thing the mitochondria is the center of the problem with cancer not the nucleus the mitochondria it's a

38:23

mitochondrial metabolic disease and once you realize that we're going to drop these death rates massively in a very a

If We Adopt This Mindset, What Will Happen To Cancer Statistics?

38:31

number of years for sure so if we take two paths then if we realize that that the mitochondria is the center of the

38:37

dysfunction and ultimately disease in the cell yes if we go that down that path what impact do you think that will

38:43

have on the cancer statistics over the coming years it'll drop it massively

38:48

okay I'm not going to say we'll get rid of cancer completely uh but here's the thing we may never get rid of it but we

38:54

can learn to live with it and keep it at Bay if if we know how to if we know that it can't survive without these two fuels

39:00

and you can do a diet and lifestyle that can restrict the availability of those two fuels and keep your mitochondria as

39:06

healthy as you possibly can what if we don't go down that path what you think then you're going to be right one out of two people are going to be having cancer

39:13

that your statistics are going to be U AB absolutely correct is there anybody that you believe because you know when

Are The Current Cures Working?

39:19

we talk about these subjects often we think of like big Farmer and the incentives and money and follow the money and you'll figure out why people

39:25

don't want change are is any of that sort of conspiratorial thinking correct in your view are they I

39:31

don't know if that's conspiracy I don't like conspiracy terms that's absurds I like what are the facts of what we're

39:38

looking at but do you see a resistance from Big farmer to entertain this point of view um what do you think what do you

39:45

think I mean do you think this is I mean you're making a lot of not you but but people in these in that those Industries

39:51

the hospital industry is making enormous amounts of money they're rewarding we get uh7 billion a year for cancer

39:58

research in the in the in in the National Cancer Institute awarding gr many many not all many grants to look at

40:05

for gene mutations and all this kind of stuff um and we have drugs that are extremely expensive based on a sematic

40:11

mutation theory of cancer that are basically not dropping the death rate as I said we got while we're talking here

40:17

we're g to have 140 people dead uh from cancer uh 1,700 people years getting

40:22

worse and worse um with as you said we're always running for raising money for cancer research uh where's all that

40:29

money going what are you doing with all that money no accountability and then when you look at the scientific advisory committee of all these societies that

40:36

you're running for they all think published papers on cancer as a genetic disease it's too hard for the field to

40:43

accept at this point um it's it's too traumatic at what I'm saying it's too

40:50

disruptive to a a massive industry uh at this time they will come to gradually

40:56

adjust to what I'm saying it's just a matter of time because we cannot continue this trajectory it's immoral

41:02

what we're doing to some of these people I read a St that said the global incidence of early onset cancer

41:07

increased by roughly 80% between 1990 yeah and 2019 that's in the bmj oncology

41:16

um early onset of cancer is basically patients under the age of 50 and and when I think about this you know growing up in the UK whenever there's a a fun

41:23

run a charity race a marathon whatever it might be cancer research get the money yeah and to hear that you know

41:29

there's been so much money invested in cancer research over the last couple of decades but there's been an increase of

41:34

80% in early onset cancer in the same period for me I'm like this research doesn't appear to be

41:41

do being very effective well as I said you got to find what people don't do is they never ask where's the research go

41:48

what kind of research what what are you doing what is the research it's the theory that drives the the impetus to do

The Current Technologies Used To Prevent Cancer

41:54

research now a lot of great stuff has been done on you know keeping people alive that

41:59

suffer from cancers right because if you think about the probability of dying from a cancer I'm I'm assuming that has gone

42:06

down yeah uh to some extent it has you know we call there's two ways of looking it's called Uh progression free survival

42:12

and overall survival uh these are the terminologies that are used in the clinical world of cancer uh uh and they

42:19

represent the approval of drugs through the Food and Drug Administration if you have a drug that

42:25

improves a progression free survival uh progression free means it looks like

42:30

the drug is working on the tumor um because you know the tumor you can see it it gets bigger and bigger and more

42:36

lethal and more lethal and and if I see it not growing nearly as much uh I say

42:41

wow look at the it's it's slowing the what we call traditional progression okay it's called progression free

42:47

survival and then you have overall survival so you have two ways to approve

42:53

drugs mostly for cancer right how does it work on aggression free survival and

42:58

how does it work on overall survival well they stop looking at overall survival now somebody's going to bark

43:04

and say well you know bottom line is mostly progression free which means that the patients it looks like the tumor is

43:09

being effectively managed but they live only a couple of months longer than they would have if they didn't use this drug

43:16

so therefore it's approved and and and um that as opposed to overall survival

43:22

you know you're only living a two okay You' lived two and a half extra months the tumor looked like it was manage

43:27

pretty well but your overall survival is is this much but you you didn't see the tumor growing uh we're going to improve

43:34

that drug so a lot of the new drugs that we're giving do a really good job at progression free survival but they do a

43:40

horrible job in keeping people alive much longer which ultimately is what you want to do you want overall survival let

43:46

me give you an example avastin uh bismid this this is an immoral drug that should never be used on people it was blocked

43:53

because it caused colon perforations in women with breast cancer they still use it on brain cancer and when you so the

44:00

in the tumor you got a A tumor you can see it with PET Imaging and you can not so much pet MRI and Cat Scan you can see

44:06

it there and it's looking there okay uh you can see it now you give the patient a vaston and uh which is this um

44:15

anti-angiogenic drug it's supposed to stop the abnormal blood vessels right they think that the angiogenesis blood

44:22

vessels is is driving the disregulated growth it's the fermentation that's driving the just regulated growth by the

44:28

way so all of a sudden you give the the tumor kind of disappears it doesn't look like it whoa patient gets all excited

44:35

The Physician looks and says look at that look at the looks like you're doing well what it does the EV what the drug

44:41

does is it causes the tumors permeate your enti your entire brain just like spreading it through

44:48

your whole brain you don't live any longer uh but you had this progression free look at the tumor so the patient

44:54

gets excited because it looks like the tumor's disa appearing with this very expensive drug but what it does is it

45:00

almost guarantees that that patient will not survive because you spread the tumor cells through the whole brain so um this

45:07

is why I call it an immoral kind of a thing but chemotherapy and sort of these radiation therapies they have proven to

45:13

keep people alive who otherwise would have died in some cases they it can and

45:19

and that's another thing we have to look at we have and I I work heavily in brain tumors and G blastomas and things like

45:24

that when you irradiate somebody's brain uh who has one of these tumors you free up massive amounts of glucose and

45:30

glutamine in the micro environment and if you look at the survival when we did survival looked at survival curves for

45:35

gleo blast throughout the world oh it's un you can't even design experiments so consistent how fast people will die it's

45:42

like all the different hospitals have the same survival same survival what are you doing well we do chemo we do

45:48

surgical debulking uh T olomide and we give steroids which raise blood sugar and we irradiate we irradiate we

45:54

irradiate everybody's dead so um not everybody but you know fiveyear survival

46:00

is is very very low 10e survival is almost zero um but if you go if you got

46:05

a breast cancer or if you got this is brain cancer I'm talking about this is freeing up now yes if you have a

46:11

circumscribed tumor and it's not anywhere else you can come in with a radiation or surgical procedure and cure

46:18

essentially cure that patient but if you have any level of spread or anything like this um that that person now and

46:26

also if you're taking a toxic poison into your body like Red Devil docar rubison they call it Red Devil your P

46:32

turns red everything turns red what is that is that chemotherapy yes is a chemotherapy to kill a small group of cells um or maybe a little bit of a

46:40

spread but your your hair falls out your body gets brutalized uh by this and then

46:46

if you survive the cancer and many people do we have millions and millions of cancer survivors on this planet but

46:52

many many folks in that group suffer from the adverse effects of being p poisoned or irradiated or surgically

46:58

mutilated I mean they have to change their whole and often times the cancer comes back or they die from

47:04

cardiovascular disease or they die from secondary adverse effects of being brutalized uh with medieval I call it

47:11

medieval approaches to this are you kidding me what they're doing to cancer patients so when we do metabolic therapy

47:19

we we shrink the tumor down for sure then the surgeon can come in and he sees

47:24

it smaller fewer blood vessels because of the metab therapy and we can take out a greater amount uh of of this and then

47:30

we transition back to prevent this tumor from recurring metabolic therapy can be

47:35

used to not only prevent the cancer but can also be used to treat the cancer now let me tell you go most hospitals

47:42

suppose people say well you know I really want to do things to prevent cancer can I do standard of care before I have a tumor what do you mean you want

47:50

to go into a uh major Cancer Clinic and have toxic doxorubicin and radiation to

47:55

your body just in the event that you might get a cancer this is absurd but yet when you have cancer that's what they do to you right but with metabolic

48:03

therapy you can use it as both a prevention and a treatment it's just that with a treatment we bring in some more drugs to Target the glutamine we

48:09

don't do that on the prevention side on the I was just looking at some stats as you were speaking around the fiveyear

48:14

survival rates of a variety of different cancers um over time and it does appear

48:20

that survival rates of these cancers from breast cancer to prostate cancer to lung cancer to leukemias um and various

48:26

melanomas has improved since the 1970s so the 1970s to the 1990s to the

48:33

2010s there's been an improvement in the survival rate um which I guess is a credit to the research that's been done

48:40

um what you're saying is that this the treatments we have still today are horrific yeah and the and the survivals

48:46

are not that much greater it's not like you're getting massively longer survivals yeah I mean and I have to I I

48:52

have to preface that these stats might not be right because this is AI we're dealing with here but the there's a 5%

48:57

for example with breast cancer between the 1990s and 2010 there's just a 5% difference in overall survival in

49:04

overall survival okay so your survival your overall survival is two and a half to three months greater I I don't

How Do We Prevent Cancer?

49:10

actually have those stats in no but that's that's that's the the evidence the papers that we're looking at so so

49:15

how do we prevent prevent this then I'm 32 years old now so I want to make sure that I

49:23

live my life in such a way that I limit my chance of cancer one of the things I always reflect on is the fact that many

49:28

of the people that I know that have got cancer breast cancer or other forms of cancer appear to be remarkably healthy

49:33

yeah always at the beginning there there not always but many times the person comes in gee I

49:39

just was diagnosed with cancer I didn't know I had it I didn't feel bad I didn't and then all of a sudden you get treated and they look like death warmed over but

49:45

I'm saying like how can how can healthy people be getting cancer if there's this sort of central well because you I as I

49:50

said are the the the the and we're seeing this I'm seeing it in my own I'm getting more and more emails from young

49:57

people in their 30s uh late 20s 30s early 40s like with colon cancer breast cancer and all these kinds of things but

50:04

look at our diet and lifestyle situation today those those things that I'm talking about lack of exercise a lot of

50:10

stress poor sleep bad food all of this kind of stuff impacting parts of our

50:15

bodies so what do we do about it though know about it and then and then what do we do so I know that's personal choice

50:21

I'm not here to take pieces and and jelly donuts off the market for sure or breakfast here I love that stuff too but

50:27

the qu the question is I don't eat it every day and I know if I do it'll kill

50:34

me so so yeah skipping meals water only fat occasionally there's a lot of things

50:41

you can do to keep your mitochondria healthy okay so tell me what those things are I just exercise you look like

50:46

you're a pretty healthy guy yeah I go to I go to the gym you don't look morbidly obese to me not not yet not yet well

50:51

that's important because you don't ever want it yet we wouldn't be in America too long so my chance well and listen it's not

50:56

just the United States we were kind of like the first ones to plow that field but it's starting to spread everywhere I think in China they have the most 200

51:03

million obese people in China now so should I be on a keto diet then here's what we did okay uh we developed the

Should I Be On A Keto Diet?

51:10

glucose ketone index calculator at Boston College all right my students and I because we were trying to uh work with

51:17

cancer patients blood sugar and ketones um independently of each other we had a

51:23

ketone meter and we had a blood glucose meter so we were monitoring ketones by itself and glucose by itself and we

51:30

worked with a very nice woman U from American who lived in East France who since passed away from a brain stem

51:37

tumor was very very difficult we kept her alive very long but eventually we didn't know what we need what we know

51:42

now but she got into an argument for a handicapped parking spot with her neighbor upstairs and her blood sugar and

51:50

blood sugar went through the roof she ran upstairs and she took her blood blood sugar and she says oh my God the tumor is going to grow I said what's

51:55

your ketones and she says oh it's still 2 and a half Miller well that's still pretty high usually it's very very low

52:01

it's very high so my students and I we said you know this is too traumatic to try to measure these two independently

52:08

why don't we make a singular number divide the glucose in molar in the blood by the Ketone and Molar in the blood now

52:15

you get this number that's much more stable and it allows the cancer patient to know that if I keep this Zone in 2.0

52:22

and below my tumor cells aren't going to be able to grow very fast I did this for the brain cancer right now it's being

52:28

used for all Cancers and now it's being used for guys like yourself who just want to stay healthy and because what it

52:35

is essentially is a quantitative determination if you're in the Paleolithic zone or not oh so if I'm at

52:40

2.0 like my friend Dominic the austino he's always down in these zones he's living the P he's a Paleolithic man

52:47

living in modern society what's a Paleolithic man that's how our ancestors were during the Paleolithic period okay

52:53

so he's got the right balance of glucose and ketones in his blood like we did when we were hunting mammoths and and

52:58

Buffalos and these kinds of things when we were hunter gatherers in the thousands of years of our existence as a

53:05

species tens of thousands of years he is in that zone is he in keto yeah well

53:10

that's that's what the low gki is that means you're at a level of Keto now yes

53:15

he doesn't eat a lot of carbohydrates in his diets eats leafy vegetables and a lot of meat and and this kind of thing

53:21

sparingly on fruits uh like grapefruits we learned from the epilepsy field great fruits provide a tremendous amount of

53:28

vitamin C with don't and do not Spike glucose that's that's very interesting so you can have uh certain fruits that

53:34

can keep you in this metabolic zone of P I call it the Paleolithic Zone which is the way we evolve with there was no

53:40

cancer in our in our existence when people hear that they might start jumping on the paleo diet I don't even know what the not a paleo diet it's it's

53:47

diets that are low in carbohydrates okay okay um Mediterranean diets like people

53:52

say to me at told God what should I eat should I eat this and that normally you would eat foods that have very low low

53:57

glycemic index which means the speed with which glucose is released like a banana very high in glycemic index you

54:04

eat a banana your blood sugar immediately spikes many fruits are like that um but you want you want foods that

54:11

keep a low steady uh uh gki now I built that uh calculator for brain cancer

54:19

patients initially then we realize it's powerful for all cancers uh we put the cancer patient in the low glucose Ketone

54:25

index we get them down in there then we come in with the glutamine targeting drugs to to kind of polish off these

54:31

tumors or put them in even a more dormant state but now we finding all these young kid like yourself all these

54:36

30 20 year olds what's your gki I mean they're out to weightlifting and they're looking at their G they don't have

54:42

cancer they're just excited to see they they can get into this Paleolithic Zone by themselves and that yes that will

54:48

prevent cancer because you can't get cancer if your mitochondria healthy if if you're in a Paleolithic Zone where our ancestors rarely have ever got

54:54

cancer then you're you're back in this oh you me to tell me I can't eat this and I can't eat that what does it do to

Dr Seyfried's Dog Study

54:59

your gki oh Mak it go up well don't eat that so you did a study on dogs a dog

55:05

with a tumor yes can you tell me about that study it was a woman came to me and this is what I say does you don't have

55:12

to have a a PhD in Biochemistry to understand what some of the things this

55:18

woman had no degree whatsoever she just heard the uh about what we did to these mice and she did the same thing to her

55:25

dog um it was a pitbull and at aged seven years old it had big mast cell

55:30

tumor on its lip so she listened to my YouTube video over and over she said to me I just kept listening then he says I

55:37

I got I I I got some raw chicken she says dogs wolves evolved to eat chickens

55:43

so she got some uh chicken Cho chopped up the chicken she cut the calories of she found some dog food calculator to

55:50

how much calories the dog was getting she cut the calories the dog look lost only 5% of its body weight

55:56

she got uh pollic fish oil raw eggs and cut all the calories everything was all

56:03

natural for this dog um and all of a sudden we have the pictures you can see them in the P if you saw the picture big

56:09

big tumor on its lip that the the veterinarians said this dog is gonna to survive you have to give him chemo and

56:15

radiation and surgery and all this kind of stuff and it's going to cost a lot of money the dog's gonna have diarrhea it's going to be you know she didn't want any

56:21

part of that so she said well let's just try this metabolic thing and and she

56:27

kept all the records and the pictures and what she did and how much she gave the dog and all this so I was able to get all that information from her um put

56:35

my friend Lauren Lauren Nations who was a veterinarian uh on the paper because I said what biology guy at Boston College

56:42

is telling you how to manage cancer in a dog we got to have some veterinarian on here to validate to make sure he's there

56:47

and he looked at the pictures and we looked at all the thing and disappeared so what happened was the dog eventually

56:53

died of heart disease at 15 and a 12 years years of age so essentially that's the only when people say well metabolic

57:01

therapy cure cancer I I say metabolic therapy is never considered a cure for

57:06

cancer it's an effective non-toxic management for cancer but in the case of that dog it appeared to work to cure the

57:12

dog but that's the only one I'll say oh he's gonna say cure cannot that dog happened to get he died from old age

Human Cases Of People That Have Followed Your Research

57:17

from a heart heart attack and we did it with a brain tumor guy Pablo Kelly who just passed away unfortunately from a

57:23

from a surgical um his his uh had a a major cerebral uh Hemorrhage after his

57:29

surgery from Devon England you know Devon England that's where I'm from are you from Devon yeah oh wow well Pablo

57:35

was there he just passed away fortunately we've talking to him the day before he passed away Pablo Pablo Kelly

57:41

so he was from Devon England had a glio blastoma which is the worst of the worst uh they said and he's all over your your

57:48

newspapers there and Devon he was always sending me articles from England um man

57:53

rejects standard of care so he he had this glio blastoma and they took the

57:58

tissue out which is brain cancer yeah brain the worst of the brain cancers you know uh they took the tumor out and they

58:04

said oh you it's in inoperable inoperable and uh but if you do

58:10

radiation in chemo uh we you might live nine maybe 12 months at the most well

58:15

Pablo came from a family of like we don't dabble and and this kind of medicine we're more holistic kind of

58:22

people so he emailed me this was in 2014 um and said I want to try this metabolic

58:29

thing so he rejected uh chemo and radiation and they said it wasn't

58:35

surgically capable of being completely removed anyway so he did this I I gave

58:41

him the information that I give to everybody and this was way back before we knew a lot of what we now know and uh

58:48

I said this poor guy he sees another one and they said you're going to be dead they they brow beat him they try to force him to put the radiation mask on

58:55

they hacked his beard off uh all this kind of stuff and he just jumped up he said I can't do this stuff so um he

59:01

didn't take any steroids he didn't take any any radiation he didn't take any chemo he just did the metabolic therapy

59:07

and he's on English telev or things with all of his paleo diet which actually a low very low carbohydrate diet he had

59:13

the avocados there he had the fish oil there he had this different stuff two three years go by he emails me

59:20

I said gez Pablo I thought you would have been dead you're still alive what's going on with that

59:27

so so he calls me up and he says you know um I went in for a CAT scan the

59:32

other day doctors are like still surprised that he's alive and they said this tumor is is still there and it's

59:38

growing and they think they can cut it out now so he was three years on on just

59:43

metabolic approach he didn't take any glutamine Inhibitors which was really remarkable so so anyway he asked me and

59:50

I have I have physician friends that a radiologist that can look at it and we measured it when it was first first

59:57

diagnosed in 2014 and then we saw it did become a little bigger so and the now

1:00:02

the surgeon said I think I can get it looks more more receptable here it was inoperable now it becomes receptable so

1:00:08

he took it out and um Pablo recovered really well and uh the surgeon says I

1:00:14

think I got it all wow so so and and Pablo is measuring his glucose Ketone

1:00:19

index with our Keo monitor so I had every day sometimes two and three five years of data on Pablo can you believe

1:00:26

this so so anyway Pablo thinks he's cured because the the surgeon all of a

1:00:33

sudden he goes back to his kind of weak weak ways and you can see the his gki

1:00:38

goes up and all of a sudden the tumor starts to show up again puts the fear of God back into him goes back on a more

1:00:44

restrict condition another three years goes by and this time the tumor is growing slowly very slow don't forget

1:00:51

gleo blastomas kill you very quickly um with standard of care you can barely get out of at his age if you can get two

1:00:57

years you're doing you're doing really good so anyway now he's three and he's got six years out and he says you know

1:01:04

um uh it's still back you know he I got to go in so it first so this is second debul first debul goes off gets back on

1:01:12

another second debulking another three years goes by he has a third debulking can you believe this the debulking

1:01:17

debulking is the cutting the tumor out it's the removal surgical removal of this tumor but he's never had radiation

1:01:23

or chemo or any of the kinds of stamp what we call standards of care so for

1:01:28

and now um he he has uh I talked to him a couple of weeks ago and uh he was

1:01:35

doing he was doing really really good he had the the third removal and we were laughing with myself and Dr duer and my

1:01:42

associates he says yeah can you imagine um uh I've had now three operations on a

1:01:49

previously inoperable tumor so we were saying wow they got

1:01:55

that wrong didn't they follow and they kept wanting to irradiate him and do all this stuff and he said no no going to keep doing this and so we were speaking

1:02:03

to him and and uh he's out 10 years the tumor was was diagnosed in in in August

1:02:10

2014 and he passed away August uh 2024 from they try to go in and get the

1:02:17

last bit of tumor out of his brain he came out of we got him uh we talked to him a thumbs up smiling talking like

1:02:23

crazy six hours later cerebral hemorrhage and he dies so uh he didn't die from the cancer he died from the a surgical

1:02:31

problem with the surgery so he was a you talk about long-term survivors uh you

1:02:36

rarely survive two years with a glioblastoma the fact that he was out 10 years and if he hadn't had that last bit

1:02:42

of surgery the guy would have still been alive because he was talking like you and I are talking this is a guy who has a a terminal so I said to Pablo I said

1:02:50

you could outlive me I I says I said we're all terminal to some extent right we're never all of us aren't going to

1:02:55

live to I said sure he was a young guy he was only 20 22 or 23 when he was diagnosed he was in his 30s now when he

1:03:01

passed away 10 years so he's 33 34 years old and and I said you know I could be

1:03:07

dead before you and we were laughing and we had a good time and then next thing I know I got an email from his wife he

1:03:12

said Pablo is is on on on on brain dead and something I said what

1:03:17

the hell happened what happened to this poor guy and it wasn't the cancer so um

1:03:23

who how know I don't know what how long you would have lived how many more things but what I'm saying oh he's an

1:03:29

anecdote well listen if I had a drug that did what what metabolic therapy did and I could get more people like Pablo

1:03:35

are you kidding me they'd be run running all over the world and when you say metabolic therapy you mean the

What Is Metabolic Therapy?

1:03:40

combination of the calorie restrictive yeah ketogenic approach yes avoiding well first of all you're avoiding you're

1:03:47

avoiding things that are going to kill you the radiation is going to kill you for the for many people not all people

1:03:52

okay everybody say well well listen you can you can look at go have people look at the data themselves for crying out loud and you can see how long you're

1:03:58

going to live he didn't do what they what they grab everybody in what did he do specifically he didn't take radiation

1:04:03

or chemo yeah and he brought his glucose Ketone index down to the 2.0 Zone and

1:04:08

kept it kept it low and he took some supplements and a few things here and there but he wasn't really targeting the

1:04:15

glutamine like we thought it with like we we thought we we found now certain parasite medications will be effective

1:04:20

in targeting glutamine so we're doing all non-toxic strategies to manage cancer you don't have to be brutalized

1:04:26

by the system if you know what to do and how to do it the problem the problem is most of the poor oncologists never heard

1:04:32

of what I'm talking the stuff I'm telling you right now they never heard of it the risk is someone gets cancer that's listening to this or someone has

What Should Someone That Has Cancer And Is Listening To This Do?

1:04:37

cancer that that's listening to this I mean statistically there's a lot of people listening to this that have cancer right now and they're speaking to

1:04:43

their doctor and their doctor is saying chemotherapy radiation therapy etc etc gluc glucose has nothing to do with

1:04:50

tumor eat whatever you want yeah and so what' you say to those people who are they've just got a DI agnosis um and

1:04:57

their doctors are saying right listen this is pretty bad severe we're going to suggest that you take chemotherapy yeah

1:05:03

you're not telling them not to take chemotherapy are you I'm not telling them that and what we found what we found is that when you are in uh

1:05:10

nutritional ketosis with a glucose keto index of 2.0 or below my colleagues that

1:05:15

we work with in Istanbul Turkey were able to show that chemotherapies at much lower dosages can be even more

1:05:22

therapeutically powerful when you're in nutritional ketosis so you don't have to get rid of a lot of these different

1:05:27

procedures that we have today I'm just saying radiation for brain cancer I'm not saying radiation for lung or some of

1:05:33

the other cancers okay because if you can if you can shrink those tumors down and make them very weak and vulnerable a

1:05:39

surgical procedure a radiation procedure even low dose chemo could come in and even immunotherapy if you if you took a

1:05:46

big tumor and shrunk it down to a small small nub and it's resistant to a lot of the things they all have to share

1:05:53

something in common for them to survive have this this path that might be an immunotherapy could come in because

1:05:59

they're going to Target whatever all of them have together and you could possibly get rid of it that way I'm thinking of a friend of mine that um has

1:06:06

been diagnosed with brain cancer brain tumor and this is one of the most you

1:06:11

know it's a it's a woman in her 40s or 50s trying to keep her Anonymous as possible um who is just the most fit

1:06:20

athletic person that I know eats amazingly well is literally known for

1:06:26

exercise um and I'd go how how is it possible that someone who I would probably say is fitter than I am if you

1:06:31

looked at their sort of metabolic Health has got a severe brain tumor well it it

1:06:37

they can stay healthy for uh and I'm not saying everybody who has and it depends

1:06:42

on what kind of a tumor it is as well is it a gly blastoma alod dendral Goma you know Panet there's a lot of different

1:06:49

kinds of tumors that want to know that it's it's not growing necessarily but it's big and it's in the brain and

1:06:54

they're going to remove for surgical operation well if they can what we always suggest for the brain cancer if you do metabolic therapy up

1:07:01

front and I've had uh surgeons tell me this uh you can shrink it down because

1:07:07

one of the um one it's angry it's an angry thing right and you can see some

1:07:12

slight Invasion if you can shrink that down so that it's more circumscribed now the surgeon can look at and go oh my God

1:07:18

we we know uh many many scientific Publications the more you can debolt that's called the removal of the tumor

1:07:25

debulking the longer the patient will survive the evidence is massive to support that but you know with a lot of

1:07:31

these brain tumors you don't get it all and there's always some little piece that remains and when you irradiate you

1:07:36

explode the ability to the cells to ferment energy and it's very hard to kill them but but if you can get the

1:07:43

majority of it out and then transition the patient back into a metabolic State keeping the pressure on those tumor

1:07:49

cells you can remain healthy like Pablo I mean these these guys can and when you found in mice is that when ketogenic

Keto Plus Hyperbaric Oxygen Study

1:07:54

diet was combined with a hyperbaric oxygen therapy the average survival time was increased by roughly 80% yeah even

1:08:01

more sometimes now but what okay so why do we hyper do hyperbaric oxygen right

1:08:07

that's the question what's going on with hyperbaric oxygen why is this like a good thing it works best when the

1:08:13

patient and the mouse is in nutritional ketosis okay so look we have a tumor we

1:08:20

irradiate that tumor how does the radiation kill the tumor cells it hits oxygen blows up and it causes a reactive R and

1:08:28

it's like a stepping on a landmine it blows the tumor up right so um cancer

1:08:35

cells protect themselves even though they make a lot of rust they all they're this close to death anyway but they have

1:08:41

a very powerful antioxidant system and interestingly enough that besides

1:08:47

causing the disregulated growth the glucose and the glutamine also protect

1:08:52

them to some extent from the Ross that they're making and can you believe this the Ross r r reactive oxygen species

1:09:01

that are carcinogenic and mutagenic so they're they destroy our our our proteins lipids and and nucleic acids

1:09:09

they're disruptive molecules so radiation will cause a Ross in the micro environment Ros that'll blow up and kill

1:09:16

cells normal and and tumor cells but but if you want to selectively kill tumor cells you with Ross Not to cause your

1:09:24

hair to fall out your gums to bleed and all this crazy stuff you take the patient you put him in nutritional

1:09:30

ketosis and you say he's l a low gki then you go into hyperbaric oxygen which

1:09:35

dissolves oxygen directly into your blood now it's better than just breathing 100% oxygen because you can

1:09:40

actually dissolve oxygen in the bloodstream then you're taking away the two fuels that protect the tumor and

1:09:47

you're giving it internal Ross which kills the tumor internally only to the tumor cell not to your surrounding

1:09:53

tissues so you're killing selectively killing tumor cells without collateral damage to your to the rest of your body

1:09:59

as a matter of fact the rest of your cells are getting super healthy because they're burning ketones in pure oxygen

1:10:04

unbelievable how do we measure if our um can you believe this I can't even believe I'm saying this stuff

1:10:10

myself you really got to know the biochemistry and you have to know the physiology of your own body and you have

1:10:15

to understand evolutionary biology most people just aren't that intelligent including me it's not

1:10:21

intelligence most people most people kind of want things sort of simple principles that they can

1:10:27

live by and implement and also quick and easy yeah of course okay they don't want to do what I'm talking about it because

1:10:33

it might be or the other thing let me tell you one thing and remember it if you do metabolic therapy success rides

1:10:39

heavily on your shoulders you're not sitting there like some Pawn with mannequin some guy's poison and radiating you to to make metabolic

1:10:46

therapy work you are the one doing the gki you're the one in your it's your

1:10:51

soul it's your you're responsible for your existence on this planet you're G to put your your precious soul in the

1:10:57

hands of someone who has less of a knowledge about the the problem than than you might as an entrepreneur I'm

1:11:04

always looking for ways to connect and to create and that's why I decided to launch the conversation cards I turned

1:11:09

to Shopify who also sponsored this podcast and Shopify made it so easy to

1:11:15

set up an online store and reach all of you no matter where you are in the world I remember the challenges we faced when

1:11:21

we first launched the DI Co conversation cards managing inventory ensuring a SC this checkout process and reaching our

1:11:27

audience Shopify stepped in and made everything so straightforward and efficient it was like having an entire

1:11:32

team of experts by our side allowing us to focus on creating content and connecting with you what I love about

1:11:38

Shopify is no matter how big you intend to grow your business they give you everything you need to take control and

1:11:44

take your business to the next level and to say thank you for listening to this podcast we're giving you a trial which is just \$1 a month and you can sign up

1:11:51

by going to shopify.com Bartlet the link is in the description destion below

1:11:56

could you be predisposed genetically to cancer yeah that's what those germine mutations but you can manage that people

Can You Have A Pre-Disposition To Cancer?

1:12:03

think you know my my grandmother had breast cancer my mother had breast cancer so yeah you know they live in a common environment too it's not like

1:12:09

you're like in order to prove that you you you and all the siblings would have to be raised in a different environment

1:12:15

different countries different Lifestyles and then see if you all got cancer at the same time under all these different conditions that's definitely genetic

1:12:21

that's like Huntington's disease tayac disease or these kinds of things they'll manifest regardless of the environment

1:12:27

so you saying to me that I should as a 32y old man that's cancer-free um God willing I think God touchwood um I

Should I Restrict What I Eat, To Stave Off Cancer?

1:12:34

should calorie restrict myself to keep my mitochondria healthy and my

1:12:40

metabolism healthy now I should be in a in a sort of restri I say it's good to

1:12:46

visit the state our Paleolithic ancestors had no choice there wasn't a

1:12:51

doughnut shop on every corner there wasn't pizzas there were there weren't the kinds of Highly processed carbohydrate Foods available to them so

1:12:58

should I be fasting should I be doing keto I you know I don't want to tell you what you should or should not do I'm not a physician here I'm a scientist I study

1:13:06

what causes these things and I study how to manage them you have to read what I'm saying and you have to come to your own

1:13:12

decisions about how you want to conduct your life I've given you information what's your view on fasting fasting is a

What's Your View On Fasting?

1:13:19

powerful uh way to get your body into nutritional ketosis but it ain't easy try doing it try you try doing it see

1:13:26

how how easy it ain't easy right uh but that's why we developed this procedure where if you go um rather than

1:13:33

going cold turkey uh say well today I'm gonna have a big I'm G eat as much as I can and then tomorrow okay you can go

1:13:39

the I can it's the second third days when you start to really know what the hell is going on believe me I've tried

1:13:44

it's It Ain't Easy that's why we developed uh a zero carb diet for 14 days 10 to 14 days just zero eat meat

1:13:52

fish chicken whatever you want but just don't eat any bread pasta this kind of thing on keto um how do we get into that

How Do I Get Into The Keto State?

1:14:00

sort of ketosis state that people often talk about measure your glucose Ketone index how do do that with the the the

1:14:06

keto Mojo meter you can buy it from Amazon okay okay you can buy now don't forget they get a free Libra meter now

1:14:12

for the blood they're working on Ketone blood meters but it's not there yet right now the keto Mojo or some other

1:14:18

keto meters where you could take a prick your finger like a diabetic you take a glucose strip and you put it on the

1:14:23

blood and you put it into the machine it tells you what your glucose is squeeze your finger a little bit more take the Ketone strip touch it to the blood put

1:14:30

it in the meter it gives you the Ketone value push the button gki comes right up okay okay very simple everybody can buy

1:14:38

it from from Amazon get the meter buy the consumables uh and then they can test it this is what Pablo this is what

1:14:44

all the the cancer patients the ones who really want to get into metabolic ketosis I think I've tried keto before

1:14:49

and I say think because I didn't measure my my keto level I was assuming I did yeah no it's really people say well I

1:14:55

haven't eaten you know I'm in ketos how do you know well I blew into this thing and the bulb came out I peed on a strip it looked like it was ketosis they are

1:15:02

indirect measures the most accurate is the blood measure so um it's hard to stay in that state for most people right

1:15:09

this is one of the things because the Temptations in our society are so strong yeah I mean Paleolithic man had no

1:15:16

choice do you think he that was his State that's all he knew for thousands and thousands tens of thousand hundreds

1:15:21

of thousands of years that's all he knew he didn't say let me go down to get a big jelly fil donnut down at the at the

1:15:28

end of the the river there no there's none of that he had to live in that state now we have so many Temptations

1:15:34

all the things that we are biologically clear for when you see obesity that's

1:15:39

evolution in action they are the descendants of our long ancestors that

1:15:44

could hold on to energy so efficiently we were an energy starved species for

1:15:50

the majority of our existence on the planet so anything we ate would be very little we never pee out glucose glucose

1:15:56

is converted to fat and we store energy as fat so those guys are energy efficient human beings now all of a

1:16:04

sudden we find oursel with everything and that's Evolution and action man that we're just we're just you're allowing to

1:16:11

see the how we can store energy so efficiently because our ancestors liveed

1:16:17

through such um environmental forcing we had famines we had long TRS

1:16:23

we our body could store energy so efficiently because it wasn't we had to store what little we could get from the

1:16:29

environment now you've got you know 300 million Americans in this food environment where when when they walk out their front door they see the Dunkin

1:16:35

Donut they can lie in bed and order a Dunkin Donut to their front during 10 minutes you don't even have to unas the

1:16:40

car they hand it through the window yeah no energy no energy expenditure energy in so so you know giving them this

1:16:47

information might be fairly futile because the tempt well that's I'm not here to tell people again I'm not here

1:16:53

to tell people what they should or should not do I'm just here to explain like why do we have all this not mystery

1:16:59

it's all biological evolution you understand biological evolution almost everything that I'm talking about makes

1:17:04

perfect sense um and unfortunately that's not part of our scientific literacy anymore so we need what

Do We Need More Discipline?

1:17:10

discipline discipline is important um discipline is important um you know

1:17:16

every major religion had had a point of fasting um to be whether you're Islamic

1:17:25

Judaism or whatever Catholicism Hinduism whatever I don't whatever they always

1:17:31

had some sort of fasting why why you do fasting because you want to purify your body you want to become closer to God

1:17:36

you want to you want to you want to feel in control uh and that's always part and

1:17:41

if you do it with prayer it's even better so uh there was a reason for doing all that and uh people realized

1:17:48

the Ancients uh knew this kind of thing but uh we don't do that anymore uh we

1:17:53

don't go 40 days without food like Jesus did in the deserts um but a human being

1:17:59

you could absolutely do that I I know because I can look at your weight I can look at your size and I can pretty much

1:18:04

tell you how long you can go with before you died and how do I know that because George Cahill a good friend late George

1:18:11

kale ran the D jlin diabetes center and he he he evaluated people that would

1:18:16

just could water only fasting on until until death and um and some of those

1:18:22

conon MA prison and things so he was able to know how much you could how long

1:18:29

you could go now what about um Angus barbar went 377 days uh without food

What Happens When You Fast?

1:18:36

George Cahill would fast some of these obese people for for 250 300 days what

1:18:41

happens inside their body with with they're burning fat so what happens is you burn fat okay liver stores a lot of

1:18:47

of um bone store the minerals that you can get minerals from your bones you can get a lot of fat storage um vitamins are

1:18:55

stored in fat a lot of vitamin D outside of the weight loss what's going on in you know we said PE religious people

1:19:01

used to fast to get closer to God yeah which seems to me to point to some sort of cognitive change yes and that's from

1:19:07

burning ketones yeah burn when you burn K I said in the brain when your brain starts shifting to ketones your energy

1:19:13

uh the bang for the buck for each calorie that comes in from a ketone body increases the efficiency of oxidative

1:19:19

phosphorylation so you more focused massively and you know this is

1:19:25

why our ancestors with the way that if you're if you are dependent on killing

1:19:30

some animal uh for your survival and you are out on the hunt you are focused uh

1:19:37

because if you're not focused you're going to starve to death so every organ sense organ in our body is super is

1:19:44

super jacked when you're in these ketotic states so and these guys walking around with headphones listen you know

1:19:51

all this I mean this is like depriving ourselves of the natural ways uh of our ancestry don't forget we're not just you

1:19:58

and I are not just here over the last you know 100 300 400 years we are the descendants of members that are same as

1:20:05

us you know hundreds of thousands of years ago they were they just didn't have the technology that we have today

1:20:11

but if you could brought a Paleolithic man from say 500,000 years ago and you gave him a bunch of donuts and told a he

1:20:18

would die went to heaven you mean to tell me I don't have to go out and kill the elk anymore they're going to hand me the food right through the window of

1:20:23

course he's going to do that you go in the cave and you throw a bunch of jelly fil Donuts into a bunch of

1:20:29

Caven who been chewing on the half eaten rat or something you think they're not

1:20:34

going to eat those jelly donuts they have a some chimpanzees live with a family down in Florida I know some

1:20:41

YouTube thing The Chimps they're eating the food with the family and then they give jelly sandwiches to The Chimps

1:20:47

banging on the table you think they were going to go crazy chimpanzees loving the jelly sandwiches do you have kids

What Advice Would Dr Seyfried Give To His Kids?

1:20:53

yes what advice would you give to your children if they're listening to this now about um how to prevent their chance

1:21:00

of getting sick from cancer or these other well they probably say well Dad how come you don't do a lot of the things first of all I'm not telling I

1:21:05

told you I don't tell anybody what to do or or how they do it I'm just telling you the science behind why why things

1:21:12

work um yeah my my my my my children my two sons and my um they're all very very

1:21:19

successful and uh they they said if we ever got cancer we would be doing your we would be doing metabolic therapy if

1:21:25

we were to ever get cancer and I said just keep you know exercise and and do what you can do the best you can in our

1:21:31

environment I mean don't get me wrong I'm eat I'm eating a jelly donut I'm drinking beer I'm drinking whiskey why

1:21:38

because I like it but I'm not going to be doing it all the time you know it's just it's just I'm not going to be

1:21:43

saying oh I'm going to eat pizza sure but I'm not going to be uh uh not doing it I do water I do intermittent fasting

1:21:50

I don't eat for 18 20 hours at a time I do a lot of exercise over at the university the gym and the facilities

1:21:57

that we have um but I but I understand and then if I were to get cancer I would

1:22:02

have to um bite the bullet and do what I'm do what I know works as much as it wouldn't be pleasurable but it would be

1:22:08

certainly a better alternative than being radiated and poisoned I'm telling you that if that has built your

Why Isn't Dr Seyfried Trying To Be Metabolically Perfect?

1:22:14

conviction to the point that you're so convinced that the real issue is this sort of metabolic dysfunction

1:22:20

um why aren't you optimizing your life to be sort of metabolically perfect well because I live in the same Society you

1:22:26

do yeah okay and and fortunately yes our technology has improved uh

1:22:33

significantly um you know I'm not a monk I'm not going to be in some Monastery you know chanting something um I I I am

1:22:41

a member of the society just as you are and I enjoy the things that we have to offer us to make our lives a little bit

1:22:48

more pleasurable there's nothing like sitting down over a nice meal and having a discussion with some wine and enjoying

1:22:53

it and enjoy the moment but don't but not to be locked into that kind of uh

1:22:59

diet and lifestyle all the time uh puts you at risk there's an election going on

What Food Laws Would Dr Seyfried Introduce?

1:23:05

in the United States at the moment Trump versus Camala Harris um if you won the

1:23:10

election and you became president of the United States and you had to introduce some regulations or some laws around

1:23:16

food and all of these kinds of things what would you do well I I think you

1:23:21

know you're were talking about a food industry you're talking about a multi-dimensional economy I I would not

1:23:29

again you don't want government to tell you what you should do you should make

1:23:35

the choices but you have to recognize are there are there choices and what are these choices right now we're not in and

1:23:41

we're not seeing or understanding uh how things harm people if if we have an

1:23:47

obesity epidemic and that would put you at risk for all these horrific chronic diseases why do they not know that we we

1:23:55

introduced some regulation in the UK regarding smoking so you can't smoke inside anymore well that's but do you see this your secondhand smoke can

1:24:02

impact negatively the person sitting next to you this uh uh obese person's

1:24:07

personal choice to be obese is not going to make you obese or sick so this is a different kind of a situation um it that

1:24:15

has to come from internal to the person and they have to be concerned with their own health what about drugs though like

1:24:20

cocaine is not legal so why can't they intervene to say you can't have Dunkin Donuts um because they're both you know

1:24:29

gonna harm the individual I think you'd get a revolution if you can't eat a Dunkin Donut you were not going to get a revolution if you can't have

1:24:35

C you try take go down here in Brooklyn and take away all these Donuts from people you know you're going to see

1:24:42

they're going to go you know it's it's like it's personal choices I I I like

1:24:47

Dunkin Donut I mean I like the coffee especially but um but you can go to donnut shop and get some of these

1:24:53

crawlers and jelly fills and Honey Dipped are you kidding me these things are delicious you ever get these blueberry muffins you tremble while you

1:24:59

eat some of this stuff you know it's and I'm not going to take that away from me but if I want one I'm not going to be oh every day I got to eat no I just don't

1:25:06

eat it I on the weekend I might get one and even sometimes two or three weeks months go by before I'll get one you

1:25:12

know but uh but when you get it man you enjoy it you really love it are you

Is Dr Seyfried Hopeful?

1:25:18

hopeful I am very hopeful because PE when the science comes you can't

1:25:23

suppress the truth it's going to come out the evidence the scientific evidence is there I'm documenting this scientific

1:25:30

and it's based on the shoulders of OT warberg are you kidding me I mean this was a giant in the field of biochemistry

1:25:35

it's not like I made this stuff up I'm just extending what he has done to a new dimension and putting it into a

1:25:41

practical application which he had never done so it's just an extension of of of

1:25:46

the knowledge base o over this time why' you care so much why do I care so much

1:25:52

you know I'm not in it for the you know what I'm in it for I want to see the the scientific

1:25:59

principles substantiated if you know that you can keep these people alive at a higher

1:26:05

quality of life based on the knowledge of the science that's doing that that's gratification man it's gratification to

1:26:13

know that these if because because you arise on understanding the mechanism of the problem and if you say you know if

1:26:20

we do it the way we're writing a big treatment protocol as we speak it's review a really comprehensive treatment

1:26:26

protocol and we Institute that in the clinic and for G blastoma patients and these Advanced cancers they're not

1:26:32

they're not living a few extra months they're living several years longer why because you knew the science what's

1:26:39

wrong with that that's that's gratification you don't have to make a billion dollars on that all you have to

1:26:45

know is that all those folks are living longer because you understood the science that was put into practical application what's WR that's our our

1:26:53

research is supported by philanthropy and private foundations that money allows me to to to do these experiments

1:26:59

to test what I'm testing on pre-clinical models and then we translate it back into the clinic directly and we see like

1:27:06

Pablo Kelly he should have been done he should have been done years and years ago he lived all those years extra he's

1:27:12

had a wife and he's got kids he didn't have to have his sperm Frozen he didn't have to have any of that stuff done

1:27:18

what's wrong with that keep I'm seeing people that are should have been dead a long time ago and they're still alive

1:27:23

and they're saying I'm doing fine I get calls from people geez I thought that guy would have been a goner he's still

1:27:28

alive he's doing well I said that that keeps me going because it tells me that we're on the right path this is a

1:27:35

solvable problem this cancer this cancer can be dropped significantly you can

1:27:41

take away the fear people now put the put it on their shoulders I know what to do how to do it I'm going to follow this

1:27:46

will it work for everybody no well it will help a lot of people much more than what we have today but it's Paradigm

1:27:52

change massive paradigm change so uh they will come to know it's just a

1:27:58

matter of time I don't know how long it's going to take but I ain't going anywhere I'm continuing to do this I'm going to get better and better results

1:28:04

and we're going to keep pushing I published these case reports in the scientific literature let the scientific field uh make their decision on the

1:28:11

results from these papers and if you are to succeed what happens people improve

And What If You Are Successful?

1:28:17

um what I'm not going to live forever so but I know that what I've done with with

1:28:23

following Auto warberg and cleaning up the misconceptions and misunderstanding of why he he was stalled when the field

1:28:29

ran off chasing jeans we got to bring bring it back on track it's a metabolic problem with metabolic U Solutions so

1:28:37

that will help a lot of people but it's also going to change a lot of way people are thinking about this but I I can tell

1:28:43

you they want to open clinics I get calls from from Asia Africa South America they want to open clinics people

1:28:50

are being brutalized by a system that's not working don't forget besides the terrible Financial tox the personal

1:28:57

physical toxicity people have gone bankrupt their marriages are falling apart because they can't pay for the

1:29:03

expensive drugs on these cancer things and they die and the bills are passed on to their level this is immoral stuff is

Are There Any Studies That Have Broken Dr Seyfried's Heart?

1:29:10

there a particular case study that's broken your heart more than any others Trudy Dupont who originally let me we we

1:29:18

built a glucose Ketone index calculator on her Pablo is I'm still we're still

1:29:24

ated by Pablo's loss because Pablo was a a guy that I've known for 10 years

1:29:29

worked him through and then all of a sudden he gets a cerebral hem and dies he was our poster child for how long you could live with a glio blastoma on

1:29:36

metabolic therapy but he didn't die from the cancer um yeah have there's some others that we wished they could have

1:29:43

lived a little bit longer uh with the appropriate help what I find is that sometimes within the family there's a

1:29:49

lot of the guy he's I really want to do what you're doing but my wife and kids saying I'm foolish to do that so it's

1:29:56

it's still a very we're in a very early stage of this we haven't really worked

1:30:01

it out into a an effective standard yet it will come so people and the other

1:30:07

members of the family get super help when they all work together and they do it everybody says I never felt so

1:30:12

healthy in my life um gu tanom had Advanced prostate cancer he wrote a book and he's on the web and he had

1:30:19

hypertension high blood pressure overweight more obesity and all everything and then he does uh 18

1:30:25

several 18-day water only fasts got himself everything all these things went away his diabetes went away his

1:30:31

hypertension high blood pressure and the cancer can't be found so is he cured I have no idea but but he's managed yes

1:30:38

he's managed and he's healthier so what's wrong with that isn't that isn't that ultimately what medicine wants to

1:30:44

do keep people alive longer and a healthier quality of life yeah how many more do we need they say oh that's a

What Would Dr Seyfried Say To Someone Listening?

1:30:51

fluke that's a fluke that's a fluke that's a fluke that's a fluke that's a fluke how many damn flukes do you want if there's someone listening now and I'm sure

1:30:57

there's going to be many thousands and tens of thousands of people listening um that are currently battling cancer have early

1:31:05

stage diagnosis I know I feel bad about this because people say oh I want to do medicab bolic therapy where can I go and

1:31:11

they go to their local hospital and get slapped down there's no evidence there's everything that's should come out of my mouth has never been taught to me in

1:31:17

medical school so what do you say to those people you know I say I I say the

1:31:24

I I'm sorry that the medical establishment has not come to recognize what I'm saying and then I tell them WR

1:31:31

your c i i you know it's it's the change has to be coming from the people ain't going to come from the top medical

1:31:37

schools they they are doing what they're doing very the status quo is very

1:31:42

profitable the status quo is very effective for these people but it's not helping the cancer patient uh as well as

1:31:48

it can and don't forget we're not throwing out all this stuff we're just asking people to know how to use the tools we have in a better way we don't

1:31:55

have to throw out immunotherapies radiation we don't have to throw out toxic poisons we just have to know

1:32:00

better how to use it when the patient is in this new state and the data will prove it but who's going to do that

1:32:07

who's going to do that the doctor says I'd love to do this if I but I'm going to lose my license if I do it what

1:32:12

what's going on with that they wrote the standard of care as if it were in granted can't be changed no it should be

1:32:18

flexible when new evidence comes I don't believe your evidence what number do you not believe what what piece of science

1:32:24

do you not believe on this well I haven't read it they you can't be right when 99% of the world says it's this way

1:32:30

and you're saying it's something different that's confirmation bias you're not looking at the numbers and then when they get cancer they come hey

1:32:36

what can you do for me you know it's like it's like that but yes it has to change it will change because we're on

1:32:43

the momentum to move it it's people are coming to know this and once the change happens it's going to be like a a major

1:32:50

major change and people people are going to have to just readjust Thomas we have a closing tradition on

Guest's Last Question You can purchase Dr Thomas' book, 'Keto for Cancer: Ketogenic Metabolic Therapy as a Targeted Nutritional Strategy', here: Follow Dr Thomas

1:32:56

this podcast where the last guest leaves a question for the next guest not knowing who they're going to be leaving it for and the question that's been left

1:33:02

for you is imagine the end of your life your closest friends and family are at

1:33:09

your funeral what do you imagine or hope they say about

1:33:16

you he changed the course of cancer

1:33:22

treatment for the world

1:33:27

it that's it Dr Thomas seed that is exactly what you're doing

1:33:33

and I think that's an extremely you know I can't even find a word that describes the profundity of

1:33:39

such a mission um because so many people are struggling with cancer as if it is this sort of opaque black box of a

1:33:47

disease that strikes us at random and picks on people like roulette um and debilitates their lives out of the blue

1:33:53

and having more information out there about the root causes of these issues turns the lights on and allows us to go

1:33:59

in search of better solutions to what has always been a really really complex hard to understand disease your work

1:34:07

runs almost entirely I believe on philanthropic donations right that's right so that's people that um they make

1:34:14

donations to both the my University Boston College which is a Jesuit university in Chestnut Hill

1:34:20

Massachusetts and we we follow the Jesuit philosophy of service to others predominantly um and uh private

1:34:27

foundations so if someone wants to make a donation where do they go do they go to your website I know there's a donation button there uh they they go

1:34:33

primarily to our University they can just um they have a on my on my University biology web page there's a

1:34:40

donation button and Travis christopherson's foundation for metabolic cancer therapies which is a

1:34:46

503 uh Foundation he he supports our research through philanthropic donations

1:34:52

to his foundation I would um urge anyone that wants to support your mission to go to your University website there's a

1:34:58

donation button there which I saw it earlier on click that button and they can make a donation if they that's right and and and and that and and Travis

1:35:05

Christ christopherson's Foundation okay which is the foundation for cancer metabolic therapies it's a 503 uh

1:35:12

Foundation Travis christopherson's when people email me I send them the the links to those to those found I cannot

1:35:19

accept personally any money from anybody okay that's one thing that's one thing I'm not here so people say oh I want to

1:35:25

give you money to do it no no no I can't you have to give it to the university that comes through me through the appropriate channels to support my

1:35:31

research through the university Dr Thomas C thank you so much for your time today and I'm I'm I'm hugely inspired

1:35:37

and um enlightened by everything we've discussed and I think there's a bunch of very straightforward practical things

1:35:43

I'll be implementing in my life specifically buying one of those bloody machines so that I can keep on in my GK

1:35:49

index yeah gki gki index yeah glucose Ketone index well listen thank you very much for having me here because your

1:35:56

your programs and others um alert people to know that there are alternatives

1:36:01

effective Alternatives and once the system changes uh the outcomes will not be so Bleak as we currently have them

1:36:10

[Music] today isn't this cool every single

1:36:18

conversation I have here on the D at the very end of it you'll know I ask the guest to leave a question in the Diary

1:36:25

of a CEO and what we've done is we've turned every single question written in the Diary of a CEO into these

1:36:32

conversation cards that you can play at home so you've got every guest we've ever had their question and on the back

1:36:40

of it if you scan that QR code you get to watch the person who answered that

1:36:46

question we're finally revealing all of the questions and the people that

1:36:51

answered the question the brand new version 2 updated conversation cards are

1:36:57

out right now at Theon conversation cards.com they've sold out twice instantaneously so if you are interested

1:37:03

in getting hold of some limited edition conversation cards I really really recommend acting quickly

1:37:09

[Music]

1:37:23

oh

1:37:29

[Music]

English (auto-generated)

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