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Dr. Ron Hunninghake: Well, welcome everyone. This is Dr. Ron Hunninghake with another episode of the Real Health Podcast, and it's our real privilege today to have Dr. Amy Rothenberg, who is the author of "You Finished Treatment, Now What?: A Field Guide for Cancer Survivors." Dr. Amy, I'm very pleased to have you on our program, and I think our patients are always asking me, "What do I do now?" Actually, it's pretty neat when you can get to the point of view where you start to think of yourself as a cancer survivor because many people are still in the trenches fighting it. But I'm just curious if you'd just tell us a little bit about your story and how you got to writing this book?

Dr. Amy Rothenberg: You bet. Thank you for the opportunity. I am a licensed naturopathic doctor. I've been in practice for the last 36 years. I was living what I could only really define as a pristine, healthy lifestyle with regard to things like my diet, exercise, time for rest and relaxation, low stress. I have a beautiful life here in rural western Massachusetts with a supportive partner, healthy children. I was diagnosed in 2014 with breast cancer. I did everything conventional medicine asked me to do. At the same time, I used all the naturopathic approaches to help enhance efficacy of conventional care, prevent side effects, address side effects that arose. Then when I was done, because I turned out after testing negative several times for the BRCA mutation to have the BRCA mutation. I went to have my ovaries removed prophylactically, and lo and behold, there was cancer on both ovaries. That was my 2014 book ends. I found a lump on my breast, January 1, 2014. My last chemo for the ovarian cancer was January 2, 2015. That was a bit of a ride, as you can imagine.

I really had the opportunity to really work this from both sides of the Johnny, so to speak. I had incredible care at Mass General. I had a dream team of naturopathic integrative oncologists at my side, including my husband who is sort of a one man research phenom. We got through it. Afterward, it became very apparent to me that the conventional medical world besides doing active surveillance through laboratory work and scanning, really had nothing to offer me. I started writing on Huffington Post and then on Medium about what next, what now? It was a 10-part series that I did. I got so much feedback from that series, "This is a book. You have to turn this into a book." I personally needed some space from it. I put it down for about five years and then I picked up the thread a few years back, and it's the book.

It's really a compendium, I think for people who have finished treatment, who want some guidance and support. A lot of the things that you offer in your clinic, of course, and I know you guys are sort of all on top of this. But for the vast majority of cancer survivors and there are thousands and thousands of them and more all the time because conventional cancer care and integrative oncology is creating a situation where we have more and more survivors. There's really a demand for this information. In writing the book, there's a lot of me in the book. I share my story openly. I was a model patient, but I also had my bad days, and I share some of that and what it's like to get a bad diagnosis and how to recover and be resilient. At my last of 16 rounds of chemo, I said to my husband, "Okay, honey. In six months, we're

going to do our first triathlon." I had been very athletic growing up. I always stayed in shape. I'd never done triathlon. My husband looked at me and he said, "I'll be part of the photography team."

Truth be told, six months later, I did my first triathlon. I've done one a year since then. Something we were talking about briefly before we started recording was how, for a lot of people, cancer is a wake-up call. What else can you do, especially, somebody like me who's already living a very healthy lifestyle. There was still more I could do, further tidy up my diet, add some specific anti-cancer supplements, work on my microbiome, get rid of some of the activities and people that were a drain on my energy. The book really grew out of what I perceived as a real need. I hope that it helps people.

Dr. Ron Hunninghake: Well, I like the idea of being a cancer survivor, because we see so many cancer patients that really they should be inculcating that attitude from the very beginning. You might even say given the environment that we live in, the stress, the chemicals, the food that's bad, all the various things that set people up for cancer, that attitude of being a cancer survivor, even before you get diagnosed. Dr. Riordan, himself, used to say, "We all carry cancer cells within us." The idea is that if we take good care of ourselves, we can prevent the expression of that into a full-blown cancer. It comes down to mindset. Maybe if you could tell our listeners a little bit about what happened to your mindset before and then after, and how has that translated into your ongoing lifestyle?

Dr. Amy Rothenberg: I think mindset's very important. I agree with you 100% that living a healthy lifestyle in all these various areas not only helps prevent cancer, but it also helps prevent diabetes, heart disease, autoimmune disease, mental illness, chronic insomnia, there's so many things like that. I had a book launch party a couple weeks ago and somebody said, "I think you need to do a series. You were diagnosed with diabetes, now what? You were diagnosed with heart disease, now what?" Honestly, about 75% or maybe a little less than that of the information that we share with patients goes across the major chronic health illnesses. We know that close to 85% of these illnesses are lifestyle preventable. I'm also very careful not to blame patients. I'm more interested in focusing on the concept of self-agency and the power and the capacity that we do have for making better choices.

I always emphasize, your body reflects the habitual, not the occasional. I don't want people to become rigid in the way that they live because that's no fun for them and the people around them. In terms of my own mindset, I would say that I really have stayed true to the mindset I went in with, which is probably part of the reason why I handled conventional care as well as I did. I further refined some of the pieces as related. Where I related to my diet, I further tidied up my diet, I bumped up my good exercise habit, I extenuated the time that I spend doing hobbies. In other words, I had the great fortune of being able to work less. A lot of the things that we ask people to do in terms of a healthy lifestyle do require time and do require energy and forethought.

People who are working full-time jobs and many of those are 60 or 70 hours a week and taking care of family or being caregivers for other people in their family, it's harder. I've gotten pretty good at streamlining things for people and offering people a menu of options. Nobody can do everything. Nobody should try to do everything. Nobody can take every possible supplement that has been shown to be anti-cancer. It's cost prohibitive. It's not great for your digestive system. It's not fun. It's that fine line between empowering patients, not blaming people, not offering false hope, but also citing the evidence. I mean, this is not things that we're making up. This is evidence-based integrative medicine, where there's a lot of evidence about how lifestyle impacts the survivorship years.

Dr. Ron Hunninghake: I know this is a question that many of our listeners might have, did you, when you were diagnosed and you realized, "Hey, I'm going into the heart of the beast here, and I'm going to

be working with conventional oncologists." There's a lot of our patients that fear oncology. They fear losing control of their choices. I was just going to ask you how you were able to overcome that mindset of us against them and starting to see more of a partnership? How do you inculcate that into that relationship?

Dr. Amy Rothenberg: I have a whole chapter in my book, early on. A book, which is called basically, "How to Talk So Your Oncologist Listens and Listen So Your Oncologist Talks." With apologies to Faber and Mazlish, who wrote a wonderful book years ago called "How to Talk So Your Kids Listen and Listen So Your Kids Talk." One of my parenting bibles. But I knew that I needed to create a dream team. I went to the smartest, best people I could access in my region. I had perfect faith in them. I'm a person of strong faith anyway. I put my faith in the people who I had been referring patients to for years. I already had relationships with those people. We often will borrow from the world of scuba diving. There's an expression in scuba diving, which is basically, "We're going to plan the dive, and we're going to dive the plan."

I really love that expression because what happens when you're diagnosed with cancer, even if you're a physician like myself, is that everybody is an expert. You have people coming at you on the street, in your synagogue or church, by email, by text, with ideas of things you should do and things you should try. That's very overwhelming for a lot of cancer patients. I got very good at, and then I got very good at instructing my patients to put up one hand, "I'm not actually taking any more information right now. Thank you for your concern. I appreciate it. But I have my plan set, and I feel very comfortable with it." You're not offending everybody and understanding people are coming from a place of really wanting to help and be supportive, but it's too much. No, it's too much coming at me from different places.

For me, I didn't feel that antagonism because I had already been through the cancer travails with so many patients over the course of my career as well as family members and friends. I knew what I wanted, and I knew what I didn't want, and I was able to advocate for myself. That's obviously a reflection of both my personality and temperament and also my education and training and experience in the clinic. I will coach patients of mine who are about to embark on this.

About these very topics. Meet your doctor fully dressed, things like that. Bring in your list of questions and say ahead of time, "I have a number of questions I want to be sure we save time for." There are ways of just taking back a little bit of the capacity for self-agency instead of feeling like a victim in a system that is enormous and big and you're just sort of a little thing in it. It's a beautiful question and I appreciate the question. I love working with patients on this, because it really makes and breaks the difference of how you're going to go through, for a lot of people six months or a year, if not more, of treatment.

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Dr. Ron Hunninghake: I think many people are afraid of side effects from the treatments and definitely they are a reality. One of the things I encourage people with is that the supplements, the lifestyle changes, the exercise, all the various things that need to be done while you're in the midst of treatment

should be done, and it will help you reduce side effects from that treatment. I didn't know, was that your experience?

Dr. Amy Rothenberg: Absolutely, and I wrote extensively on the Huffington Post. You can type in my name and 2014 and cancer. I did a whole series. Here's what you do during chemo, here's what you do during radiation, here's what you can do during immunotherapy. Obviously, natural medicine is by definition individualized to the patient, but there are certain elements that are universal, and I follow them. I mean, probably the best example for me is we know that people who are well perfused, meaning their blood is moving around well, do better with radiation. Cancer cells are more radiosensitive. You're better at protecting underlying organs. I had my radiation treatments in good weather, that's key, at least for me here in the Northeast. My husband and I would walk two or three miles in a park right adjacent to the hospital where I was receiving my radiation treatments before I got on the table for my zap, so to speak.

I was often sweating freely, I was quite warm. People would say, "Oh my God, you look like you're getting hot flashes." Like, "Nope, I just went for a great walk." I got on the table knowing that that was the best possible way for me to receive my radiation treatments. Yes, doing things that are proactive that enhance efficacy of conventional care and it simultaneously prevents side effects. I mean, it makes so much sense. My oncologist, to their credit, continually asked me, "What else are you doing from your end? What else are you doing to keep your blood counts up? How did you get your platelets up? They were in the toilet." I would share freely and cite the evidence and bring in studies and educate along the way while still allowing myself to be the patient. Letting people be very nice to me. Taking the meals in from my neighbors and things like that. I really knew that I also was the patient and I needed to focus on my own healing, not just educating other people during the process.

Dr. Ron Hunninghake: It really sounds like you did exactly what Dr. Riordan did when he was alive. He said, "Our patients are co-learners." If a patient understands that idea, that means that they're co-learning and their doctors are co-learning at the same time. There's an empowerment both ways. A lot of doctors, they are walking around like, "Gee, do I have to fight the patient on this or that?" Or the patient feels that same way. But if you have the attitude of co-learning and informing both ways what is needed, what you are concerned about, then you develop that partnership that is empowering and healing.

Dr. Amy Rothenberg: Yes. I think it also impacts both quality of life and health outcomes for sure. In writing my book, my goal really was how can I help people improve quality of life and how can we impact health outcomes? It's something that, I mean, we're all going to die, that's something we know we're all going to die at some point. But a lot of my cancer patients who are older with diagnosis or who've been in my practice for 35 or 36 years, they have died because they're 85 or 90 of something else. Of course, I hate losing any patients to anything, but I'm really interested in quality of life and health outcomes.

Dr. Ron Hunninghake: One other area that I would like for you to maybe address and because even in Dr. Winters' metabolic approach to cancer training that I went through. She says, "Yes, we want to do all the lifestyle things, the dietary things, the supplemental things, the inflammation regulation, immunity enhancement." But the bottom line with cancer patients, very often stress is a factor at the beginning, in the middle and I'm going to say even at the end. Patients that finish their treatment, there's this fear of, "Is it going to recur? How will I know? What am I going to do?" This fear and stress I think is a theme

that we see running through the whole cancer journey. How did you personally handle that and what advice can you give our patients in that regard?

Dr. Amy Rothenberg: I think it's important to underscore the idea that a lot of people come into a cancer diagnosis very anxious and stressed out. Well, we're living in a particularly stressful time. We've never, in all my years of practice, seen anything like it. Rates of depression, anxiety, insomnia, sort of skyrocketing. We know a lot now, and every month seems like we know more about psychoneuroimmunology. How our mind affects our nervous system and our nervous system affects our immune system. We're 100% reliant on our immune system to keep cancer cells that we all do have floating around at bay. We know that the microbiome plays an enormous role in our psycho-emotional health as well. For me, I came in with a pretty strong head game, but a lot of cancer survivors have what is called somatosensory amplification. They feel a little something, and it's like, "Oh, I wonder if that's cancer." "Oh, I have this thing in my tummy, I wonder if it's stomach cancer." It's so not on the money. It's just way off. But that's a common theme for many cancer survivors. I have a funny story about that myself. One evening, my husband and I were doing something in the kitchen. I walked into the kitchen cabinet, got a big egg on my forehead, black and blue. It was just terrible. I put ice on it. I took my arnica. I did all the natural medicine things to help. The next day, I woke up and had a splitting headache. Then, my first thought was like, "Oh my God, I hope I don't have brain cancer." My husband and I, we both cracked up. It was like, "You just hit your head pretty hard. It's probably not brain cancer."

I think that one of the chapters in my book is basically on the head game with the understanding that a lot of people have adverse events from childhood. People are overworking. People are dealing with caregiving other members of their family. The stress, as we said, overflowing for many people. What do we need to do? We need to look at our lives. Are there any places we can reduce that stress, sort of like fixing the leaky bucket, stop being in a relationship with that person that is very stressful for you, or maybe shifting your work responsibilities or if you're able hiring a help in the home? This takes different forms for different people. But it's a conversation that I am always having with all my patients, not just my cancer or cancer survivor patients. What are we doing to help with stress reduction and stress management?

The number one treatment for stress for everybody is exercise. It raises our threshold for feeling stressed. It helps us dissipate the stress we have. It helps us be better perfuse, which helps to circulate all those good nutrients that we're hopefully eating, et cetera. What else is part of the good head game? Some gratitude practice has been proven to be such a central part for many people. Shifting your posture and developing some sense of gratitude, whether that's journaling or that's speaking gratitude around a dinner table. There's many ways to do that. Meditation, we know any kind of meditation at all, whether it's the form of prayer, breathing exercise, mindfulness and meditation. There's so many options now. These are all things that help. For a lot of my patients to say, "I don't have time to meditate, I'm not trying to meditate." That's exactly the person that needs to meditate. We just start with baby steps. We know that once a habit is formed, habits tend to stay.

How do you start a new habit? Evidence shows that starting a new habit by linking it to an old habit is often the best way to go. If I have somebody who really needs to take five deep breaths this day, it's not asking for the moon. I'll say, "Why don't you do it right after you brush your teeth?" It's pretty sure they're going to brush their teeth every day. Just sit there in the bathroom and just take five breaths after you brush your teeth. Something as simple as that we know impacts the way that we think and the way that we experience stress. It's a great question and I feel like this is the big frontier. This is the big frontier. How to get people's mind and spirit working in sync with the physical changes that seem easier

to make. It's easier to take a fistful of supplements and maybe cut out gluten, if you need to do that, than it is to take by the horns, the stresses in your life and get them into a more manageable place.

Dr. Ron Hunninghake: Dr. Amy, we could go on and on. I just had this really interesting thought, though. Really everyone that's listening, even if you haven't had cancer, you should really read Dr. Amy's book, "You Finished treatment, Now What?" What about you don't have cancer, read this book, and you'll learn all the things that you should be doing not only after cancer, but during cancer, but I would say before cancer. Then, that can help you avoid the cancer in the first place, hopefully. But like you say, in your case, you were doing all that stuff, but nature had another idea, but you survived it well, and that's the key. Thank you very much.

Dr. Amy Rothenberg: I would say the number one treatment for cancer is really prevention. I just have been saying that for 30-plus years. We do have so much capacity to impact our health regardless of what we're struggling with. The fact that a lot of people feel disempowered in the medical setting is also common in people who feel disempowered in other aspects of their lives. This is one place where I feel as a naturopathic doctor, I can help people take back some of that self-agency and really see wonderful, wonderful results.

Dr. Ron Hunninghake: I agree. Again, thank you so much for your sharing your experience today and the book. I encourage all of our listeners to pick it up and learn new ways that you can take better care of yourself and be a forever cancer survivor. Dr. Amy, thank you again.

Dr. Amy Rothenberg: Thank you so much.

Dr. Ron Hunninghake: Thank you.

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