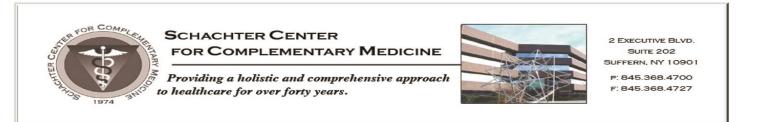
Using Available Resources to Prevent and Treat Cancer and Other Degenerative Diseases

Michael B Schachter MD, CNS Schachter Center for Complementary Medicine 2 Executive Boulevard; Suite 202 Suffern, New York 10901 845-368-4700; www.schachtercenter.com **Breast Cancer Options Lecture in New Paltz NY** October 22, 2017

Information about Today's Lecture

- The PowerPoint slides for this lecture and other recent lectures by me can be found online at our website: <u>www.schachtercenter.com</u>; click on the red box in the upper right-hand corner of our home page and then on lecture slides of the lecture you want to view
- Many of the slides contain links to Youtube videos or articles for more information
- Some of the topics to be discussed today:
 - Integrative oncology vs the alternative approach to cancer
 - Some of the drawbacks of conventional CA treatment not discussed
 - Four relatively non-toxic approaches in which non-toxic substances can kill cancer cells while leaving normal cells alone (salvestrols-B17 or amygdalin or Laetrile-Gonzalez and Pancreatic enzymes and vitamin C
 - The Beljanski products
 - Galectin-3 and Modified Citrus Pectin
 - Two new books likely to eventually change the way medicine is practiced

Accessing PowerPoint Presentations by Clicking on Red Box on the Right



Combining Innovative Ideas in Nutrition and Holistic Health with the Latest Developments in Mainstream Medicine

The Schachter Center for Complementary Medicine, centrally located in Rockland County, NY, serves many patients in the tri-state area. Additionally, patients have traveled to our center from all over the U.S. -- from around the world -- seeking the best in alternative, integrative and complementary medical care.



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TACT2 Trial

The Center's director, Michael B. Schachter, M.D., is a 1965 graduate of Columbia College of Physicians & Surgeons. He is board certified in Psychiatry, a Certified Nutrition Specialist, and has obtained proficiency in Chelation Therapy from the American College for Advancement in Medicine (ACAM).

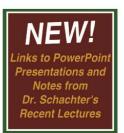
The Center is now participating in the TACT2 Trial to Assess Chelation Therapy. Click on the TACT2 button at right for further information.

Dr. Schachter has now achieved over 40 years of clinical experience in CAIM -- Complementary,

Alternative and Integrative Medicine -- which, combined with the latest scientific research, enables a more effective treatment protocol for every patient seen at the Center.

Dr. Schachter looks back on the accomplishments of the past 40+ years.

Dr. Schachter, together with our talented staff of trained professionals work together to evaluate and treat patients who have a wide variety of medical complaints as well as those who simply wish to optimize their health.











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SCHACHTER CENTER FOR COMPLEMENTARY MEDICINE

Providing a holistic and comprehensive approach to healthcare for over forty years.



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PowerPoint Presentations and Notes

from Dr. Schachter's recent lectures

Under each lecture heading below, you will find links to its corresponding flyer, slides and resources. You may need a PDF file reader like Adobe Reader to open these files.

NYC NAVEL Expo - May 7, 2017

Beating the Fear Out of Cancer: Effective Approaches in Addressing Mitochondrial Metabolic Diseases



Lecture Slides

Resources

The Annie Appleseed Project: March 4, 2017

Focus of Conventional Cancer Treatment

- Destroy cancer cells at all costs
- No emphasis on prevention, lifestyle, good nutrition, avoidance of pollution and synthetic chemicals
- Patients often told to avoid all nutritional supplements, as they might interfere with conventional treatment
- Often progress in treating the cancer is measured by tumor shrinkage with CT scans & PET scans—BUT, this is NOT a good measure of progress because it is not well correlated with longevity
- An alternative way of viewing cancer is to regard it as chronic degenerative disease to be managed like diabetes, rather than trying to abolish every last cancer cell

Integrative vs **Alternative** Cancer Treatment

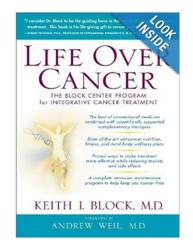
- Focus of integrative oncology is to improve results of oncologists and reduce the adverse effects of conventional treatment by improving diet, adding supplements, using acupuncture, etc...
- Conventional approach is taken as a given
- In my experience, cancer patients who combine conventional and alternative treatments will generally do better than those doing only conventional treatment
- But, might they do even better by NOT doing any conventional therapy at all in some cases?
- The question most often asked is will nutritional supplements interfere with conventional treatment?
- Rarely asked is: Will the conventional treatment make the results of alternative treatment results worse?

Keith Block MD; An Integrative Oncologist

- Claims he uses the best of conventional medicine combined with "scientifically supported complementary therapies"
- Advocates "proven ways" to make conventional treatment more effective while reducing toxicity and side effects of these treatments
- Works closely with conventional oncologists
- Conventional therapy is a given and alternative methods are used to reduce adverse effects
- Recently, one of my patients who lives near him and was looking for a support group was refused because she is alternative, rather than integrative



Keith I Block MD



Downside of Diagnostic Procedures

- Scans emit considerable radiation and radiation exposure causes cancer
 - CT Scan 100 chest x-rays
 - PET Scan 500 chest x-rays
- Size of tumor not good marker for longevity of patient; yet this is what is generally used
- Success should be measured by survival time and quality of life and not shrinkage of tumors, which are frequently temporary
- Gadolinium widely used as a dye in MRI's recently given an FDA warning that it is retained in some tissues like the brain
- Biopsies cause inflammation and may stimulate cancer growth if cancer is present or contribute to the development of cancer if it isn't present; infections, bleeding or other complications are common (e.g. Numerous complications occur following prostate biopsies)

Four Approaches to Killing Cancer Cells without harming Normal Cells

- Takes advantage of fact that cancer cells differ from normal cells and may have different responses to certain substances:
 - Cancer cells have large amounts of the enzyme CYP1B1, which is not present or very low in normal cells; allows salvestrols to stimulate cancer cell death, but cause no harm to normal cells
 - Cancer cells are high in the enzyme beta glucosidase which is low in normal cells; this enzyme splits off 2 sugar molecules from amygdalin (Laetrile or B17) which then results in release of cyanide and benzaldehyde, both of which are capable of killing cancer cells (but normal cells are unharmed)
 - Pancreatic enzymes preferentially attack cancer cells and not normal cells (work of Gonzalez, Isaacs, Beard and Kelley)
 - High dose vitamin C intravenously forms hydrogen peroxide outside the cells; gets into normal cells and the enzyme catalase converts peroxide to oxygen and water; but cancer cells lack catalase and hydrogen peroxide forms the toxic hydroxyl radical that can kill the cancer cell

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Salvestrols: A Relatively Non-Toxic Approach to Controlling Cancer Cells

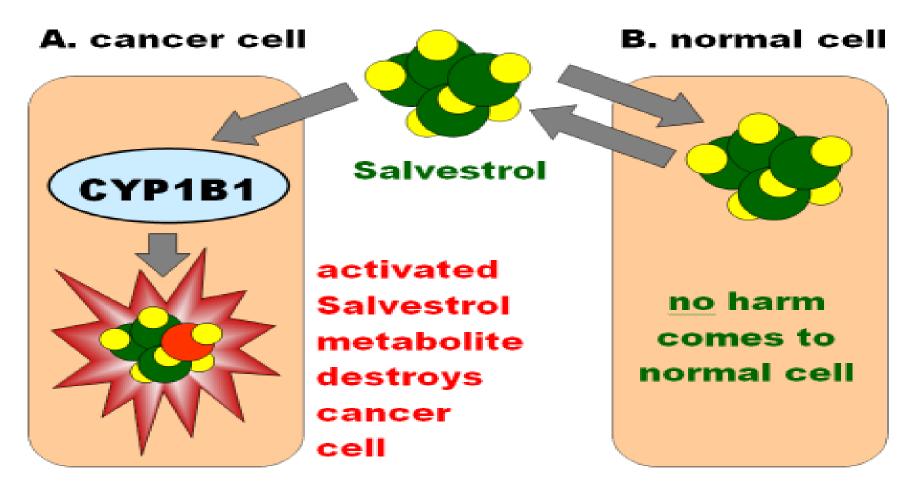
- Prof. Dan Burke did research in the UK
- Authored over 200 published research studies
- Early 1990's-Discovered the enzyme protein CYP1B1 present in cancer cells and not in normal cells (ultimately found this to be true in 26 different cancers); he wondered why it was in cancer cells



CYP1B1 & the Discovery of Salvestrols

- Hypothesis: CYP1B1 protects against cancer
- Research found a group of relatively inert substances found in organic plants (fruits, vegetables & herbs)
- Substances when mixed with CYP1B1 form metabolites that inhibit cancer cell growth
- Most people suffer from a deficiency of salvestrols, which predisposes them to cancer
- Salvestrols have no effect on normal cells which do not have CYP1B1
- Various substances inhibit CYP1B1 and should be avoided when taking salvestrols

Effects of Salvestrols on Cancer Cells & Normal Cells

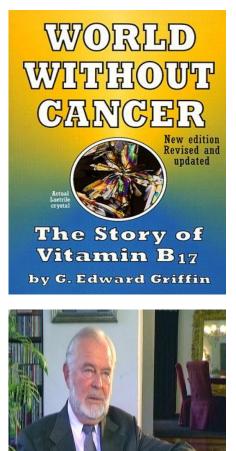


CYP1B1 Inhibitors and Substances to Avoid when on Salvestrols

- Amygdalin=Vitamin B17 = Laetrile or sources like bitter apricot kernels
- Resveratrol in high doses
- Citrus flavanone **naringenin** from grapefruit, especially grapefruit juice
- Carbon monoxide (present in cigarette smoke)
- Various herbicides and pesticides, such as Roundup and some household chemicals
- Herbs, such as: Cannabis, St. John's Wort, Ginkgo biloba, Gin Seng, Hesperidin
- Artificial Sweeteners interfere with the absorption of salvestrols
- Calcium D Glucarate may reduce absorption of salvestrols
- Metformin Drug used for diabetes and cancer
- There are undoubtedly others
- Need to avoid CYP1B1 inhibitors for best results with salvestrols

Amygdalin = Laetrile = Vitamin B17

- From mid 70's through 2012, most of our cancer patients used B17; some still do; **others use salvestrols**
- The narrated film strip "World Without Cancer" got me started with alternative cancer therapies in the 1970's
- Film strip available on YouTube at: <u>https://www.youtube.com/watch?v=QeYMduufa-E</u>
- Trailer of movie on Laetrile at Sloan Kettering: <u>https://www.youtube.com/watch?v=nGXzLuxwqQs</u>
- NY Times article on this movie: <u>https://www.nytimes.com/2014/08/29/movies/second-opinion-on-the-dispute-over-laetrile.html?_r=0</u>
- <u>http://www.schachtercenter.com/IntegrativeOncologyISIMJ</u> <u>ournal.pdf</u> My article on our website includes B17 discussion



Amygdalin with 2 Sugar Molecules bound to Benzaldehyde & Cyanide: Relatively Non-Toxic



The Enzyme **Glucosidase** (present in CA cells) Splits 2 sugar molecules (S-S) from Benzaldehyde (BZD) and Cyanide (CYD)

Breast CA Options-2017-MBS

Amygdalin=Laetrile=Vitamin B17

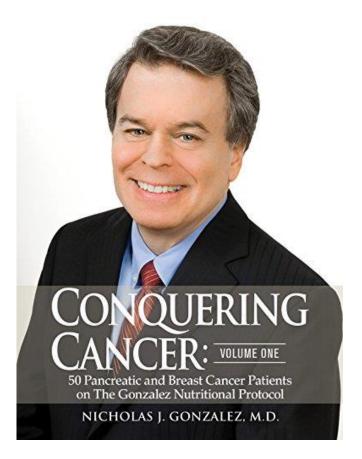
- B17 is a cyanide containing nitriloside
- Nitrilosides found in many foods-such as prunasin family (bitter apricot kernels, apple seeds, peach seeds, pear seeds), millet, buckwheat, cassava and others
- Structure-2 sugars, benzaldehyde, cyanide
- Non-toxic when molecule intact
- Cyanide and benzaldehyde are toxic when released
- Many cancer cells are high in enzyme to release cyanide and benzaldehyde, whereas normal cells lack this enzyme (beta glucosidase)
- Can't be used with salvestrols because B17 inhibits CYP1B1, so that salvestrols won't work

Amygdalin-2

- Normal cells lack enzymes that remove sugars from the amygdalin molecule
- Normal cells have enzymes to detoxify cyanide and benzaldehyde; Rhodanese is one of them (Converts cyanide to thiocyanate); We use serum thiocyanate to help check both for toxicity and for evidence of efficacy
- Cancer cells lack these protective enzymes
- Amygdalin tends to attack cancer cells and leave normal cells alone
- Used orally and as IV infusion; also can add bitter apricot kernels, but these should not be taken within 2 hours of the B17 tablets, as they may cause too much cyanide to be released in the gut, since the kernels do contain some glucosidase
- Can use the **blood test serum thiocyanate** to help to see that the patient's dose is high enough, but not high enough so as to cause toxicity
- A reasonable plan might be to alternate Salvestrol for a few months with B17 for a few months

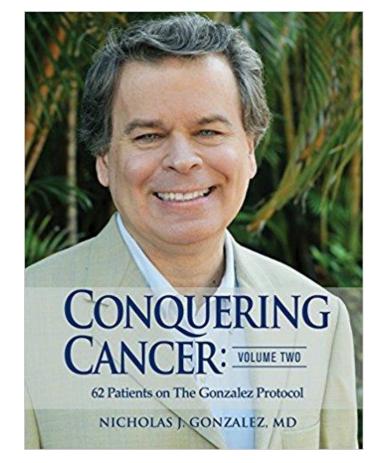
Conquering Cancer: 50 Case Histories

- Incredible case histories of patients using the Gonzalez, Isaacs, Kelley protocol; book published after his death
- Dr. Gonzalez died of unknown cause in July 2015: See: <u>http://thegonzalezprotocol.com/foundation-video/</u>
- Description of 50 cases of pancreatic Ca and breast
 Ca with long-term survival (many 10 to 20 + years)
- Used his own individualized program with each patient (Individualized diet, detoxification like coffee enemas to detox the liver); pancreatic enzymes to kill cancer cells and a large supplement program
- Most cases supported by biopsies and scans



Conquering Cancer-Volume 2: 62 Cases

- Also published after his death just a few months ago
- 62 patients with 17 different types of cancer with unexpected long term survival
- Adenoid Cystic Carcinoma, Bladder, Colon, Kidney, Liver, Leukemia, Lung, Lymphoma, Melanoma, Mesothelioma, Ovarian, Prostate, Salivary Gland, Sarcoma, Thyroid, Uterine, Waldenstrom's Macroglobulinemia plus a diabetes case report
- Companion book to Conquering Cancer: Volume One
- All of these patients have documented diagnoses of cancer.



Dr. Gonzalez Protocol

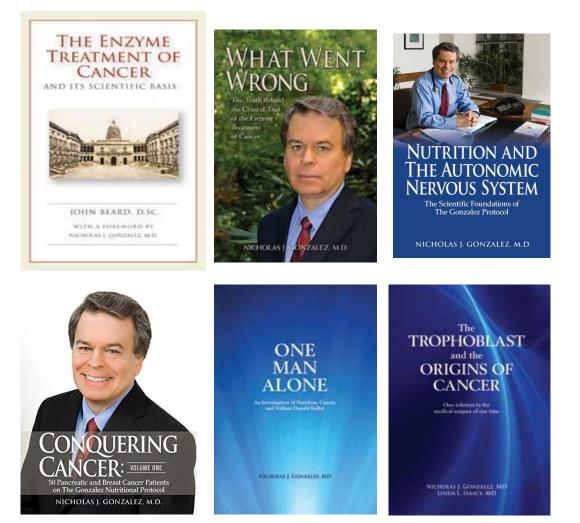
- **Diet** is geared to patients metabolic type from extreme vegetarian to extreme animal food users (10 metabolic types)
- Many nutritional supplements also based on metabolic type to support the autonomic nervous systems, including many glandulars; patients may wind up taking 200 pills or capsules daily
- Extensive use of specific pancreatic enzymes between meals as cancer cell killers (dosage may be as high as 100 capsules or more daily); with meals to help with digestion; a breast cancer patient being followed by Dr. Isaacs recently told me that she took 16 enzymes between meal 6 times daily
- Coffee enemas are recommended to help detoxify; also gallbladder flushes may be recommended (often with olive oil and lemon juice)
- Dr. Linda Isaacs who had been his partner for many years now runs the practice
- Practice is selective & takes only patients who are highly motivated to carry on this difficult protocol without adding or subtracting elements & who have had minimal or no conventional treatment

Books by Nicolas Gonzalez MD or Related to His Work and Further Information

- Website showing books by Nicolas Gonzalez MD and related to his work: <u>http://www.dr-gonzalez.com/books.htm</u>
- There are a few additional books recently added
- Coffee Enemas: Short video in which Dr.
 Gonzalez explains the value of coffee enemas

https://www.youtube.com/watch?v=qycZ3 mfmQBM

• Treatment Protocols: <u>http://www.dr-gonzalez.com/treatment.htm</u> and <u>http://sawilsons.com/library/interview-with-dr-gonzalez-part-1/</u>



Linda Isaacs MD: Long Term Associate of Dr. Gonzales: See: <u>http://www.drlindai.com/</u>

- Dr. Isaacs and Dr. Gonzalez worked together in private practice in NYC starting in the 80's
- She continues their work
- Patients must be highly motivated to do their difficult program
- Pancreatic enzymes kill cancer cells
- Question: Might elements of their protocol be used with some elements that they didn't use (B17 or Salvestrols)?

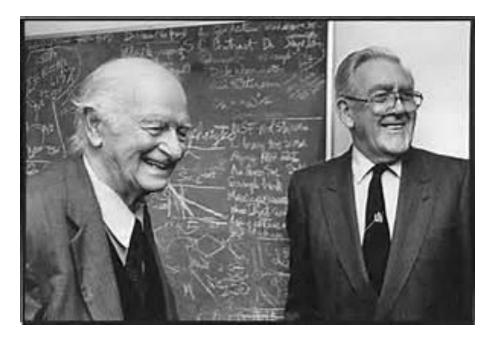


Vitamin C as a Relatively Non-Toxic Anti-Cancer Strategy

- Vitamin C has numerous ways of helping the body fight cancer
- It enhances functioning of the immune system by several mechanisms, strengthens connective tissue surround the cancer, thereby reducing the likelihood of metastases
- At high concentrations, achieved only by intravenous treatment, vitamin C or ascorbic acid converts to hydrogen peroxide in the extracellular spaces
- When hydrogen peroxide enters **normal cells**, the enzyme **catalase** converts it to oxygen and water
- Cancer cells have only small amounts of catalase and the hydrogen peroxide converts to the very damaging hydroxyl radical, which can kill cancer cells
- For more information about C and cancer, see my article which has a good discussion about C and cancer and contains has many references
- See: http://schachtercenter.com/CSJARTICLE0001.PDF Pages 3 through 5

High Dose Oral Vitamin C for CA Patients

- 10 grams or more of vitamin C give orally extends life of cancer patients by more than 4 times
- Study in the 70's and 80's length of life in 100 terminal CA patients receiving at least 10 grams daily of vitamin C compared to 1000 patients who didn't (8 year study)
- <u>http://www.peakenergy.com/news/Vita</u> minC Cancer w Comments.pdf
- <u>http://vitamincfoundation.org/alerts.php</u>
- <u>Relatively inexpensive cancer control</u> <u>strategy</u>



Linus Pauling PhD and Ewan Cameron MD: Champions of Oral C for Cancer

High Dose IV Ascorbate (Vitamin C) Drip to Treat Cancer at Schachter Center

- Used at our Center-more than 40 years
- Published clinical cases show treatment plausible
- Dosage of Vitamin C-25 to 100 Grams (our usual maximum dose is 60 grams per infusion)
- Administered over 2-3 hours
- Treatment one to three times a week; some clinics do it daily
- When used with chemotherapy (given by other MDs)-patients report that they feel much better
- IV B17 can be given in a separate infusion after the C drip
- Sometimes given with IV Alpha Lipoic Acid in a separate infusion
- A discussion about oral and IV vitamin C appears in my article at:
- <u>http://schachtercenter.com/CSJARTICLE0001.PDF</u>

Low Vitamin D Levels Associated with Cancer

- 3,000 studies indicating that serum 25 Hydroxy vitamin D levels inversely associated with cancer; Check 25 Hydroxy D; Optimal around 80 (Ref Range 30 to 100); Rarely checked by Cancer Centers
- 75 epidemiologic studies suggest low D levels associated with increase in cancer
- Vitamin D upregulates (generally anti-inflammatory and anti-cancer genes) and downregulates (pro-cancer & pro-inflammatory) genes (about 3,000)
- Number of genes affected keeps rising!!!
- See video of Dr. Garland from the Univ. of California (San Diego): DINOMIT Theory of Cancer (17 minutes) discussing D and cancer <u>http://www.youtube.com/watch?v=3GM0CnO6-ds</u>

Article: The Anticancer Effects of Vitamin K

Alternative Medicine Review; Vol. 8, No. 3; 2003

- Associate of Jonathan Wright MD
- Two forms of vitamin K2 (MK4 & MK7)
- Most interesting to me is his review of K2 (MK4), including in vitro studies, a few controlled trials and case histories
- Most supplements contain K2 (MK7) rather than MK4
- <u>https://www.researchgate.net/publication/1</u>
 <u>0591470 The anticancer effects of vitami</u>
 <u>n K</u>
- <u>https://en.wikipedia.org/wiki/Vitamin_K</u>



Davis Lamson ND; Colleague/Jon Wright MD

Evaluate Iodine Status and Supplement Carefully

- Check random urine iodine; most Americans are deficient in lodine; WHO says below 100 is deficient
- Iodine needs to be supplemented carefully
- Safe and effective protocols for iodine administration exist
- Milligram (not microgram) quantities of iodine necessary for anticancer effects; virtually all of our cancer patients take an iodine supplement
- See my published paper at our website for a well referenced section on lodine:

http://schachtercenter.com/CSJARTICLE0001.PDF

Mirko Beljanski PhD(1923-1998)

- Useful Supplements to Support Cancer Patients
 - Extracts with anti-cancer properties (Pao V and Rovol V; available in combination as Prostabel and a few other products)
 - Two other useful non-toxic supplements to help cancer patients
- See: <u>http://www.beljanski.org/engl/</u> and a section of my paper at: <u>http://schachtercenter.com/CSJARTICLE0001.P</u> <u>DF</u>
- Sylvie is in the process of writing a book about her personal story and the science of Dr. Beljanski's work





Sylvie Beljanski

Two Herbs with Anti-Cancer Properties





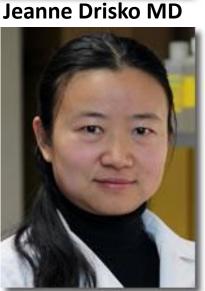
Pao Pereira (Pao V)

Rauwolfia Vomitoria (Rovol V)

University of Kansas Integrative Medicine Department

- Straddle the conventional and alternative approach to cancer
- Research involving IV vitamin C for cancer along with chemotherapy; See: <u>http://www.kumc.edu/</u> and search for integrative medicine
- IV vitamin C reduces the toxic effects of chemotherapy
- Series of papers involving pancreatic and ovarian cancers with and without chemotherapy; research supported by the Beljanski Foundation: <u>http://www.beljanski.org/engl/</u>





Pao Pereira and Rauwolfia Vomitoria for Ovarian and Pancreatic Cancer

- Studies both in vitro (cancer cells) and in vivo (animals with cancer), published in 2013 and 2014; herbs showed anti-cancer activity
- Chemotherapy agents also used in studies: carboplatin for ovarian cancer and gemcitabine for pancreatic cancer
- Herbs were as good or better than chemotherapy agents without adverse effects
- Using the herbs allowed for lower dose of carboplatin for ovarian cancer; so the toxicity of the drugs was less
- But, oncologists, even at the University of Kansas not using these herbs!!!
- Recent soon to be published research shows herbs to be effective against cancer stem cells

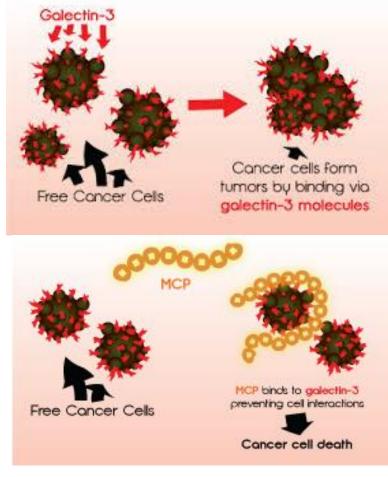
Isaac Eliaz MD-Developer of Modified Citrus Pectin

- Medical doctor and researcher in California; born in Israel
- Straddles the conventional and more alternative worlds of cancer
- Founder of the company Econugenics, which makes Modified Citrus Pectin and other anti-cancer supplements
- Has published articles on the use of Modified Citrus Pectin as nutritional support for cancer patients and other degenerative diseases



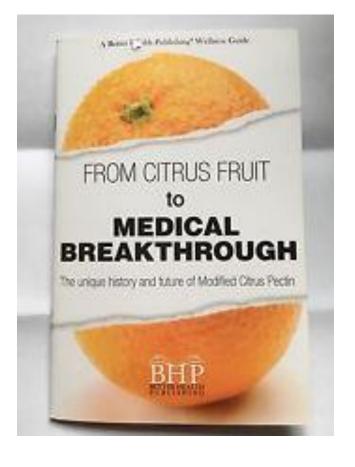
Modified Citrus Pectin Interferes with Galectin-3 Actions to Promote Cancer

- Galectin-3 is a protein normally present in the body; at normal levels, it helps cells to communicate with each other
- It appears on the surface of cancer cells
- Galectin-3 when high in cancer cell encourages them to interact and form cancerous tumors
- Modified Citrus Pectin (MCP) binds to Galectin-3 preventing the cancer cells from binding together



Galectin-3 and Modified Citrus Pectin (MCP)

- 38 page booklet written by Dr. Isaac Eliaz discussing Galectin-3 and modified citrus pectin
- Nature of Galectin-3 and how modified citrus pectin can entrap and lower Galectin-3
- Galectin-3 levels can be measured in a blood test that is available in many labs across the country
- A chart in the book relates the daily dosage of MCP to the level of Galectin-3 and the condition of the patient, such as cancer, cardiovascular and inflammatory states from 5 grams to 25 grams daily in divided dosage
- MCP can also enmesh toxic heavy minerals like lead, mercury and cadmium and gently remove them from the body (form of gentle chelation)
- MCP is available as 1 gram capsules and as powder



Two Recently Published Books are Potential Game Changers for How Health and Disease are Viewed

- *The Plant* Paradox by Steven Gundry MD-Released July 2017
- The End of Alzheimer's by Dale Bredesen-Released August 2017
- Both authors have impeccable conventional credentials, one as a cardiovascular surgeon and the other as a neurologist and researcher
- Both published extensively about their work in peer reviewed journals
- Both seriously question accepted medical dogma
- Both believe that the major way of managing chronic degenerative diseases is by changes in lifestyle, diet & use of nutritional supplements
- Both books give precise suggestions on what to do; both use lab results to help with specifics of the program

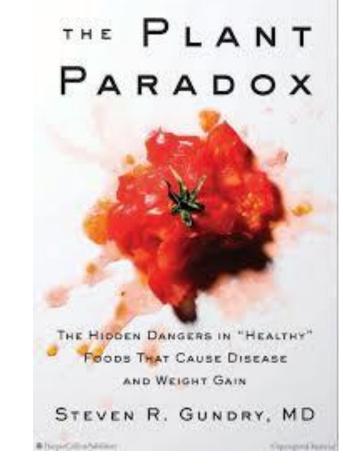
Steven R Gundry MD: *"The Plant Paradox:* The Hidden Dangers in 'Healthy' Foods that Cause Disease and Weight Gain "

- Former cardiovascular surgeon who did many heart transplants on children
- Was professor and chairman of cardiothoracic surgery at Loma Linda Univ in California
- Resigned from this position because in 2001 he became convinced that he could better help cardiac patients by teaching them how to eat
- Author of more than 300 journal articles on how to help patients with heart disease with diet and supplements
- Published papers showing a 2% event rate in 12,000 known coronary artery pts over a 12year period, far superior to any conventional Tx



The Plant Paradox Program

- The Paradox: Plants supply us with food for nourishment, but also produce toxic substances to ward off predators like insects and us
- Lectins are sticky proteins produced by plants that are potentially toxic to insects and animals
- Many **"healthy" foods we eat are high in lectins** (whole grains and the nightshade family); gluten is one example of a lectin that can be harmful to many
- Lectins and sugar adversely affect our immune system, gut and brain leading to leaky gut, autoimmune diseases like arthritis, Crohn's disease and coronary artery disease and contribute to weight gain
- The program consists of foods low in lectins, sugars and devoid of any artificial chemicals like artificial sweeteners



Other Elements of the Plant Paradox Program Essential to Healing

- Seven disruptors, widespread in our society contribute to chronic degenerative diseases (broad spectrum antibiotics, NSAIDs, proton pump inhibitors and others). Discussed in detail in the book
- Numerous case histories involving various autoimmune diseases, including multiple sclerosis, rheumatoid arthritis, Crohn's and coronary artery disease recovered on this program and are described in the book; also patients who are overweight, invariably lose weight on this program
- Dr. Gundry emphasizes that what is eliminated from the diet is more important than what one eats in terms of healing
- In one published paper, Dr. Gundry asserted that the "event" rate (death, heart attack, coronary artery bypass surgery) was only 2% in 10,000 patients following his program over a 12-year period. This is far superior to any conventional approach to coronary artery disease
- The program is a comprehensive dietary and supplement approach to all chronic disease including cancer

Dale Bredesin MD: *The End of Alzheimer's: The First Program to Prevent and Reverse Cognitive Decline*

- Internationally recognized as an expert in the mechanisms of neurodegenerative disease
- Has held faculty positions at several California universities, including UCLA
- Published peer reviewed articles on his work with Alzheimer patients
- Explains and exposes the difficulty of getting new ideas accepted when the paradigm is already taken as a given
- This book can serve as a guide for professional caregivers as well as the families of Alzheimer patients



The End of Alzheimer's: The First Program to Prevent and Reverse Cognitive Decline

- David Perlmutter MD-author of Grain Brain says on the cover: "A Monumental Work"
- For the first time in history, more than 200 patients with documented Alzheimer's showed significant improvement during the past 5 years
- Rather than looking for one factor being responsible for Alzheimer's, Dr. Bredesen found at least 36 factors that may be involved (analogy of roof with 36 holes)
- These factors relate to diet, sleep, exercise, stress, hormone levels, vitamin levels; blood test results are used to guide the treatment
- He developed a total wholistic approach dealing with as many as these factors as possible

NEW YORK TIMES BESTSELLER

A MONUMENTAL WORK." -DAVID PERLMUTTER, MD subsort the W1 News Not Thread Boats and Brain Masker The End of Alzheimer's

The First Program to Prevent and Reverse Cognitive Decline

DALE E. BREDESEN, MD

Professor and Founding President, Buck Institute; Professor, UCLA

Reversing Declining Cognitive Decline (RECODE) Program

- He aims to make lab test results **optimal**, rather than within the reference range (e.g. vit.D3 blood level: 50 to 80, rather than 30 to 100)
- He relates genetic predisposition (presence of apolipoprotein E4) to environmental factors (reducing inflammation) to how to reduce the likelihood of developing Alzheimer's
- He shows how AD is caused by the destruction of brain cells being greater than the creation of new brain cells (analogous to osteoporosis) dispelling the false belief that we are born with the number of brain cells we have
- This process is reversed with his program
- Dr. Bredesen divides Alzheimer's into 3 categories: (1) Inflammatory; (2) Lack of necessary nutrients; (3) Toxic; however they may overlap
- His therapeutic program is called: **Recode:** Reversing cognitive decline
- Improvement can occur if several (not necessarily all) of the factors are addressed

Program to Certify RECODE Practitioners

- Dr. Bredesen realized that the conventional model of disease which attempts to find a drug to control or cure a disease is NOT applicable to Alzheimer's disease.
- He needed a model which stresses find the many causes of a condition and then correcting them (usually without the need for a drug)
- Over the past 5 years, he has seen improvement in over 200 patients with AD. According to conventional dogma, THIS IS IMPOSSIBLE
- The functional medicine approach is a great paradigm to fit his findings for helping Alzheimer's patients; his group is partnering with the Institute for Functional Medicine (IFM) to teach this approach
- Several hundred practitioners have been trained in RECODE and the next training program is in Miami at the beginning of December in person or by livestream. I will be participating in the livestream program; the cost is \$1,800.

Important Resources for the Upcoming Changes in Health Care

- The Plant Paradox: The Hidden Dangers in "Healthy" Foods by Steven Gundry MD
- Interview of Steven Gundry regarding his background and *The Plant Paradox*
- <u>https://www.youtube.com/watch?v=JJl8QLSDUwY</u>
- Dr. Joseph Mercola interviews Dr. Steven Gundry
- <u>https://www.youtube.com/watch?v=YgImyfAvVyM</u>
- You can order food prepared using foods acceptable on this diet from: <u>www.catalystcuisine.com</u>
- The End of Alzheimer's; The First Program to Prevent and Reverse Cognitive Decline by Dr. Dale Dredesen
- Dr. Steven Gundry interviews Dr. Dale Dredesen; Dredesen say he has started the Gundry diet
- https://www.youtube.com/watch?v=p6lkRXaQKwk

Changes in Approaches to Cancer and Other Degenerative Changes are Coming

- You need an open mind and ability to reject dogma that is often given by so-called authorities
- Do your own research and don't be overwhelmed by the reputation and often arrogance of the experts
- Don't be willing to just accept what the expert tells you to do, especially if it doesn't make sense to you
- To access the PPT presentations of this and some of my other recent lectures, including this one and the one I gave at Breast Cancer Options last year, go to our home page: <u>www.schachtercenter.com</u> & click on the red box in the right hand corner. See the titles, date and locations of the lectures. Click on Lecture Slides for the lecture you want to view. Be aware that there are many links for additional information on the slides