



Episode 438: Hacking Chemo: Metabolic Factors  
That Affect Cancer Recovery With  
Martha Tettenborn

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Katie: Hello, and welcome to the "Wellness Mama" podcast. I'm Katie from [wellnessmama.com](http://wellnessmama.com) and [wellness.com](http://wellness.com). And I'm here with Martha Tettenborn, who is a registered dietitian and health coach with over 30 years of experience. But in this episode, we go deep on her personal story of when she was diagnosed with ovarian cancer and how this led to deep research on the science of cancer metabolism, and to her own recovery, and now to her work with helping many others do the same. We talk about some of the metabolic factors that relate to cancer, the things cancer cells can't process and why this is important, and many other things related to cancer recovery. Even if you don't have cancer, and I hope that you don't, you likely know someone in your life who might. And also, there's a lot of overlap in relation of these factors to preventative and to avoiding problems down the road because a lot of it goes back to our mitochondria, to our liver, to metabolic factors. This is a recurring theme in the podcast lately. I think you'll still learn a lot even if you are hopefully not going through a cancer journey. So without further ado, let's join Martha. Martha, welcome to the podcast.

Martha: Thank you. Thank you. I'm so happy to be here today.

Katie: I'm excited to chat with you because you have a personal and now a research perspective on something that is becoming an increasingly important topic. I know there's a lot of directions that we can go with this

one. But to start broad for anybody who isn't already familiar with your story, can you walk us through your personal health story and how it landed you into what you currently do?

Martha: Sure. Sure. So, I am a 35-year veteran registered dietitian. I practice in Canada, in Ontario. I'm 60 years old. And most of my work nowadays is in long-term care, working in the gerontology sector, which I really love doing. I'm passionate about looking after our elders. It's a wonderful field. But my personal story, I trained in the 1980s, which is when, sort of, the low whole low-fat paradigm was cutting-edge research. And that's how I practiced for about my first 25 years. But then I, over time, came to realize that there was perhaps some more successful ways to approach wellness using a more low carbohydrate, healthy fats, whole foods, sort of, approach to nutrition. And I pivoted about four years ago and took an additional certification through the Primal Health Coach Institute to become a low carb, primal health coach, and opened a private practice using low carb for healthy eating, mainly aimed at people who were looking to age well. So, people of my own age and stage, postmenopausal, diabetes, metabolic syndrome, weight control, as we get older, that sort of thing. So, aging awesome was, sort of, my niche.

And that was going along not too badly. I continued to work in long-term care. And then about two years ago, I was blindsided by a cancer diagnosis. I discovered that I had a large ovarian cyst in my abdomen, which I had surgically removed using a laparoscopic procedure because nobody expected it to be cancer. And six days later, they discovered...they called me back and told me that it was cancer. So, I started down the path of needing oncology referrals. And it was highly recommended to me that I take chemotherapy because the cyst had been ruptured in my abdomen. It was very large and they deflated it and took it out through a little tiny incision. So, we were chasing possible cancer cells spill that could have happened in my abdomen.

And that's really where I started in terms of doing a deep dive into the research around cancer and discovered that there was an entire field of cancer metabolism that I had no idea existed. And as a dietitian, I was rather flabbergasted that nobody really knew about this alternate approach to cancer and how we could use nutrition, in particular, to impact on it. And so through my chemotherapy and my cancer journey, I started a blog and eventually ended up authoring a book called "Hacking Chemo: Using Ketogenic Diet, Therapeutic Fasting, and a Kickass Attitude to Power Through Cancer," to tell other people my story about how I worked my way through cancer, and to share the news about the nutritional interventions that can make a real difference, particularly as you're going through chemotherapy. How's that for a two-minute synopsis?

Katie: I'm sorry that you had to go through that to learn some of those lessons. I think many of us in the health field got into that different things because we had our own health crisis of sorts. And while it's never a fun thing to go through, I think it's also amazing and to show much gratitude for being able to help people with that information. And I know that you share that same mindset and help many people now with what you've learned. So, walk us through some of those things you learned when you started researching that and then being able to actually test them on yourself and how that changed your dietary approach and how you do your work now.

Martha: Sure. So, I was already eating a low-carb diet. I had been, sort of, following that direction for several years at that point and had, sort of, dabbled in ketosis, like an actual ketogenic diet where you're going much further down the low-carb path when all of this started. So, when I started looking into cancer, and whether there were nutritional things that I could do to help myself, I discovered that there's research being done, a lot of research, actually, it's becoming more of a major player, on the metabolism of cancer. And it turns out that this is something that we've known about for 100 years. The work was being done in Germany in the 1920s and '30s. In fact, a scientist by the name of Otto Warburg actually won the Nobel Prize in 1931 for describing the disordered metabolism or the unusual metabolism of cancer cells. And then that information, kind of, got lost. The whole thing was mothballed after the wars.

For one thing, Germany lost the wars and most of his research would have been published in German. And also the discovery of the double helix of DNA. So Watson and Crick in their discovery of the genetics of DNA, and then the discovery shortly after that, that cancer cells showed damaged genetics. And the entire machinery of the cancer industry pivoted into genetics. And that's where it's been ever since. So this field of cancer metabolism was just mothballed. Until about 20 years ago, when some researchers have started working again on how cancer metabolism is different than healthy cell metabolism, and whether that is something that can be leveraged in terms of treatment.

And that was the rabbit hole that I went down in the fall between the time that I had discovered I had cancer and when I actually started chemotherapy. It turns out that cancer cannot metabolize energy in the body the same way that healthy cells can. We have a little engine in each one of our trillions of cells called a mitochondria. In fact, we have multiple mitochondria in every cell. And that is where the actual chemical pathways are, where the breakdown of energy takes place. And in a healthy cell, we bring sugar molecules or fatty acid molecules into our cells and they go into the mitochondria and chemical reactions take place in there that actually release energy, and that's how we fuel ourselves. But cancer has damaged mitochondria. And because of their damage, they cannot produce energy in the normal way.

So, cancer has fallen back on a much more ancient form of energy metabolism called fermentation. And it takes place in the fluid of the cell. The good thing about fermentation is that it's very fast. It's an immediate-type response. But it's not a clean-burning fuel. It's like burning, you know, wet fuel, wet wood in your woodstove instead of nice, dry wood. You get a dirty fire. And so, the byproducts of fermentation that the cancer uses creates lactic acid as one of its waste products. So, it is an acid that then has to be dealt with by the cell. Healthy cell metabolism breaks down into oxygen and water...or sorry, carbon dioxide and water. And those are the clean, sort of, waste fuels that our body knows how to get rid of. We breathe out carbon dioxide and water is water. So, this is a very different fuel pattern.

What it means for cancer cells is that they can only burn glucose. They can only burn sugar. They don't have the ability to burn fatty acids and they don't really have the ability to burn ketone bodies either, which is another fuel that your body makes for itself when glucose is not available. So, like, between meals, or when you're fasting. So, that difference is the basis for understanding the metabolism of cancer and also how you can impact on whether or not cancer has a happy environment for getting its fuel.

Katie: Yeah, I first heard of, kind of, that idea in, I believe if I'm remembering the book correctly, it was "Cancer as a Metabolic Disease." And I was at a conference where they lectured about that and about ketosis and also fasting, understanding that, like you said, cancer feeds on sugar. So anytime you can remove those variables, you potentially are giving yourself a leg up when it comes to cancer. So, did you try any fasting protocols as well or did you stick to ketosis?

Martha: No, I definitely used fasting. The book that you're talking about, "Cancer as a Metabolic Disease" that researcher, Dr. Seyfried, he is one of the founders of getting this information out. Another one who has done a lot of work is Dr. Valter Longo in California. And he looked at the role of fuel supply, particularly limiting fuel supply, like fasting, on cancer growth. One of the things that he did was to prove that, number one, using fasting with chemotherapy will not negatively affect the power of the chemotherapy. In fact, it seems to potentiate the chemotherapy or make it more effective. And to kind of explain that, you go back to Dr. Seyfried's work because he has delineated a hypothesis called the pulse press theory, where you use fuel scarcity through a ketogenic diet. So, in other words, you drop your carbohydrate intake super low and that drops the level of insulin in your blood super low. And those things make it very stressful for cancer cells because they can't get the fuel that they need and they can't get the growth factors that they want in order to be able to grow.

And the reason that that stresses them so badly is because of one of the hallmarks of cancer, which is that cancer has no ability to turn itself off. So, cancer cells are permanently in a growth phase. They don't have the ability to down-regulate and take care of themselves by becoming, sort of, quiet or down-regulated is the best term for it, I guess. So, when you remove the fuel supply and the growth factors, the cancer cells are very stressed. Thomas Seyfried calls that the press, which is the pressure or the stress that you're putting on the cells. And then while they're in that stressed position, you pulse them, or you hit them with something that is going to cause damage, or hopefully death of the cancer cells. And that would be something like chemotherapy, or radiation, or high-dose vitamin C, or hyperbaric oxygen, or...There's a variety of different treatments that provide the pulse.

So when I went looking for information about going through chemotherapy, which was the treatment protocol that I was being recommended, I looked at the work of Dr. Longo and he had used fasting to do a couple of different things. First of all, it stresses the cancer cells by changing the fuel supply in your body, dropping the insulin levels and the glucose levels really low, and also making it easier for your own cells, then, to go into what would be considered a quiescent or a maintenance, sort of, phase. And our bodies do that naturally. That's an evolutionary survival mechanism that our healthy cells can just down-regulate into a quiet mode and wait for the next fuel supply to come along. If we hadn't been able to do that, we would have all died on the savanna, right?

So, he proposed that by fasting, we can make our healthy cells quiet down. We can stress the cancer cells and therefore, the chemotherapy will be more effective on the cancer cells. But what's really cool, and what I discovered as being absolutely effective, is that when your healthy cells are in this quiet down-regulated

mode, the chemotherapy doesn't affect them the same way. Chemotherapy is, sort of, a blunt weapon. It's a drug that is aimed at fast metabolizing cells. So it looks for the markers of fast metabolism, and that's what they aim for. So, cancer will stand out on the landscape like it's got a big red flashing light on it if everything else around it has quieted down. And that seems to be what happens.

In most adults, we don't have very much growth happening. We are in a maintenance phase because we're through our growth phases, like childhood, and adolescence, and pregnancy, and so on. So there's only a few parts of our body that are still actively growing. Things like our hair follicles are constantly growing and putting out new tissue, which is why hair follicles tend to be one of the ones that is affected by chemotherapy. And so you lose your hair, and that happened to me. And your bone marrow where your body produces all of the blood components, like red blood cells, and the immune system, and platelets for clotting, and all of those different blood factors, they're created in your bone marrow. And that is another area of rapid growth. So that gets affected by chemotherapy as well.

And then the third area where we tend to have a lot of growth is the lining of our digestive tract. So everything from your mouth to your anus is one big tube, and it's lined with very specialized cells, but they're constantly growing and replacing themselves and sloughing off. And so, there's rapid growth there as well. And that becomes an area that is often very negatively affected by chemotherapy. So, by making all of those areas quieter, the chemotherapy seems to spare your healthy cells while being more effective on your cancer cells. So, that was how fasting has this almost magical property of being able to...I called it my superpower to be able to make the side effects of the chemo less onerous.

Katie: Yeah, I think that's the really important point and an important approach with yours as well is that you're not advocating that there's not a place for conventional cancer treatments at all. In fact, you're saying this is synergistic with them, that if you're going to do these treatments, there are ways you can help, like you said, protect your healthy cells and also make the treatments more effective. And you're right, I've had Valter Longo on here as well. And he's talked about that, and also doctors like Dr. Daniel Pompa, have done some work around that as well. From your research, what did you find about it as a potential, I know we can't say preventative, but like a way to help keep the body in a state of health to hopefully avoid cancer in the first place and/or how are you using that now post-cancer?

Martha: Yeah, I wouldn't ever say that this in particular is preventative. That would be presumptuous, and it's not supported by evidence. I truly believe that an ancestrally-based whole foods approach to diet or nutrition will keep you in the healthiest possible place, both in terms of cancer, in terms of your immune system, which also helps in terms of cancer. And in terms of your, like, awesome enjoyment of life. Right? So, that's kind of where I think a healthy, not a keto diet, but a lower processed foods, whole-food-based mixed diet that includes animal products, and vegetables, and healthy fats, and minimal amounts of processed food, and that includes sugars, and especially includes hydrogenated or industrially produced vegetable oils. So if you stay away from those things and nourish your body with food that is the kind of thing that our ancestors ate, then you can certainly work your way towards preventing a lot of illness, I think including probably cancer.

But I used a strict keto diet through my cancer treatments. So that was about five or six months. I stayed in ketosis that whole time. I had no cheats. I had no alcoholic beverages. I didn't use anything that I didn't feel good about during that time. And then for 72 hours around each chemotherapy treatment, I was fasting using...and it was a supported fast using coffee, and tea, and water, and club soda, and bone broth, a moderate amount of bone broth to get me through 72 hours, which is about 36 hours prior to my chemotherapy and about 24 hours after. By doing that, I downregulated my healthy cell metabolism and protected my GI tract. And what I found was that I made it through six chemotherapy treatments of a sort that usually produces a fair bit of nausea and really can knock people down. And I came through it in an amazing shape.

I never once had significant nausea to the point where I couldn't eat. I never had any throwing up. I had minimal issues, maybe three or four days where I felt low. But I was never in bed, like, I was never knocked right off my feet by the chemotherapy. And as the chemos went on, I used fewer and fewer medications to even address the side effects because there were less of them. And that's the opposite to chemo because normally, with chemotherapy, it's cumulative. So each treatment is a little harder than the one before. And I actually found it was the opposite, that they became easier as I went along in terms of needing less and less preventative medications to deal with the side effects. So that was pretty freaking awesome. It really was.

And so far, I'd have, you know, about four, kind of, low energy days where I'd spend a lot of time in my recliner. I called it my nest. But I would still get out every hour or two and, you know, go do a little job, like make supper or empty the dishwasher or, you know, walk out to the mailbox or something like that just to get up and around. And then when I was tired, I would crawl back into my chair. And after about four days, my energy would start rising back up again and I'd have two weeks of being pretty well, completely normal. I mean, I wasn't out, like, running or anything but I was at work and I had a normal amount of energy just on a day-to-day sort of basis. It was winter in central Ontario. So it was cold and snowy, and I had no problem spending time hibernating on my couch if that's what it took. But it was a pretty awesome way to make it through what could have been a really awful period.

Katie: Yeah, that's phenomenal and definitely different than most experiences you hear from people. What about...you mentioned briefly the liver component of this. And it seems that liver health and mitochondrial health are big common factors when it comes to any chronic disease, and we're learning more and more also when it comes to things like cancer. Was there anything specific that you did that was liver supportive or other than fasting and ketosis that directly targeted the mitochondria?

Martha: No, I wasn't taking any, sort of, supplementation or anything like that. I was strictly ketogenic. And I use an animal-based keto diet. So, it was meats, dairy, vegetables, coffee. I'm lucky enough to live in a rural area where I know some local farmers. So I use local-raised, sometimes organic, but not usually organic, but locally raised meat where I know the provenance of it. So I'm really lucky that way. Any grains that we do use in our house are generally organic because I'm trying to avoid the glyphosate. So, I didn't do anything, in particular, in terms of minding my mitochondria other than just fueling it with really good stuff.

Katie: Got it. And I don't think that they'll air necessarily back to back but you're certainly in good company. I've also today interviewed Dr. Robert Lustig, who echoes your sentiments about sugar and mitochondrial health and he also makes a very strong case for that. We do not need to consume processed sugar in any form and that most of us will do better to be much more in the approach that you're talking about most of the time, especially compared to the processed food diet.

Martha: Absolutely. I've listened to Dr. Lustig's work for years and it's pretty amazing that he was one of the first to really identify the role of sugar and the damage that it can do. So, he was very influential in my learning more about this aspect of nutrition for sure.

Katie: Yeah. And he was outspoken early on and he made a very strong case against sugar way before I feel like it was mainstream knowledge in the least and still continues to do so. I'm curious...I know, obviously, an active cancer case is a different situation than most people encounter. But I also have for years said, there's absolutely no biological need for sugar. And it's one thing...that and vegetable oils, we can entirely eliminate from our diet with absolutely no worry of negative consequences. But I still know many people are of the mind that everything in moderation and that small amounts of sugar should be fine. And I'm curious how you respond to that when you're working with people now.

Martha: On a day-to-day healthy diet sort of thing, I would say that if you have a rare opportunity for something really special that happens to contain sugar, go for it because life is too short. And I mean, so that means, you know, Christmas dinner, or your birthday, or visiting your grandmother who makes the world's best butter tarts or, you know, something of that caliber. But there isn't much you could buy in a convenience store that you ever need to call anything of that, sort of, caliber. And I also always tell people, you know, listen to your heart. Like, if your heart...if a particular food makes your heart absolutely sing with joy, then there's a place in life for that. But not everything does that.

You know, the example for me is, like, chocolate brownies. I'm not someone who goes gaga over chocolate. But a lemon square, like a really good lemon square is something that I would go out of my way to find, you know, or at least not to find, but I mean, if it crossed my path, I would not be adverse to eating it. I would probably eat one. I would find it gaggingly sweet because I'm so not used to eating sugar anymore. But there's something about that that is just...it means more to me than your average dessert. Right? So, I wouldn't say that that anything about life is 100% one way or the other way. I think the only thing that I could probably say that I am totally 100% against, and it's not a food, but it's a health practice would be smoking. I always told my kids, "If I ever caught you smoking, I would probably kill you myself." And so, that's been my approach to that sort of thing. But I think what you do 80% or 90% of the time is more much more important than what you do 10% of the time. And life is too short to not experience it.

Katie: Yeah, that's a good way of looking at the balance of that. And from your experience as well, of course also, like there are times when we need to be more strict. I have that with my autoimmune disease when it was in its more acute phases, I had to be much more careful about what I consumed. And now that I've healed my gut and been through that process, I'm able to handle a lot more variation. And I think at the end of the

day, my goal, when I look at it is to be metabolically adaptable. And so that our bodies can handle whatever we throw at it, but still only rarely throw things that are actually difficult to handle at it and still give it great nutrition most of the time with good sleep most of the time. Totally echo you on this smoking. I would say also the other commonality of every health expert I've ever talked to is the importance of sleep. There's no one who's advocating two hours of sleep to be healthy. And I wonder, did that come into play at all, like sleep and other lifestyle factors that you optimized specifically during the acute phase of your recovery?

Martha: You know, it's interesting, I find that when...I'm one of the people that when I am strictly in ketosis, like when I cut my carbs really, really far that I do not sleep well. And when I'm fasting, I really don't sleep well. So, those were things that they suffered during the time that I was strictly in ketosis and particularly during the times I was fasting. Now, I should say that of the 3 nights that I was fasted during that 72-hour period, well, 2 nights I guess, first night I would have supper and then I would go to bed, and that would be the start of my fast. The second night was always spent in a hotel because I was three hours away from the cancer center where I had to take my chemotherapy, and it was winter. So we always drove down the day before. So I would be, first of all, 24 hours fasted, and taking high-dose dexamethasone in preparation for chemo, and in a hotel room on a strange bed. So I never slept the night before chemo. It was awful.

And then the night after chemo, I was full of the drugs, and one of the drugs was infused directly into my abdomen rather than taking it into a vein. So I was all bloated up and so, of course, still fasting. So the second night was always a totally crappy night of sleep as well. So, I am someone who does better with a little bit of carbohydrate in my life. And as much as I'm postmenopausal and sleep isn't one of my best superpowers just at the moment, I am getting much better with that. And I've discovered for myself that if I eat low carb during the day and I have a little bit of carbohydrate with my supper, or into the evening, that I tend to sleep better. So I highly, highly value good sleep, always have. Have struggled with it ever since I went through menopause, at least a little bit. And this is what I've discovered now is that I need at least a little bit of carbohydrate in my world. It helps me to sleep better.

Katie: Yeah. I was curious about that because that seems to be a relatively common experience is when people fast, especially for extended periods of time, it absolutely can interfere with sleep. I know there's biochemical mechanisms for that. And I've also joked that it's partially your body saying, "Hey, you're supposed to eat, go hunt and kill something. Like, get up. Stop trying to sleep when you're starving."

Martha: I know. That's a really good way to think about it.

Katie: But it's also...I think, anytime we talk about, you know, fasting, especially in relation to women, I always get a little bit of pushback. And I think this is an excellent example of a time when the benefits of fasting absolutely outweigh any potential risk when you're talking about something as serious as cancer, but I think it's one of those things, you know, work with a practitioner that, you know, that knows your medical history, but I think it can be a valuable tool for people depending on their hormones and their history, certainly not during pregnancy, or nursing, or any of those phases, but it was beneficial to me as well. And yeah, I was

curious how you mitigated the lack of sleep because that does seem to be the common factor that people run into, especially on extended fast.

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And another point there as well, like, you mentioned you are strictly in ketosis during your acute recovery phase, but for women especially, we do tend to have a need to carb refeed. So even if people eat a ketogenic diet most of the time or stay relatively low carb, it seems like female hormones actually do better when occasionally we cycle and consume more carbs and more calories so the body doesn't downregulate. Has that been your experience as well?

Martha: Yeah, I mean, right from the get-go, you know, five, seven years ago when I was starting to get into this, metabolic flexibility was the great, holy grail of what we were trying to do. Like, to be able to be not 100% sugar burners, but to have the flexibility to burn fatty acids and ketone bodies and, you know, be able to use it all. So, people who have absolutely zero carb and, you know, more power to them if that's what works for them, but I think you can go too far the other way so that you're not metabolically flexible, but it's in the other direction. You know, like, you don't have the ability to then eat something carby, you know, whether it's because of your gut microbiome having changed with avoiding it for so long, or whether it's mitochondrial downregulating of metabolic pathways because we do just, sort of, reabsorb and break down the parts of our body that we don't use.

So, I go for metabolic flexibility. And I think it's not moderation and all things like most dietitians would describe but I think there's a place in life for getting nourishment from your food, but also getting joy from your food. And so, you need to have the ability to have the occasional lemon bar if that's what brings you joy, without having to pay the price of, you know, gut pain, and diarrhea, and whatever other awful things might happen.

Katie: I'm also curious if you had any specific approach to protein consumption during that time because certainly, Valter Longo talks about, like, the protein-sparing, fasting-mimicking diet. There's some controversial opinions and research on both sides as far as if too much protein consumption can, kind of, create that negative thing with mTorr and potentially increased growth. So were you monitoring protein at all or were you just focusing mainly on keeping sugars and carbohydrates low during that phase?

Martha: Yeah. No, I wasn't keeping my protein intentionally low. I was using animal products, which I know that Dr. Longo doesn't necessarily promote. He's more about the plant proteins and the legumes and stuff. So his is not a low-carbohydrate approach, his fasting-mimicking diet. So, I was using fat to stay satiated. I was using enough protein to be also well satiated, but not overloading. And I would make, I call them comfort foods, the flax focaccia bread so that I could have a bread type product if that's what I really felt like, particularly when I wasn't feeling 100% or when I just wanted something easy. I learned to make, you know, a couple of variations of a keto-type bread. One, in particular, because constipation was a real problem with the steroids that you have to take right around chemotherapy time and the chemo drugs themselves, and three days of fasting, you can get into some serious constipation problems.

So I had taken my basic flax meal type of focaccia bread recipe and pumped it up to max fiber using psyllium and flax meal, and made focaccia bread. So that became something that I used a couple of slices of every day as a fiber source to help keep myself from getting constipated. And that worked really, really well. So, I wasn't taking a lot of protein at every meal and I wasn't actively working on keeping it really low. I would go with what my body felt like at that particular time and make choices from within the spectrum of keto foods. And that included some keto versions of comfort foods for me, which was bread products and granola, a low-carb granola that I could have as, sort of, a cereal meal if I felt like I needed something like that.

Katie: Got it. And I know you have some specific recipes like that in your book. I'll definitely make sure that's linked in the show notes for any of you who this is relevant, even if you're just looking for really great keto recipes. Those are in there as well. I think we probably already actually touched on a couple of them, I would guess, in this interview already. But I love to ask, especially when someone has a very specialized area of research like you, if there are any other things that are commonly misunderstood or not understood about your area of research.

Martha: Yeah, well, the big one is that cancer is a metabolic disease, that cancer has this metabolic defect, and that it's something that you can leverage by how you fuel your body, and that you can have an impact on the environment that your cancer is trying to thrive in and to make it uncomfortable for the cancer. The cancer specialists that I dealt with weren't aware of that. Cancer dieticians aren't aware of that. It literally hasn't

got...the information hasn't gotten there yet. They're still operating on the old paradigm. So, I mean, that's one thing...One of the reasons I wrote the book is that I want to help people to understand that there is something that's very powerful that you can do for yourself that will make a big difference to your cancer journey. So that's one major misconception or something that, you know, people just don't seem to understand.

And I guess I also want people to know that we need to advocate for our own health, that when you get a cancer diagnosis, many people are just overwhelmed because, of course, it's the big C word. And they feel like they're victims. They feel like they're powerless. And they just kind of go into an appointment with a specialist going, "Okay, tell me what to do." And if we give away our power like that, then we don't have the ability really to help ourselves. So, I really want people to understand that we are powerful, that nobody knows your body as well as you do yourself, no expert, no doctor, no nobody. And so, you really have to be your own best advocate or, you know, if you're dealing with an aging parent or a child or even a spouse, if they are someone who needs that help that you can advocate for them.

Katie: Yeah, I've said that several times on here that we are each our own primary healthcare provider and certainly, we should work with educated specialists and that having them in partnership can be incredible but at the end of the day, we are the ones choosing the inputs that are going into our bodies on a daily basis. And we can't outsource that. And I understand why it would be tempting to, and especially when it's, like you said, something as big and as scary as this but at the end of the day, when we give away that power or that responsibility, we also give away that power to change.

Martha: That's right.

Katie: It's like a great inversion, instead of with great power comes great responsibility, I always tell my kids with great responsibility comes great power. When you take the responsibility, that's where your power lies.

Martha: Yep. Yep, very much. So, when I was starting, I called my blog "Powerful Beyond Measure." And that's because...that actually comes from a quote from Marianne Williamson. And the quote starts, "Our deepest fear is not that we are inadequate. Our deepest fear is that we are powerful beyond measure. It is our light, not our darkness that most frightens us. We ask ourselves, Who am I to be brilliant, gorgeous, talented, fabulous? Actually, who are you not to be?" Right? So, that perspective of, like, I have this power, don't be afraid of the power that you have within you, particularly when it comes to a health crisis.

Katie: Absolutely. And another question I love to ask toward the end of interviews is other than your own, which I'm sure was impactful, if there was a book or a number of books that have had a profound impact on your life. And if so, what they are and why?

Martha: This was a really hard question. You mean I have to just say one or two. But I guess, in terms of my nutritional journey and my knowledge that way, probably the first book that really, kind of, blew the top off my brain was "Good Calories, Bad Calories" by Gary Taubes, which was his first book about fats and carbohydrates, and how we got so far off on the wrong path. I mean, it's like 460 pages of heavy, heavy reading. And he's got like 100 more pages of references. There have been easier books since then that tell the same story, particularly Nina Teicholz's book, "The Big Fat Surprise." But "Good Calories, Bad Calories" was the first one that really started me down the path of understanding that there were other ways to approach nutrition besides the one that I had learned in the 1980s and the one that is still being taught, unfortunately, in a lot of dietitian schools. In terms of my personal life, it wasn't really...It was hard to pin down a single book. So, one of the things that really impacted me was a movie called "What the Bleep Do We Know!?" Are you familiar with that movie?

Katie: I'm not.

Martha: Okay. So it came out a few years ago, and it talks about how our perception, it creates our reality. And it's a very bizarre movie. I had to watch it several times. But the fact that we perceive things based on how our brain is working at the time. And one of the ideas about that is that you can change your inner perception, and then everything around you changes. So, it's similar to the ideas that are in something like "The Secret" or, you know, the idea of universal love or energy that is all around us that we can either tap into or block ourselves off from based on what's going on inside our own brain. And it started me down that path of understanding even more that we really do control our own reality and that things like gratitude and positivity will create a world where there is more gratitude and positivity. Like, it breeds unto itself sort of thing. So it's called, "What the Bleep...?" The bleep is actually a bunch of those letters that are supposed to, you know, delineate a curse word. "What the Bleep Do We Know?" It's a few years old.

Katie: Awesome. I'll try to find links to all of those. Those will be in the show notes at [wellnessmama.fm](http://wellnessmama.fm) along with a link to your book and to your website so people can find you and keep learning. And I think there's many, many takeaways here, even for people who are not dealing with any kind of acute diagnosis, I think lots of great underlying research. And I'm so grateful for you...I'm grateful that you are okay and that you can now share your journey and help other people. Thank you for being here today.

Martha: Oh, thank you so much for having me. It's been wonderful to have a chat with you and your listeners.

Katie: And thank you guys, as always, for listening, for sharing your most valuable resources, your time, and your energy with both of us today. We're so grateful that you did, and I hope that you will join me again on the next episode of the "Wellness Mama" podcast.

If you're enjoying these interviews, would you please take two minutes to leave a rating or review on iTunes for me? Doing this helps more people to find the podcast, which means even more moms and families could benefit from the information. I really appreciate your time, and thanks as always for listening.