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INTERVIEW SERIES

**Suzanne Somers Alternative Cancer
Treatment Free Interview
How To Make An Informed Choice
Regarding Cancer Treatment**



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Expert Interviews On Mind Body & Spirit

Dear Student,

I'm Michael Senoff, founder and CEO of HardToFindSeminars.com.

For the last five years, I've interviewed the world's best business and marketing minds.

And along the way, I've created a successful home-based publishing business all from my two-car garage.

When my first child was born, he was very sick, and it was then that I knew I had to have a business that I could operate from home.

Now, my challenge is to build the world's largest free resource for online, downloadable audio business interviews.

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Now, let's get going.

Michael Senoff

Michael Senoff

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Suzanne Somers Alternative Cancer Treatment Free Interview How To Make An Informed Choice Regarding Cancer Treatment

Suzanne Somers Alternative Cancer Treatment Free Interview
How To Make An Informed Choice Regarding Cancer Treatment

A cancer diagnosis can instill fear in the heart of even the bravest person. There are so many different types of cancer, and so many known and potential causes of the disease. What, then, should you do if you receive a cancer diagnosis? Shouldn't you follow your oncologist's instructions? Suzanne Somers, health writer and author of the book Knockout, says maybe not. Even though this is probably the scariest time in your life and you may feel like you do not have a moment to spare, it is important for you to realize that you do have a choice as to how to treat your cancer.

Suzanne Somers fought cancer over ten years ago and walked away victorious. She moved on and left it all behind her until a bizarre incident brought cancer back to the forefront of her mind. In this interview, you will hear about how Suzanne Somers became interested in learning more about cancer treatment and what she found out when she decided to do so.

Key Information Contained In This Interview

- How a medical nightmare led Suzanne Somers back to learning about cancer treatments
- The truth about how successful chemotherapy really is at treating various types of cancer
- Why your doctor may not offer you any treatment options for cancer besides the standard of care
- What the standard of care treatment for cancer is and why it often does not work
- How some doctors treat cancer in ways that are different from the standard of care.
- How effective these alternative treatments are at treating various types of cancer

- Why doctors that offer alternative treatments are often threatened with punishment
- What kind of testing is available to assess which, if any, chemotherapy is right for you

According to Suzanne Somers, you do have a choice regarding your cancer treatment. Regardless of which treatment you ultimately decide to take, you can choose to educate yourself about treatment options before making a decision. When you listen to this interview, you will learn from Suzanne Somers how you can make an informed decision regarding cancer treatment. You will also learn why Suzanne Somers is no longer afraid of being diagnosed with cancer again. This interview is 23 minutes. I hope that it can help you or someone that you know. Enjoy.

Hi, this is Chris Costello, and I've teamed up with Michael Senoff to bring you the world's best wellness related interviews. So, if you know anyone struggling with their weight, with cancer, diabetes, ADHD, autism, heart disease, or other health challenges, please send them to Michael Senoff's [HardToFindSeminars.com](http://www.HardToFindSeminars.com).

Chris: Our guest today is Suzanne Somers. Suzanne, thank you so much for being with us today.

Suzanne: My pleasure.

Chris: So, Suzanne, back in November of 2008 you had just an incredibly traumatic experience. And it sounds like this book, *Knockout*, was partly the result of that. What happened in November?

Suzanne: Well you're right. This book is an outcropping of this experience. I never would have written a book on cancer, even though I had cancer almost 10 years ago. I always felt that I was done with that. I had it. I got rid of it and I moved on. But what's interesting is that because I'm a health writer I had my natural killer cells tested, which is how to test for the strength of your immune system.

About a month before this experience my doctor said "Wow you're at 43" and I said "Well I have no frame of reference." He said "Well usually people of your age have immune systems that are somewhere around two or three." So I was at 43. That's an uber-immune system. So what happened to me that my immune system was knocked out in a matter of five minutes, I still do not know to this day.

But all of a sudden I was at a bar restaurant with my group, we'd just come off the air. And I had a glass of merlot and I had a salad. And other people in my group had a glass of merlot and salad. One glass. My glass was kind of behind me on a little cocktail table. I ate my salad on my lap. Finished my salad. Took two more sips of the glass of merlot and walked out of the restaurant.

The moment I walked out of the restaurant the room started spinning. I mean spinning and I became freezing cold. I went upstairs to my hotel room. I was so cold I actually asked my husband if he would lie on top of me. And then I started breaking out in whelps all over my body; in my ears, in my nose, on my scalp, neck, bottom of my feet, under my arms, everywhere.

And my hands started swelling up and then I started having a difficult time breathing. We flew home that night. I was freezing in the plane, couldn't get warm, couldn't breathe. I got home, thought about going to hospital. The **(inaudible 00.02.11)** was minimized and I thought "No I just need to get in my own bed. I've obviously got the flu or something."

I had a fitful couple of hours. I called one of the doctors in my previous book, *Breakthrough*, and I got halfway through and he said "Stop. You're in danger. Get to the emergency room". Got to the emergency room, was pretty much out of breath. It felt like I was being strangled. It was the only way I could describe it. I was in anaphylactic shock. It's like there were hands around my neck and I just couldn't get air.

Emergency rooms are incredible and they really saved my life. They banged me with Decadron. They put Albutrin and oxygen on me and Benadryl to get the swelling down. I started coming back to life but I still had trouble breathing and they said "We have to do a CAT scan." And I thought "Gosh I've had a pharmaceutical drug in my ears and radiation scares me. I just don't like it, but something is seriously wrong." So I had the CAT scan.

After the CAT scan the doctor comes to visit the ER room and I'm still on oxygen and he has a nurse with him. They close the door. "I brought her with me because I hate what I have to say. You have a large mass on your lungs. It looks like the cancer has metastasized onto your liver. We don't know what's wrong with your liver. It's so enlarged it's covering your entire abdomen. You

have so many tumors in your chest we can't count them. They all have masses in them. And you have a blood clot and you have pneumonia. So we're going to check you into the hospital because the blood clot will kill you first." That began a nightmare. A nightmare that's not quite over yet.

Chris: That must have just been incredible. And I know one of the things you say in *Knockout*, one of the quotes that was very moving to read was "I know now what it feels like to be dying".

Suzanne: Yes.

Chris: "There was a beauty to this experience that changed me forever." And that really comes through in your book and what you've tried to do to help people find out what they can do to recover from cancer and to treat these terrifying conditions.

Suzanne: While I was in the hospital I was diagnosed by six different doctors with full body cancer and I was offered full body chemo therapy as the antidote. And I looked at the oncologist and I said "Just so you know where I'm coming from, I'd rather die. I'm going to find another way. Or if I'm going to die I want to die with quality of life with what I have left".

Because I knew if you had lung cancer that had metastasized throughout your body that you had very little time. So while I was in that valley of fear and seeing my death I said to my husband one day "You know I've been keeping a file on these doctors who are curing cancer. And if I can get out of here I want to go to Houston to Dr. Bruzinski or I want to go to New York to go to Dr. Gonzales or to Nevada to Dr. Forsythe. One of these doctors; I've been gathering information on them." So that is what gave me my hope while all the doctors were telling me to get my things in order, that there was nothing they could do for me unless I wanted to take full body chemo therapy, that there was no other treatment. I held on to the one little hope that maybe one of these doctors could help.

So after surgery they cut open my neck and removed the piece of my lung and a piece of one of the so called tumors and discovered I didn't have cancer at all. It was a fungus that is prevalent in the deserts of the South West called Coccidioidomycosis. And its more popular name is called Valley Fever. And it's in the top two layers of soil. So when the wind blows in our area we're breathing it in.

And most of us have this fungus in us lying dormant unless something jars your immune system. That's the missing piece of the puzzle. But it reads like cancer on a CAT scan. And I thought to myself "How many people are undergoing full body chemo therapy for when it's really Valley Fever, when they don't need that chemo therapy at all?"

So I started interviewing these doctors that I'd kept a file on. Dr. Bruzinski, I interviewed. Dr. Gonzales out of New York. Dr. Forsythe out of Nevada. I interviewed an Italian doctor. I interviewed Dr. Russell Blayloch. Dr. Wright. Dr. Gallister. Burton Goldberg. Ralph Mott. All these incredible scientists. What I found was if someone chooses chemo therapy, I interviewed the scientific advisory board of Life Extension along with Bill Faloon, who's the editor of the magazine. And I said "If you're going to take standard care chemo therapy, what can you do so that it's not so harsh? So that it's more effective?" And they talk about that in a chapter. There's things you can buy over the counter like modified citrus pectin or Cemedidine.

Because when they found when they cut into tumors to remove them in surgery that they actually create metastases in many cases. Because that capsule around it is broken. And those rogue cells disseminate throughout the body. If you take modified citrus pectin and Cemedidine, it lines the artery walls and the turbulence from the blood pushes these rogue cells out of your body and they can't lodge in the artery walls and create metastases in other parts of the body.

And there are other great things you can do if you are taking standard of care. If you want to go integrated, which is a new standard of care for chemo therapy plus alternative then I would go to Dr. Forsythe in Nevada. He takes your blood when you come in. He sends it off to Germany for a chemo sensitivity test. And we should talk more about that. Did you know they exist?

And while you're waiting for your sensitivity test to come back, to see what chemo would be the right fit for you, he builds your body up with nutrition, with vitamin C, with Glutathione, his intravenous nutrients program, so that by the time the chemo sensitivity comes back and says the correct chemo for that cancer, that body is so strong that he can give very, very low dose chemo therapy along with his nutritional support and his patients are doing very well.

Then there's Nick Gonzales in New York, who if you have pancreatic cancer you want to go to Nick Gonzales. I called him the other day and said "Dr. Gonzales, can you give me ten names of ten patients with pancreatic cancer who've been following your protocol, stage 4 and have been alive ten years or longer?"

Half an hour later I get a list of ten names with their patients' phone numbers. I call all of them and they tell me these incredible stories. Plus I have three of his pancreatic cancer patients in the book. He treats every kind of cancer, but nobody's having success at pancreatic cancer, especially nutritionally, and he is. So that's where I would go if I had pancreatic.

Dr. Bruzinski out of Houston, really one day he will be known as the Louis Pasteur of our time. He has been indicted. The FDA's tried to put him in jail for 300 years. The same thing happened to Dr. Forsythe. They go after these doctors who dare to have another way. Because if they do have another way it might affect the big business bottom line of the cancer industry which is a two hundred billion dollar a year industry.

Dr. Bruzinski has found that people with cancer are missing a certain peptide in their liver that controls cell multiplication and that if he puts that peptide back the cancer goes away. He calls his peptides that he has replicated called anti- neoplasms. I've interviewed his patients with brain tumors. His phase two clinical trials, which he's just completed, phase two in compliance with the FDA for his anti-neoplasm for the most virulent brain tumors, he's having a 60% success rate with tumors that are guaranteed death sentences in other people.

I interviewed one of his little patients six weeks ago. I was down in his clinic in Houston. I wanted to see it and she was diagnosed at two and a half with lung cancer that has metastasized to her liver. Her doctor said there was nothing he could do, just enjoy what you have left. They took her to Houston to Dr. Bruzinski. She was so little, they put a little port in her and a backpack so that these anti-neoplasms could slowly drip into her body over a two year period.

I interviewed her six weeks ago. She's nine years old. She's all fidgety. She wanted to go out and play. I said "How do you feel?" "Just fine." Just typical little girl. She's absolutely fine. Now, here's the thing. Are there any guarantees? Not one doctor can say it's 100%. Not one protocol can say it's 100%. There's enough

success with these people where they don't get degraded by horrible chemicals that it's certainly something to look into and *Knockout*, my book, will tell you all about it.

And there are also, you've got to know in standard of care there are definitely three kinds of cancer that do respond to chemo therapy. Testicular, like Lance Armstrong. Childhood Leukemia; they're having great success. Adult leukemia with Glavac; they're having success. Lymphoma and Non-Hodgkin's lymphoma; those are the cancers where they are having success.

Now, with what I know, even though I would entertain having chemo therapy if I had one of those cancers, but I probably still, knowing what I know about Dr. Gonzales or Forsythe or Bruzinski, I'd probably go the other way myself. But again, this is a personal choice and it's not a judgment. It's not my concern what people choose. All I want to say to anyone who reads my book, *Knockout*, if you are one of the ones who is diagnosed within the next year, next year cancer will be the biggest killer in the world.

It's an absolute epidemic. So if it's not you it's probably going to be somebody real close to you, a loved one, a brother, a sister, a mother, a child, a husband or a wife. Don't you want to know if you are one of those people that there is another way? And if you read all about it then at least when you make your decision, whatever that is, you'll have made a very informed choice.

For more interviews on health, mind, body and spirit go to Michael Senoff's www.HardToFindSeminars.com

Chris: So if somebody's facing cancer, and I can only imagine it's very confusing when you're in that situation, it's terrifying.

Suzanne: Horrible.

Chris: What do they do? I mean how do they make those decisions when they have somebody that's an oncologist, that supposedly has all the tools, all the knowledge. How do you make those decisions?

Suzanne: Well both times I've been diagnosed, the second one being a serious misdiagnoses, but nonetheless. It was a diagnoses for six days. They do not give you any other options. Standard of care cancer protocol can only offer you surgery, radiation, chemo therapy and harsh after care drugs. That's all they can offer you.

Dr. Forsythe in Nevada, the reason he can give nutrients and vitamins that build up the body is that aside from being an oncologist he went out and got his naturopathic and homeopathic licenses. So he understands all the nutritional buildup, all the alternative build up. When a cancer patient comes to him they usually go because he does integrate them.

But he's required by law to first offer standard of care. He'll say "Okay what I can do for you is surgery, radiation, chemo therapy and after care drugs." When the patient says "That's not what I want", he writes on the chart patient refused standard of care he says "Then I can get to work. That's when I send their blood off to Germany." These chemo sensitivity tests, who knew they existed? I didn't know. And it makes me angry that people are getting chemo therapy now when the doctor doesn't know if this is the right fit.

That's why so often it's not working. It's like they're throwing darts at people keeping their fingers cross. So if anything comes out this book and you have cancer, you demand that you want a chemo sensitivity test. Make sure that the chemo you're getting is the right chemo for your cancer. And I asked Ralph Motts, who is someone I interviewed for the book, he's a PHD out of Stanford, a science writer; writes several books. His last book is called *Questioning Chemo Therapy*. I said "Why aren't they automatically giving chemo sensitivity tests to every single cancer patient who takes chemo therapy?" He said "Okay so I'm just the messenger here." He said "The reason is too much work". I said "What do you mean it's too much work?" He said "Well you've got to line up all these many petri dishes. You've got to put blood in every one of those petri dishes. Then you've got to start with every possible configuration of that chemical with each petri dish to see where it comes up as a fit."

He said "With a half a million people diagnosed every year with cancer and then next year it will be two and a half million people worldwide will be diagnosed just with lung, liver and prostate cancers". He said "it's too much work". And I said "Well isn't that something? That kind of makes me mad." So if I were going to have chemo therapy, I would demand it.

Chris: So how many of these alternative practitioners are there? Do you know?

Suzanne: Well this is all I could find first time around. See these doctors who are on to something else they're afraid. If they try to put Dr. Bruzinski in jail and they tried to put Dr. Forsythe in jail; they came to his house with a battering ram and flap jackets and threw him on the floor at 8:00 in the morning and handcuffed and had a gun to his forehead, threw his wife on the floor and put their foot on her back so she couldn't get up because he prescribed human growth hormones to a patient that when they finally went to trial it was proven that the patient to whom he described it actually had a human growth hormone deficiency. So he was acquitted, but you could indict a ham sandwich. You tried being indicted and then try to get people to not remember that about you. An indictment makes you guilty. And so if I had a brain tumor I would go to Dr. Bruzinski.

If I had lung, liver, prostate, breast, I would go to Dr. Bruzinski. If I had bone, if I had multiple myeloma, if I had blood cancer I'd go to Dr. Forsythe. What writing *Knockout* did for me was take away my fear of cancer. I don't plan on getting it again, but if I do I know depending on what cancer, what doctor I would go to and what protocol I would utilize.

I myself would not take chemo therapy. That's a personal decision. And it doesn't mean that chemo therapy doesn't work. When it works it works great. Even though it's harsh, it works.

Chris: It sounds like there's several specific cancers that chemo does work for. Now, what about, I know in *Knockout* you mentioned that the New York Times article mentioned that the cancer death rates have only dropped 5% from 1950 to 2005?

Suzanne: Yes. What other medical technology would you continue to access with such dismal outcome? When I was on Larry King, the head of the National Cancer Society said to me "You know what I'm afraid of by your being out there talking about this, is then that many people are not going to get the treatment they need because of what you're saying".

I said "You tell me, Dr. Brawling, you tell me, if you can guarantee me success outside of these three cancers that I mentioned. **(Inaudible – 0:15:10:6)** leukemia, Non-Hodgkin's and testicular. On these other cancers, can you guarantee that your chemo therapy is going to cure my cancer?" They can't say it. Because

they know it doesn't. They can say a tumor will respond. They can say the tumor will shrink, but you know what they call success in the chemo therapy world? They call it surrogate end point.

That means if they give the patient chemo therapy, the tumor shrinks by 50% in 4 weeks they call that a complete response. If that same patient dies in week 5 they still call it a complete response. We're getting kind of skewed information. I'm not trying to take on the cancer industry. Believe me. I'm one little tiny person here. But it is a protocol that bankrupts families, costs about a half a million dollars to die of chemo therapy, which is fine if you're going to live. We all would hock everything we have, go into debt for our loved ones if it would cost that but we are going to be assured of that positive outcome. But we're watching it over and over and over again. The horrible degraded and expensive and traumatic on the family, traumatic on the patient. Usually the patient ends up dying anyway.

And I'm out here trying to say I found some doctors who seem to have a better way. Why don't you at least look into them? I said to Dr. Bruzinski "Are you ready? After *Knockout* comes out with cancer being the epidemic, what if you start getting thousands of calls a day?" He said "I'm ready. I am geared up." He said "I've been waiting all my life". And I've been down there. I've toured his clinics. I wanted to make sure he would be ready. I've toured his chemistry labs where he has huge vats where he's making the anti-neoplastins. And the fact that he has completed phase two clinical trials, I don't know of any oncologist, any pharmaceutical company, anybody out there who has achieved so much, never.

All of my doctors, each one of them studied independent of one another and I asked them to repeat it. We in the oncology world know, absolutely know that chemo therapy does nothing what so ever for pancreatic cancer. So just like with brain tumors, I said to each doctor "Then why would they give it?" And they all said the same thing, "It's palliative." Meaning that it makes the patient feel like something's being done. It makes the family feel like something's being done and one gentleman said to me, and I have to say, there's big money in it.

So I think we the patients, we the lay people have to get mad as hell and demand something different and demand that the FDA allow these alternative doctors or anybody who has another idea to surface and not be persecuted and try to put them in jail. I mean

this is United States of America. It's not right. The war on cancer is a dismal failure and here are doctors who are succeeding. Again, no guarantees. Nobody's got it a 100%.

Chris: With the doctors you interviewed, Dr. Blayloch, Dr. Gonzalez, Bruzinski; they had success not with just several people but you're talking thousands of people right?

Suzanne: Dr. Bruzinski, he had an anniversary party of all his cured patients and they had to get the biggest ballroom at the biggest hotel in Houston to fill the patients and their families. I mean one day we will be ashamed that we allowed the government to try to put this man in jail. It's like that Schopenhauer quote "Three stages of truth. First is ridicule. Second is violently oppose and third is accepted as self-evidence". And I think right now relative to alternative anything, relative cancer there's violent opposition. You watch what will happen to me over these next weeks as I'm promoting this.

They're going to attack me just like they did on the bio identical hormones. But I'm at a point in my life where I have a louder voice. I know this sounds crazy. My being forced to see my death and I only can say that I think it happened to me for a reason. I feel the presence of God in this project and this whole episode. I think I'm being guided with this information now. I don't mean that in any kind of woo, woo way. It's just doctors can't say what I'm saying. They'll lose their licenses.

So they're doing this tremendous work and they have to keep their mouths shut. So I speak for them. Everything I say is not me. It's according to the different doctors. I gather information.

Chris: Sounds like you've seen the terrible tragedy of having this information and having it be so powerful and yet, obviously, having it be so difficult to get out to the patient, to the person that really needs it.

Suzanne: So difficult. Because when you're diagnosed they usually want to start it right away. What they wanted to do with me in November was start me on full body chemo therapy that very day. And my friend Barry Manilow, who was at the hospital with me, said "I would have taken the treatment when all these doctors said this is the only thing you can do, then I would have taken the treatment".

So, in the two times I've been diagnosed, no one has ever said to me "We have standard of care or if that doesn't appeal to you, you can try X." I'm trying to get them to say "There's also an alternative way. What appeals most to you?" The reason they're not offering alternative is usually it's non-patentable. There's no money to be made. Do you ever hear anybody speaking badly about the state of cancer treatment today? They're always marching. They're always "We've got to find a cure."

Obviously if the pharmaceutical companies who have a vested interest in finding a cure haven't found it in 55 years then maybe we ought to look outside of the present box that we're looking in. And that's what these doctors in *Knockout* have done. I'm sure over the next year that more and more doctors will come out of the woodwork and contact me. My publisher said "What book do you want to write next?" And I said, I gave him the idea of what I wanted to write next. I said "Right after that I know there's going to be a follow up of *Knockout*. And I know doctors are going to come out of the woodwork who are having success". These are just the most courageous ones.

Chris: Why would it require courageousness to treat a patient in a way that's effective?

Suzanne: Thank you. Right. Why? What's going on? And it doesn't matter what it is. One of the doctors, Dr. Gonzales, his treatment is nutritional. He puts them on organic food, never can have another chemical again. No more sugar ever, because sugar is the fuel of cancer. But the only thing cancer wants is sugar. And he says liver and gallbladder flushes. He detoxes their liver and gallbladder by drinking olive oil. He has them do coffee enemas. People like to make fun of Michael. He seems to be having success.

So if coffee enemas do it, it doesn't matter to me what the treatment, what the root is, just get rid of the cancer. If it's working why are we laughing at it? I find this all very helpful. I hope anyone whose listening is not walking away that I am angry. I am hopeful. I feel uplifted. I'm not afraid of cancer anymore because of what I know from having written this book. And I hope that that's what this interview will do for anyone listening, that they will say "Alright. Alright, I see some light." Because I do.

And see what they're doing and then perhaps call them. Meet with them. Go to the conferences these doctors all attend, like ACAM,

the American Academy for the Advancement of Medicine, or A for M and sit and listen to what the cutting edge alternative doctors are doing. If I was a doctor and I had a protocol that had such dismal results, I would do anything I could to learn a better way.

And so that is what I hope will happen. I'm sure oncologists across the board are going to hate me. I respect and admire doctors. And this is what they were taught in medical school. They were taught to administer these poisons. And I know it's a lot of schooling and a lot of years and if that isn't the root to the cure to cancer then what did they learn that for. So that's why they're fighting it so violently.

But at least be open to the doctors who have found another way. And I hope that your listening audience has walked away knowing something they didn't know before. I don't want anybody to sit in that room being diagnosed and feel so helpless like I did.

Chris: Well I'm sure it's going to make a tremendous difference in how cancer patients can recover. And thank you so much, Suzanne Somers, for joining us.

Suzanne: Thanks. I appreciate it. Bye-bye.

Chris: Thank you. Bye-bye.

That's the end of our interview and I hope you've enjoyed it. For more great health related interviews go to Michael Senoff's www.HardToFindSeminars.com.