

Rebellious Wellness ^{over} 50

Hacking Chemo — How to Feed Your Body, Not Your Cancer



Episode 31: Hacking Chemo — How to Feed Your Body, Not Your Cancer with Martha Tettenborn

Gregory Anne

This is the Rebellious Wellness Over 50 podcasts for women over 50 who aren't done yet. You may have seen the worst of aging and are hoping there's a better way there is. And I'm going to show you how in interviews, book reviews, and stories. Each week, I'm going to bring you the latest science-based info on how to age better. I'm Gregory Anne Cox, and I believe it's time to bust the myths that aging equals decline in every area of life. It pisses me off, and it's BS.

Look, aging happens. It doesn't have to ruin your life. You just need to get a little rebellious in your approach.

Gregory Anne

Welcome back, everybody to another episode of *Rebellious Wellness Over 50* where we provide information I don't know who "we" is. I provide information with my guests, through my guests that you may not hear in the mainstream media, but I think is really important, especially what you're going to hear today from my guest, Martha Tettenborn. Martha, welcome.

Martha Tettenborn

Thank you. It's wonderful to be here with you.
Thanks so much.

Gregory Anne

Martha is a cancer survivor. I guess that is the common phrase. Do you like that phrase, survivor?

Martha Tettenborn

I've come to accept it because there's so many other ones that I don't like. I consider cancer was a journey, and I was on a journey in that, but, yeah, that doesn't really suit three years later.

Gregory Anne

So, yeah, I get you. So, it's not so unusual that somebody has had cancer these days. Sadly, the numbers are pretty staggering, but what's interesting and different, and why I wanted to have Martha on, is that she discovered, she's an RD. I'll tell her tell you about her in just a second, but she discovered a way to provide her body with what it needed to sustain her through chemo and the healing process after. And one of the things that she discovered and talks about in her book, [Hacking Chemo](#), is that most of what traditional medicine is telling people who have cancer to do, is not helping their cells rid themselves of cancer and sustain themselves through the chemo journey, or if they have to have chemo or radiation.

Gregory Anne

So, Martha is an RD. That's a registered dietitian. And as a chef, I worked many years ago for a heart surgeon and to develop the menu. He brought it in RD, and I was horrified. I thought I'll never be able to work with this person. It's gonna be all terrible. And no butter. And she was terrific. We're still friends 40 years later, and she was, she loved good food. I'm sure that you're one of those people, from reading your book and the recipes and stuff, that actually likes good food and has an open mind about what that means.

Martha Tettenborn

Certainly butter. Oh, yeah.

Gregory Anne

But you are a certified primal health coach, which I'm assuming is primal, as in the way we eat.

Martha Tettenborn

Yes. Low carb, ancestral nutrition, ancestral health sort of principles.

Gregory Anne

Yeah, for sure. You've been doing this for 30 years in various aspects of nutrition. And you have a private practice where you promote low carb, healthy fat lifestyle. And that's for general health, right? It's not just for people who are sick with something, but we're going to get into, like, what happens after you're feeling better. So you can learn more about Martha on her website, and we'll get to that in a minute. But what I want to ask you to do Martha, is tell us how you discovered that you had cancer and were, like, what happened in that moment for you.

Martha Tettenborn

It was pretty wild, actually, I was 58 years old, healthy as a horse, nothing ached. I take zero medications. I've been eating moderate low carb, dabbling in keto and other fasting and all sorts of other practices because I'm a big believer in the N equals one experiment. But exercise is not something I've ever really enjoyed a lot. What I've discovered over years is that I am basically a non-exerciser who really likes to run long and slow. So running was really the only thing that sparked a passion in me.

Martha Tettenborn

And so that's what I would do. But three years ago this week, actually, July, I got a text message from one of my best friends, one of my oldest, like, from grade seven, friends that I see every year. And she said, So what are you up to on your plan? And because she's been aiming for a two-minute plank, she'd been doing some serious training over the winter with a specific goal in mind. And so I laid down on the floor to do a plank because I haven't done one in a while.

Martha Tettenborn

And the moment I lay down, there was something in my belly that felt like an egg, like I was laying on a bulge. And there's just no other reason in my life that I tend to lay down on my belly. I don't sleep on my belly. I don't have grandchildren or puppies. So anyways, I immediately got up and called the doctor, and a few days later got in for an exam. And a few days after that, I had an ultrasound and it showed that I had a really enormous, ovarian cyst.

Martha Tettenborn

And the cyst just looked like a big bag of fluid. So they did some blood work to see, just to screen for cancer. And the value that came back was just above the normal range. It wasn't very far out, and it's not considered a really great test anyway. So nobody thought it was cancer. It was summer, so people are on holidays and stuff, and it took about two months before I had the cyst removed surgically through a small laproscopic incision. So it was my choice because there was no chance of it being cancer to have it ruptured.

Martha Tettenborn

And then they deflated the cyst pulled out through this little incision. And so I had that done late September that year, and six days later, they called me and said, Surgeon wants to see you come tomorrow morning and bring your husband.

Martha Tettenborn

No. And the bring your husband part. It was like, oh, shit. And so I mean, I work in health care. I knew what that meant right away, and that's what it was. I was very, very fortunate that the tumor was a stage 1 because 75% of women who are diagnosed with ovarian cancer are diagnosed at stage three or stage four. So it is considered a very dangerous cancer, mainly for that reason. And because your ovaries are buried so deep inside you, the symptoms of ovarian cancer are very nondescript and nonspecific.

Martha Tettenborn

So there are things like cramping and early satiety and bloating and pressure in your abdomen and things that a lot of women just write off as stress or menopause or getting older or something. And we don't tend to take good enough care of ourselves sometimes or listen to our bodies well enough. And so people ignore those little niggly whispery sort of symptoms until it's too late. Luckily, my cyst was 16 CM when they found it, and it kept growing. But during that two months, between when I found it and when it was removed, by the time they took it out, they took off a liter and a half a fluid.

Gregory Anne

Wow. Yeah.

Martha

That's like a quart and a half in your abdomen. And I mean, I had the anesthesiologist come in and pat me on the shoulder and go "Liter and a half of fluid like, wow." Like I'd won some sort of prize or something in the recovery room.

Gregory Anne

Atta girl.

Martha Tettenborn

Yeah. Yeah. I think I made a record or something. But anyways, yeah. So that was kind of how the journey started. It came at me completely out of the blue, and I just have generally been so well that it really knocked me back because I had no, it really knocked into my sense of identity as being a healthy person and both personally and professionally. That was my persona. I was all about awesome aging and helping people eat well to grow old in an awesome way.

Gregory Anne

Yeah.

Martha Tettenborn

It really it was hard.

Gregory Anne

I can't even imagine. Now you do have, I'm gonna go to the genetics for just a second because there is some science that says that genetically, if there's cancer in the family, we're more prone to have another gene that might show up generations later or one generation or so. And you did have cancer in your family? Was it your mom?

Martha Tettenborn

Yes. My mother had Premenopausal breast cancer. She had a breast removed when she was 45. She was a very late bloomer. So I was only nine years old when that happened. And she died when she was 55. So I was not quite 19 years old. Now my mother is an outlier in her family. There is no other cancer in her family, everyone else, her two sisters are pushing 90 and over 90 and still alive and kicking. And her brothers are well and her mother lived to be 94, and her aunt lived to be 96 and was still driving across the country to California from Ontario every year with her fourth husband.

Martha Tettenborn

Like, you know, it was it was an outlier situation. But my mother had polio when she was seven in the 1930s, and who knows what they did to that young body in her childhood and her young teen years as she went through surgeries for deformities in her back and the withered leg and all that stuff. So I really never considered myself to be an increased risk because of my mother's history. She was someone who went through a really different medical life than any of her family.

Martha Tettenborn

So I didn't consider that a problem at all, which is another reason why it came at me out of the blue.

Gregory Anne

I would imagine. Yeah. And then, as so many of us would do, but especially since you're a person who's in science and help you took to Dr. Google.

Martha Tettenborn

Absolutely.

Gregory Anne

You want to know everything about your diagnosis. And that was where this whole leading you to the right nutrition for cancer recovery started that's that's right.

Martha Tettenborn

Of course, I went to Dr. Google the moment I found the bulge in my belly. And by the time I saw my doctor five days later, I had determined I had uterine fibroids or something and I was wrong. But once I got the cancer diagnosis, I started back into the research and having already left conventional wisdom behind in terms of my profession, having already done the low carb certification and really firmly believing in what they call root cause medicines. So not just treating symptoms but looking for what is the root cause that caused this physiological process to happen.

Martha Tettenborn

And so I took to Dr. Google again, or at least the medical research PubMed, all that kind of stuff to try and find why this would have happened and what could be done about it. And what I found just kind of blew my mind because it turns out that there's, you know, everything about cancer that sort of the general public knows about, and that medical science has focused on for the last 60, 70 years has been this genetic aspect of it, the damaged DNA and so on.

Martha Tettenborn

And they try and get treatments that impact on the damage DNA. They're even trying targeted things, but we haven't been very successful. We don't have really a lot better chemo or radiation or surgery success than we had before. But it turns out that the metabolism of cancer to cells or cancer tumors is different. That the actual way that they burn fuel is different than healthy cells. And anytime you're talking about metabolism or fueling your body, then you're back to nutrition because that's how we fuel our body.

Martha Tettenborn

And I knew nothing about this. I mean, I've been a dietician for 35 freaking years, and I didn't know that there was anything that we could do about cancer, and that pissed me off, really.

Why not, you know?

Gregory Anne

Exactly. That's why we have this podcast. Why aren't people being told these things?

Martha Tettenborn

Yeah. Yeah. Which is why I started the blog and wrote the book. And it's like, people need to know this. People need to know that they have something they can do every time they put food in their mouth that makes a difference in their health and their prognosis.

Gregory Anne

Yeah. And prognosis. That's a good word. I was just looking down at your book because in the book, you say you gradually became aware of scientific under-current information about the fact that cancer has its own unique metabolism. So on top of our bodies having metabolism, cancer acts differently and that there were possible nutritional interventions that could impact it. Cancer is a greedy hog when it comes to glucose uptake from the blood and its exaggerated rate of metabolism has been known for a long time. Again, that pisses me off when I read that we know this stuff, somebody knows that is respectful, respectable in the science world.

Gregory Anne

And yet, as you go on to say, like so many other things, the big industries that control what people eat or suggestively control market to control what people eat, have a vested interest in keeping us eating the wrong thing. So what is the wrong thing? What was your discovery?

Martha Tettenborn

Glucose is probably the biggest one. So glucose is the chemical term for sugar. It's the form of sugar that's in your blood. And we have a system for controlling how much sugar is in our blood using a hormone called insulin. And so when you consume sugar, your body senses that we have, like, a thermostatic sensor, and we release insulin. An insulin's job is to move the sugar out of the blood into the places where it needs to be. So some sugar will go into, for example, muscle cells or any of our cells that require energy using the insulin, plugs into the cell membrane and allows the sugar to go into the cell to be burned for fuel immediately.

Martha Tettenborn

If there's more sugar than we can use, then the extra goes to the liver and the liver will package it up as fat triglyceride. It actually turns it into storage fat and then sends it out into your bloodstream to be shipped to the storage sites. And we all usually know where our storage sites are right?

Martha Tettenborn

So, one of the really interesting things that I found in this journey is that at any given moment, the total amount of sugar that you have in your entire bloodstream, which is, like, ten liters or something of fluid of blood is about one teaspoon.

Gregory Anne

Wow.

Martha Tettenborn

Yeah, I know. So when you think about sitting down with a slurpy or footlong banana or an ice cream Sunday or something and how much sugar is in those things, even a can of soda. It's just stunning that at any given moment, we're only using about a teaspoon of sugar in our entire system. So you whack in there like, 30 teaspoons worth of sugar in some great huge feast or pig out or something, and all of that cannot be dealt with easily. So anyway, so going back to the cancer, it turns out that cancer has a damaged metabolic mechanism machinery compared to a healthy cell, and it preferentially chooses to use only glucose.

Martha Tettenborn

In fact, it can, for the most part, only use glucose or glutamine, which is one of the amino acids. But glucose is the main one. And cancer cells will have extra insulin receptors on their surface of their cell to attract more glucose in because they need to burn that and they burn it in a different way. And it's less efficient than how healthy cells burn glucose. So they get less energy per glucose molecule, but they get it faster. It's a very quick it's very rapid turnover.

Martha Tettenborn

It's the same sort of system that we use in the sort of fight or flight response where, like, boom, instant energy. That's kind of what cancer is looking for all the time. And the other thing that's really important to know about cancer is that it has no ability to turn itself off. So healthy cells can upregulate or down regulate their energy needs based on the fuel supply that's available. So if you're starving or if you're fasting or even overnight when you're sleeping, your body cells can quiet themselves down.

Martha Tettenborn

Just go back to kind of a basic maintenance mode and not require as much energy. But cancer, one of the basic hallmarks of cancer is that it can't do that. They're always on. They're always hungry, and they're always hungry for glucose. So putting sugar into the system through what you eat will not only up your blood sugar, giving more fuel availability to cancer, but it also upregulates your body's release of insulin and another hormone called insulin like growth factor. And those things help the cancer cells as well to get that extra glucose.

Martha Tettenborn

So, you know, nutritional interventions that keep the sugar level in your blood low and steady, and the insulin level in your blood low and steady without the spikes and stuff or the chronic up, we'll make it harder for cancer to get what it needs to grow.

Gregory Anne

Wow. The images came to mind first was that of a junkie. When you were talking about, they need it, they need it, they have to have it. And then the picture got bigger almost to the mob, where there's a control that we have outside of us suggesting certain things would be good for us, like drugs, sugar, too much food. And it's so cancer cells are like junkies, and they have found a way to always have what they need. Inadvertently, they didn't find a way. But somehow the powers that be with a lot of marketing dollars who provide food and recommend nutritional or not nutritional protocols for patients of any kind diabetic, cancer, whatever it is.

Gregory Anne

As you mentioned also in your book, when you read about or what you knew from other cancer patients, what you heard that doctors recommend is to eat anything you can just don't lose your weight, to keep your weight on. Suck on candy, cereal, everything you mentioned was sugar, sugar, sugar, sugar.

Martha Tettenborn

That's exactly what they taught us was the only thing they really taught us as dietitians about dealing with cancer was help them to not lose weight despite the side effects. So make sure there's lots of nutrient density. There is lots of caloric densities. So the example that we used to use is you could eat a piece of toast, just dry toast, 70 calories. Right. Or you could take a piece of toast, you could put on the butter and the peanut butter and the honey. And then that one piece of toast is still just one piece of toast...

Martha Tettenborn

But now it's 400 calories. And that was kind of, the quantities stay small but the density of calories was really high. And one of the things you would use to accomplish that would be added sugars because they're so nutrient dense.

Gregory Anne

A tablespoon of honey...

Martha Tettenborn

calorie dense, there's no nutrient.

Gregory Anne

Right. Sorry. Calorie dense, not nutrient dense.

Martha Tettenborn

And calories is how you keep your weight on. Right?

Gregory Anne

So tell us about, so now you have this diagnosis, you've decided you're going to have chemo. That's the right treatment for your kind of cancer. Tell us now how you navigated, changing your diet or getting through it. You lost your hair I remember you saying. So people listening, this is not a cure for, it's not prevention necessarily for losing your hair. But look at your hair is beautiful now. It's back.

Martha Tettenborn

Thank you. It came back in curly. It was crazy.

Gregory Anne

How funny.

Martha Tettenborn

Yeah, most people do. And I did. I was curly a poodle for a couple of months.

Gregory Anne

Yeah, it is crazy.

Martha Tettenborn

No, this is not a cure. This is a way of getting through it, basically. So it's an adjunct to traditional therapy. Chemo is poison. It's basically a drug that's designed to target the cells that are showing signs of fast metabolism, because cancer can't turn itself off. Right? So it goes into your system and it looks for those targets that say we're metabolizing quickly. And that's what they hit. As I was doing, my kind of figuring out how I was going to deal with this, I looked at some research about number 1, how you can stress cancer cells.

Martha Tettenborn

And that's where we got into the stuff with the low blood sugar, the low insulin, circulating insulin levels, and that sort of stuff. But also, there was really good research out of a lab in the University in California, Dr. Walter Longo, research that shows that by using fasting, you can actually calm down or quiet down your healthy cells. So not only are you stressing the cancer cells, but you are quieting down your healthy cells. I call it stealth mode, so it puts your healthy cells into stealth mode.

Martha Tettenborn

And then when the chemo goes in, it doesn't find them because they're not metabolizing as rapidly, right? And so the chemo just kind of flies over top and heads for the cancer cells, which are going like, pick me, pick me, pick me, big red flashing lights on them because they're still metabolizing like crazy, right? They're also somewhat stressed because they haven't been able to get as much fuel as they wanted. So they're already in a more vulnerable position for the chemo to hit them.

Martha Tettenborn

And what Dr.Longo proved with his research is that number one, fasting does not negate the effect of chemo in any way, if anything, it potentiates it, it makes it more potent. And Secondly, that people experience reduced side effects when they're fasting because the healthy cells aren't impacted by the chemo drugs the same way. In an adult, Pediatrics is another whole world and I don't deal with that. But in an adult, we don't have very many parts of our body that are in active growth phase at any one time.

Martha Tettenborn

Most of us are just in maintenance mode, but the parts that are still actively growing and producing new cells all the time are our hair, right. Because we're constantly producing hair, and the inside of our bone marrow, where we produce all of our red and white blood cells and a lot of our platelets, like a lot of the blood component cells are produced in our bone marrow. So that's a growth there where we're always producing cells, the lining of our digestive tract, anywhere where we have mucus membranes, where they're cells sloughing off and new cells being produced all the time.

Martha Tettenborn

Those are growth areas. And so those are the parts that are hit up the most by these chemo drugs when you talk about side effects, right? Particularly mouth sores, nausea, throwing up, bowel issues, that sort of stuff. Those ones, and that's again because of the digestive tract. What I found with my chemo experience with fasting is that I had almost zero nausea. I never threw up, not once in six treatments. I had minimal in terms of any sort of muscle and joint aches. I had no peripheral neuropathy, and I was terrified of getting peripheral neuropathy where you...

Gregory Anne

Tell people what that means.

Martha Tettenborn

It means nerve damage that leaves you with tingling or numbness or chronic pain in your particular extremities hands and feet.

Gregory Anne

Okay.

Martha Tettenborn

Yeah. And I mean, I'm a knitter and I type for my life, like my career and stuff, and I was terrified of losing that. So none of that happened to me. The second week chemo effects, because the drugs go in, and my drugs anyways were every three weeks. And that's because they actually have a three week mechanism of action. And so the second week effects were things like the bone marrow suppression and the hair loss. And so basically,

by the end of your second week after your very first treatment, that's when your hair starts falling out and it just keeps falling out.

Martha Tettenborn

People don't tell you this. And I'll tell you for your readers, you lose hair everywhere.

Gregory Anne

Ahhh.

Martha Tettenborn

Okay, People only think about this, right?(Points to her head) You lose your eyebrows, your eyelashes, your pubes, lose that little fuzz on your cheeks. I didn't have to deal with my brunette mustache for a whole, like, five or six months.

Gregory Anne

Oh, gosh.

Martha Tettenborn

Yeah. So people don't tell you that kind of stuff. You only think about the hair on your head, right?

Gregory Anne

Wow.

Martha Tettenborn

You're like a hairless cat. Almost. I looked like a five year old.

Gregory Anne

Yeah. So what kind of fasting were you doing? Intermittent or actual days where you didn't eat?

Martha Tettenborn

So the fast thing that I did was an extended fast for 72 hours. Now, that was again based on Dr. Longo's work. I read a lot of his case studies and a lot of things. And what I sort of determined was that I was going to fast for about 36 hours prior to the start of my chemo that was to down regulate my healthy cells. Then I fasted for 24 hours after my chemo, and that was to keep everything low while that active fresh drug was in my system.

Gregory Anne

Okay.

Martha Tettenborn

My chemo treatment was about 12 hours. I spent long days at the chemo clinic. I was probably about seven or 8 hours, actually, in the chemo chair. I had two drugs and one of them, I chose to do intra peritoneal, which means they put a port under my skin on my rib cage. And there was a tube that ran down and actually poured the chemo drug right into my lower abdomen, like into my pelvic cavity, because the kind of cancer that I had--high grade serous carcinoma--has these sticky cells...

Martha Tettenborn

They don't escape into your bloodstream and your lymph system as much as some other cancers. But they like to stick to things in your pelvic cavity. So it made sense to put the drug right where the chance of them sticking was. And so I had one IV, usually in my arm. And then once they took that out, then they would access the port and they would start the second drug. So, yeah, they were long, long days.

Martha Tettenborn

And I live three hour

Gregory Anne

On the day of the medication. Did you eat on the day of chemo? So we've got 36 hours before. So basically, for three and a half days, you haven't eaten.

Martha Tettenborn

72 hours is what I ended up doing. My treatments were always Thursday. I would start at supper Tuesday night. I would fast through Wednesday. Wednesday night, we would drive down to London. It was 3 hours away and it was winter in central Ontario. So you went down the night before and stayed in the hotel and then all day Thursday at the Chemo Center, drive home Thursday night. And then Friday, I would have supper that night. So yeah, three full days, 72 hours. It wasn't a water fast.

Martha Tettenborn

It was a supported fast. So I would use of black coffee, which is how I drink my coffee anyway. So it wasn't a hardship, tea, herbal tea, water. And usually over the whole 72 hours, I have about three cups of bone broth.

Martha Tettenborn

Usually on the Wednesday because Wednesday I was feeling really good. And so I was experiencing some hunger. And so the bone broth really helped with that. By the time you're done chemo, you're not so hungry the next day. You're not so hungry. So those days really weren't a problem.

Gregory Anne

Yeah. And then, so, now outside of those every three weeks. So now we have the fasting period, and then you have life after you start to feel a little better. Is this where you I

mean, you were already doing low carb. You said you were daddling in keto. Is this now the time where you want more into the keto?

Martha Tettenborn

Oh, absolutely.

Yeah. I was hardcore keto, probably 20 to 25 grams of carbohydrate a day at the most. For the entire time that I was in chemotherapy. I'm already well, fat adapted because I've been eating this way for several years. So it really wasn't that big a hardship. And I have a blood meter, a little blood sugar ketone meter. So I was able to check and make sure that I was in ketosis and stayed in ketosis. The fasting would drop me deeper into ketosis, which was great. Then I'd have to take Dexamethasone, which is a corticosteroid the night before chemo.

Martha Tettenborn

And that would shoot my blood sugar right up into diabetic range. Practically, even though I was still deep in ketosis, it was kind of crazy watching my blood sugars do these things. But it was important because it's an anti inflammatory prior to them putting the chemo in.

Gregory Anne

And I want to bring up something that when you say that this drug shot your blood sugar, I think some listeners may not know that other things besides food can put our blood sugar up. Not all of them bad. Exercise can, a poor night's sleep can, all different kinds of things. Medication, obviously. So when we talk about balancing our blood sugar, which I talk about a lot, we have to take into consideration basically, everything in our lives impact us. Hormonally, which impacts the insulin balance and the blood sugar.

Martha Tettenborn

So then you said you're already fat adapted. Let's step back for 1 second. That, to me, is the most delicious way to eat. Anyway, I don't know how people think that that is scary and they don't want to do it. But anyway, tell people what being in ketosis means. What is that?

Martha Tettenborn

Okay. So we are very comfortable, our bodies are very comfortable burning a variety of fuels. It's part of why we are the most successful species on the planet. Really. We burn glucose or blood sugar, but it's not, it's a great ready fuel, but it's not the one that we have to have. And that's where a lot of medical science has really gone wrong. In the last hundred years prior to that, people knew that you burn fat and that it was good. We also are quite capable of burning fatty acids, which your body will dig into if you don't have enough blood sugar around, or if you've gone longer between meals.

Martha Tettenborn

Nature designed us to carry tens, maybe hundreds of thousands of surplus calories in our fat stores. Even the thinnest of us have fat stores. And so we access those in between meals when we need to. If we are eating a really low intake of carbohydrates, which is sugars and starches over a longer period of time, then we have the ability in our liver to create a couple of things. We have the ability to create the glucose that certain parts of our body require. The blood sugar we created, they call it gluconeogenesis, which is new creation of glucose.

Martha Tettenborn

Basically, that's the Latin term for it. But we build what we need, right? And that's why it's never been necessary to actually eat carbohydrates, because your body will build exactly what those few cells that require glucose, we can build it. We're capable of building it. But if we go a long time without much in the way of carbohydrate intake, then our bodies, in our liver again, will also break down some of the fatty acids into what's called ketone bodies, and they provide an alternate fuel. The cool thing about ketone bodies is that they're water soluble like glucose.

Martha Tettenborn

And unlike fatty acids, and because they're water soluble, they can cross the blood brain barrier and get into the brain and supply fuel for the brain. And the brain actually really likes running on ketones. It does it very well. Which is why ketogenic diets have been used to treat epilepsy in children for over a hundred years. Because ketones are great brain fuel, we don't have to run our brain on glucose. In fact, often it runs better on ketones. Yeah. So a ketogenic diet is just a diet that is low enough in carbohydrates to induce ketosis or to make your body produce ketones.

Martha Tettenborn

It isn't any particular kind of food. A ketogenic diet could be just low in carbohydrates, but a full variety of foods. It could be it could be a vegetarian ketogenic diet. It could be an all meat diet like the carnivore diet. It could be fasting, fasting is, it produces ketones. So ketogenic diet just means what it's doing in your body. It doesn't mean this particular list of foods, and a lot of people are confused about that. Yeah.

Gregory Anne

That's a great distinction, because I think when usually, when somebody wants to start a diet there's a book out there for that. And so we go and get the book, and the book is going to tell us what to eat. So we think that that is the actual diet. It is the diet in a way. But it's not what the body is seeing and benefiting from or not depending on the diet. So you had success with this? I think I remember when we had a pre call.

Gregory Anne

You told me that you really only lost one day, like, you didn't go into those terrible couple of days after chemo not being able to get out of bed, you were able to go to work if you wanted to, whatever you did.

Martha Tettenborn

Yeah, I I would have three or four kind of what I called low energy days. I'd be in my recliner in the living room. I was never horizontal, never like those days where you couldn't get out of bed or, like, say, I never threw up. I never missed a meal that I didn't intentionally miss. Like, during fasting. I never missed making a meal. I mean, I'm the Cook in my house, and I like it that way. And sometimes it was just bacon and eggs. And then I go climb back into my chair.

Martha Tettenborn

But it was not what was expected for the kind of chemo that I was having. And the other cool thing is that every cycle I went through was a little easier than the one before, and that's the opposite of what's expected with chemo. Usually the damage is cumulative. And each time you have a treatment, it's a little rougher than the one before. And I went the other way. I ended up... They give you drugs for after chemo, nausea drugs, more corticosteroids to keep inflammation down that kind of stuff.

Martha Tettenborn

And as each cycle went on, I used less and less of the post chemo drugs until the last cycle. I think I might have taken them the night I got home. So the day of chemo. But I didn't take the day two drugs, and I didn't take the day three drugs. Like, I didn't need them. It was amazing. And after about, like, day five or so, I'd feel my energy coming back up. And then I'd have two weeks of basically normal. I mean, I wasn't running marathons or anything, but, you know, I was working.

Martha Tettenborn

I was enjoying life. I had energy to do things. We went snow shoeing, we weren't very fast but we went.

Gregory Anne

That's a lot of calorie burning right there.

Martha Tettenborn

Yep.

Gregory Anne

Now, I I don't want to short change your journey by not including the inner work, the spiritual side of this journey for you. So we have, you did all your research, you got the diet sorted out. You did everything that was what you said would be helpful for you. And I have to acknowledge that you took that on in such a way and you fasted and you fasted,

right. You did what you had read might help you. I know sometimes my girlfriends and I have talked like, if you got a diagnosis and you had to change your diet and change everything and give up wine and give up this, would you do it?

Gregory Anne

And I don't think there's one of us who was said, oh, absolutely. We're like, yeah, I think I would. Well, you don't know until you get there. But anyway, I honor that you took that on. But there was also the side of a healthy person getting this diagnosis, which is very scary. And you see where diagnosis is scary. And you had to do some inner work.

Martha Tettenborn

Oh, absolutely. I identified as a very healthy person. Both, let's say, both personally and professionally. And it knocked my identity for a loop when I had to acknowledge that I had cancer. And then I had to tell people because I had to tell my loved ones, my kids, my coworkers, my best friends. And that was hard, because first of all, you have to come to terms with it inside yourself. And then you have to tell all the people that you love, and then you have to, and that's something that you don't do, like, over the phone or if you can help it, you do it in person if you can.

Martha Tettenborn

And when you tell somebody, then they have a response to that. And you have to absorb the energy from that response. And I found that really hard, like, I would be "I have cancer", and the person would kind of go, "Ahhahha" you know, or whatever. And then I'd have to kind of be, "but it's okay. It's stage one. And, you know, this is going to be okay." So I'm comforting them sort of thing.

Gregory Anne

Right.

Martha Tettenborn

And then the other thing is that some people will back away out of your life when you go through something like this and other people will step forward into your life that you didn't expect. I couldn't fault anybody for that because you don't know what their own personal history is with cancer, they might have lost a loved one. They might have been through it themselves. Who knows if you don't know them that well, you know, some people are just terrified by that, or they don't know how to deal with somebody who's not.

Martha Tettenborn

And I mean, I got looking pretty weird by the end of this, right? So no eyebrows wearing a tucol, I had a hat on all winter at work, like, I knitted tucal winter. And so you can't fault people for how they respond to your diagnosis. You just have to you, just have to

take it. And I had to become more vulnerable and more willing to accept help, which is hard for me, because I'm the one that's in control of my own life. Thank you very much.

Martha Tettenborn

And having had a sick mother, I've looked at this in myself in the past, right? Having had a mother that was quite ill through my teen years and having to step up and take over the house and not have anybody to fuss over me. And that kind of stuff. I've struggled with that all my life. You know, my friend's mothers want to like, mother me and they want to, you know...I had a friend at University. I went on holidays with them, her mother wanted to French braid my hair, and it's like, leave me alone.

Martha Tettenborn

Don't butter my toast, I'll butter it myself. You know, it was that kind of thing. So I had to become vulnerable and willing to accept help. And that was hard. But I decided early on that I wasn't going to be. I wasn't going to be a victim, you know, a victim of cancer. I knew right away that I wanted to be an active partner in my own care, and that's why I went the route I did with the research and stuff. I also knew that I didn't want to be a warrior.

Martha Tettenborn

I didn't want to be in a battle with cancer because being battle ready all the time is really exhausting, stress inducing and all those stress hormones that are not great for your body. I wanted to be more at peace. So I really did the inner, as you say, the inner work. I really decided I was going to approach cancer from the position of love and self love. And I would go to bed every night, and I would do that hand thing where you make a heart with your hand sort of thing.

Martha Tettenborn

I would put that on my lower belly over my incision or whatever. And I would just focus love on my own belly, because what I really realized was that cancer isn't some foreign invader that has got into my body and is wreaking havoc from the outside. It's actually me. It's my own cells, they're misguided, they've gone down the wrong path, but they're still me. I needed to let them go. I need them to go away. But I couldn't do it from a position of hate or anger or any of those things.

Martha Tettenborn

Those aren't. Those aren't self serving emotions. They don't get you to where you need to be.

Gregory Anne

That's beautiful. Do you think it softened you overall? I mean, I feel like a little some of your resistance to being mothered or helped or this and being so in charge maybe had to be let go.

Martha Tettenborn

Yeah. Yeah. I think it did. Like I say it knocked down my defenses a little bit for being vulnerable and empathy for other people and what they go through because I've been so healthy. I really, sometimes I don't know whether judgmental is the right term, but I didn't maybe have the same understanding of what other people go through when they're in a health crisis or especially a chronic health crisis, you know, because I could look at people and kind of go, "oh, man, you're doing that to yourself."

Martha Tettenborn

Like, why are you doing that? You know, but now I think I'm softer.

Gregory Anne

Yeah. And it might benefit you. And obviously in your relationships that are close to you. But as you said, more empathy for the people that you work with from a clinical point of view.

Martha

Yeah. And my family, I have an adult, developmentally challenged child, and so I had to support him to understand what I was going through because it was extra hard for him. And, of course, that's not one of the hats that you get to take off and give away when a cancer diagnosis comes into your life. I gave away a whole lot of other things that responsibilities and stuff. But I'm still mom. And how I approach that was really challenging, too.

Gregory Anne

I would imagine so

Martha Tettenborn

He came through it with flying colors.

Gregory Anne

Aww, That's great. So it's been three years did you say?

Martha Tettenborn

Three years this week since I found the cyst and two years, just a little over two years since I finished Chemo.

Gregory Anne

And you're now a committed ketogenic eater.

Martha Tettenborn

Well, you know, I don't try and stay in ketosis all the time. I follow a moderate, clean, low carb lifestyle. There's still room in my life for the occasional homemade ice cream at the little general store down the road, but it probably happens three times a summer, you know? Yeah. And only if I rode my bike, the 30 km to get there. That's when I let myself have ice cream, you know, sushi once in a while. So, yeah, life has to happen, and it has to be filled with joy.

Martha Tettenborn

I'm not willing to allow this to cut back on the joy in my life. So you find a balance. But I choose to eat clean for the most part. I eat local. I'm very lucky to live in a rural area where I can stop in at the Farmers Farm Gate store, literally on my way home from work and pick up fresh chicken, fresh beef. You know, that kind of stuff. And I eat organic if I do eat grains, and my husband still eat grain. So we have the bread and cereal and stuff in the house, and I make sure it's organic to stay away from the pesticides and herbicides residues and stuff.

You know, life's too short to be miserable and too precious. So you got to find a balance.

Gregory Anne

Yeah. I like that idea of not being too precious. Sometimes I think things take on this guru status. You know, the idea of "I'm keto, I'm vegan, I'm this", and I'm not making fun of anybody who associates themselves or names themselves that way. All I'm saying is there are some voices out there, proponents of these things and the many others that I didn't mention, making them sound precious and desirable when, in fact, there's no one way to be healthy.

Martha Tettenborn

No

Gregory Anne

You found what works for you, Martha.

Martha Tettenborn

And there's no, I don't think there's any one way that you have to do it every single day in any one way, either. You know, the choices I make will end up putting me into ketosis one day. But then, you know, three days later, I'm no longer in ketosis because I've made a different choice because that's just, I take each day as it comes. But I have a basic set of parameters that say, I don't eat pop, I don't eat sugar. I stay away from hydrogenated vegetable oils.

Martha Tettenborn

And that doesn't mean that a couple of times a year, if I get the opportunity, I eat fresh cut French fries from some little guy that I've watched him cut the potatoes and you add the oil sucks. The oil is terrible. But, you know, it's once, right?

Gregory Anne

Right. And it's not going to kill you that once we have this, you know, in or even if 99% is clean and in support of a healthy body. And those times that we add something else in, I think the body has a better chance of processing it without too much damage. And then we go back to you know.

Martha

Yeah and enjoy every bit of it. If you're gonna step off the beaten path, make sure that it's something that you're truly going to savor and relish and enjoy.

Gregory Anne

Yeah. And I'm with you on the ice cream and summer. There are certain days where it's gotten to be 90 something. And, you know, there's a cute little place down the road. My husband and I look at each other. Is it an ice cream date?

Gregory Anne

Yes, it is. And we get little ice cream. And it's so delightful. And I'm so happy.

Martha

Pick the child sized cone. That's all you need. Right.

Gregory Anne

Well, Martha, tell people how they can find you. I know your book is on Amazon. It's called Hacking Chemo, and you have a website.

Martha Tettenborn

I do. The website is just my name, [MarthaTettenborn dot com](http://MarthaTettenborn.com).

Gregory Anne

And so you're on Instagram and Facebook?

Martha Tettenborn

I ever got the hang of Instagram, but I'm on Facebook. I have a Facebook page called Powerful Beyond Measure, and that was originally supposed to be the name of the book, but it turns out that it was taken. And so my current name is way better. So, yeah, on the website, there's my blog. There's links to the book. There's information about how people can work with me if they're interested in working on a more personal basis. There's links to a course that I've put up on Udemy that has sort of the contents of the book in terms of how to go through the fasting protocol and all that kind of stuff.

Martha Tettenborn

I am doing some cancer coaching. I call myself the Cancer Dula. And so that information for how to contact me is on the website as well. And there's a whole list of references

there as well. If anyone's interested in following up the science is there also is in the back of the book.

Gregory Anne

Yeah. This is just, as I told Martha, I didn't get through every single page of the book yet, but I'm a person who likes references, and she has not only all of this, you know, where she got the information from, citations, but the articles, research articles. So let's just say you're in chapter four and you say, oh, I wonder, what does she mean by that? Well, there's probably an article explaining it in the back of the book. So good job on the book. It's great. And I thank you so much for your time.

Gregory Anne

It's been wonderful to have you. And if anybody feels like they need a little support and they're starting their cancer journey or even getting, you're already in it and you need support, just reach out to Martha, read some of her stuff, see if she can help you. It's hard to ask for help sometimes, right, Martha?

Martha Tettenborn

But for sure. Start with the book. The book has just about everything. In fact, you know, you can go to the blog. And the very first blog post I ever did is the Chemo fasting protocol. The actual 72 hours fast sort of plan. So good. It's all free on there, but the book has a lot more, and the book's got recipes. And the blog has recipes and comfort food recipes.

Gregory Anne

Oh, good. Sounds like you need comfort during those times. Like Chemo.

Martha Tettenborn

Totally.

Gregory Anne

Thanks again. And thank you everybody for listening. I'll be back again next week with another episode of *Rebellious Wellness over 50*. Be well, till then, Hey peeps, before you run...

Gregory Anne

In case you're not 100% sure you're doing everything you can to age as well as you can, which means you'll feel better, longer. You might want to check out my [Age Better Lifestyle Assessment](#). It will give us a clear picture of where you are now, what small changes you might want or need to make to improve how you feel, how you look and how you age. Check it out at RebelliousWellnessOver50.Com in the Work with Greg section. Thanks.