

You Finished Treatment, Now What?

Amy Rothenberg, ND



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Rebekah Kelley: Welcome to the Humanized podcast, all about personalizing your health. I am your host, Rebekah Kelley, and today our topic will be You Finished Treatment, Now What?, with naturopathic physician Amy Rothenberg. Before I introduce Dr. Rothenberg, I want to remind everyone to subscribe and get all the other variety of casts in audio, video and transcription at HumanizedHealth.com. I'd also like to thank our lead sponsor, Village Green Apothecary, at MyVillageVreen.com.

A little bit about Dr. Amy Rothenberg. She's a licensed naturopathic physician who has been working with patients since 1986. In her practice, she utilizes therapeutic nutrition through food and supplementation, botanical medicine, homeopathy, exercise, mindfulness, and other lifestyle modifications to create individualized patient plans. Dr. Rothenberg is also a writer and teacher. Her new book, *You Finished Treatment Now What?*, is a roadmap for lifestyle and natural medicine approaches to address health challenges that persist after cancer care and to reduce the risk of recurrence. Written for cancer survivor/thrivers, those who care for them, as well as healthcare providers, *You Finished Treatment* highlights the evidence for an integrative approach to healing. As a cancer survivor/thriver herself, she makes sense of an overwhelming topic in a user-friendly, accessible way, providing actionable information and inspiration.

So happy to have you with us, Dr. Rothenberg.

Amy Rothenberg: Thank you for having me.

Rebekah Kelley: So I just want to jump right in there. Can you tell us a bit about your story? I know you're a cancer patient and survivor, and you're also a licensed naturopathic doctor.

Amy Rothenberg: You bet, you bet. Well, after a lovely and somewhat idyllic childhood, upstate New York, I lost my dad when I was 12. He had a heart attack in his sleep. A couple years later, my mother was diagnosed with breast cancer and she died a couple years later. So I was 16 years old and sort of somewhat unguided. I had incredible advisors and mentors and supervisors through my high school and college years, and I happened upon the naturopathic medicine profession really a little bit by chance. I went to Antioch College, which is a work-study school. I had one of my jobs in Portland, Oregon, where I roommated with naturopathic doctor students, and as soon as I met them, I knew, oh my goodness, I have found the perfect profession for me because it blended the natural living that I already was doing – I was an athlete, I ate a healthy diet, I was doing yoga and meditating well before it became so popular in the 1970s – and I was interested in medicine, but I was a little bit turned off because it really hadn't helped people in my family. When I found the naturopathic profession, I just jumped in with two feet and the day after I graduated from naturopathic medical school, I married my husband of now 36 years. And so the adventure began. And when we came together to start a practice, we knew we wanted to have a family practice where we treated all manner of complaints and all age people using the various natural medicine modalities, and really became sort of a center for that in our practice.

You Finished Treatment, Now What?

Fast forward many years, three kids later, in my early 50s, I was diagnosed with early breast cancer, and after I completed conventional treatment for that, I was diagnosed almost immediately with early-stage ovarian cancer. I turned out to have a genetic mutation that I had tested negative for before. So what that lets us know, and which is an important fact for people to appreciate, is that genetic tests change – and in my case, got better. So what was initially not found, was eventually found, which definitely altered my treatment protocol. While I was doing conventional care at a world-renowned cancer hospital in Boston, I had my naturopathic medical people that made up my dream team of that combination of conventional and integrative natural medicine. With that, we were really trying to enhance the efficacy of conventional care, and reduce the side effects, and address any side effects that arise, and also afterward, and this is very much the topic of my book – mop up afterward. Conventional cancer care is harsh, but it has a big job to do and it's essential for helping people stay alive, in most every case. So for me, using the natural medicine alongside conventional care was really the perfect way to bring the benefits of both to the forefront.

Now, in terms of my... I'm 8 years or so out from my own cancer diagnosis and treatment, and I feel very well. I just did a triathlon. I'm in tip top shape. Just had clear scans. My blood work looks good – so you don't have to worry about me, everybody – but I have found in my work now, I treat many cancer patients and many survivors, and many survivors have symptoms that are left over from when they went through care. And a lot of people will say to me, well, you know, I'm lucky to be alive, I can live with this. But, let's face it, we're all lucky to be alive. And there are oftentimes natural medicine approaches to address the most common side effects that remain, sometimes long after cancer care ends. Those would include things like brain fog, fatigue, lack of satisfaction with intimacy and sex, peripheral neuropathy, lymphedema, tendency to get sick a lot. There are just a lot of them out there, and some people of course have more than one. And of course, many people came in, already had some of these complaints, so these are just in addition to what they already had.

So the natural medicine approaches we use are individualized, which – I love your podcast! – they're really individualized to the patient at that moment in time and conceived in a way to stimulate the body's inherent healing capacity and give the essential nutrients that are needed for healing, rest that's needed for healing, and then specific natural medicine approaches really aimed at what the complaints are. That's really kind of my life in a nutshell. And right now I'm really focused on sharing the information from this book, because I feel like there are so many cancer survivors, and millions of cancer survivors, and there's going to be more and more of them because conventional cancer care continues to improve. And so in our survivorship years, this is not an area that conventional medicine has a lot of expertise besides surveillance, you know, keeping up with your scans and your lab work, which are all important. I do them myself, of course. There are things that we can do proactively both to address symptoms that persist and then also to shift the internal environment to be less hospitable to further cancer.

Rebekah Kelley: I love your story. What a beautiful, beautiful story. And it explains so much about your contributions, how you wrote your book. Can you talk a little bit about what those

You Finished Treatment, Now What?

changes are that people make in order to address these symptoms that may come out of the cancer care? I mean, are these considered radical changes? Are they moderate changes? What kind of changes would someone be looking at?

Amy Rothenberg: Right. I think you can go to different kinds of natural medicine providers who could load you up with a plan four miles long with 30 vitamin supplements to take, and you'd be so overwhelmed and you're not even sure what you're aiming at.

So when I'm sitting with a patient, my first goal is to figure out, what is *your* first goal, and to try to address the thing that is most limiting for you at this point in your life. What really gives you the most trouble? And I would say that things like fatigue, brain fog, are very common and they, for some people, they last a long time, well beyond what you would think once treatment has ended.

There are some very basic things that most everybody benefits from, so I think I can share those. For people that have specific complaints like lymphedema or peripheral neuropathy, please know that there are specific approaches you can take. If I can come back sometime, we can break down those things for specific complaints cancer survivors have.

But in general, I would say if you can only do one thing, and hopefully most people can do more than one thing, but if you could only do one thing, the most important thing is to exercise. And there have been study after study after study that show that exercise... and remember we think about exercise in three areas. We think about aerobic exercise, we think about something that is resistance training or weight training, and we think about something that is stretching. If you could only do one of those, do the aerobic. We know that this impacts quality of life across the board, symptom intensity, and also outcomes in terms of life expectancy. So exercise is the number one thing.

The number two thing would be to shift your diet to an anti-inflammatory diet. So if you already eat an anti-inflammatory diet, look a little closer. Is there anything else that you eat on a regular basis that tends to be inflaming? Remove food allergens and food sensitivities from the diet and stay well hydrated. That's sort of a... it took half a minute to say, but that can be a total overhaul for people. Total overhaul. Moving away from processed foods, fast foods, canned foods, and going to a more whole foods, plant-based diet. I don't mean vegan, although there's some people that will say that the vegan diet is good for survivors – there's no actual evidence that that's true – but toward more vegetable-based, with your then lean proteins layered on, healthy oils, nuts and seeds, whole grains, is the best diet – for many things. And while you're helping to address your symptoms that you had from cancer care, you're also then helping to prevent diabetes and helping to prevent heart disease. So we know that rising tides raise all ships. This is definitely true with an anti-inflammatory diet.

You Finished Treatment, Now What?

Rebekah Kelley: I love that. You're basically, it sounds like you're talking about a lot of nutrition density, right? So you're getting a lot of nutrition in the body.

Amy Rothenberg: You bet.

Rebekah Kelley: And you're removing the things that actually are going to cause some inflammation, an anti-inflammation diet. Did the natural medicinal approaches put people at any further risk for cancer?

Amy Rothenberg: Now that's a great question. There are a few herbs that are known to interfere with some medications that people might be taking after cancer care. So the most important thing is to work with somebody who knows what they're doing, who understands drug-drug interaction, drug-nutrient interaction, drug-herb interaction, nutrient-herb interaction. These are things that are studied and we understand that there can be some times when you want to put a foot on the brake. That said, the vast majority of things that would be recommended by a naturopathic doctor with advanced training in nutritional medicine, botanical medicine, lifestyle modification, et cetera, would be things that would not interfere with ongoing conventional care and would not put a person at more risk, but rather the opposite, would help to decrease the risk for further cancer.

Rebekah Kelley: Okay. So it sounds like there is a possibility of blending the conventional along with the natural. You just have to be working with someone who understands that and [understands] interactions.

Amy Rothenberg: Yeah. And my dream, and part of what I see this book as, is as a bridge to the time when you spend your time with your conventional care team, maybe you go out for lunch afterward, take a walk after it, and then you meet with your integrative medicine team who can really take the baton and now bring you back toward health instead of just fighting disease. What are we doing to build and improve and increase and enhance health and vitality? And to understand that quality of life really matters and that everybody deserves to feel as well as they possibly can.

Rebekah Kelley: You brought up the fact that there may be some lingering effects, right? You talked about brain fog. How long can those be? Because sometimes it helps whenever you have an idea of like, you can think, oh, I should be over this, or I should have moved on. Sometimes if you have a normalized idea of what things might be and what that path might look like, it helps, right?

Amy Rothenberg: Yeah, for sure. In terms of fatigue, it's understood that most people are going to need to give themselves a good 6 months or a year to not feel that kind of fatigue anymore. But I see some patients who are 5, 8, 12 years out of cancer care and they are dragging themselves through life. So, I think you're really right. When you have expectations and an

You Finished Treatment, Now What?

understanding of what the common expectation would be, that helps you to basically monitor your feelings about how am I doing? And I always try to say to people, we're going to aim low, we're going to aim long. I don't really believe in overnight miracles. I'm not really looking for those kinds of things. But if we can make gradual, sustainable, permanent changes, we generally see over time an improvement on both the general kind of things that we described, and also the more specific.

Rebekah Kelley: And also when someone's fatigued, I know you said the top thing to do is exercise, but that's the last thing you feel like you want to do when you're feeling fatigued, right? So you've got to drag yourself to go do something...

Amy Rothenberg: One hundred percent. That's why, you know what, after my last of 18 rounds of chemo, I said to my husband, okay, in 6 months we're going to do our first triathlon. Which we did [smiling]. Well actually, he was the photographer. Which I did [more smiling], with my siblings and my cousins and my kids – it was so fun. But I would say that we just take tiny steps. Tiny steps. We do some consciousness raising first. If you're only getting 400 steps a day, we're going to try to bring that up to 1,000 steps a day. Make sure you have good fitting shoes. It could even be in the house. We're just going to take small steps. We're going to try to maybe bring in somebody who wants to do it with us, and we're going to just try to be as encouraging as possible. If it's too much, we're going to cut back a little bit, with the idea that we can, over time, make those kinds of additions to a healthy lifestyle.

Rebekah Kelley: So you're really checking in with yourself, it sounds like, and making sure that if you need to back off, you back off. If you can do a little more, you do a little more.

Amy Rothenberg: Exactly.

Rebekah Kelley: And you read your body. Thank you so much, Dr. Rothenberg. Do you mind holding up your book, just to see?

Amy Rothenberg: Oh, you bet. *You Missed Treatment, Now What? A Field Guide for Cancer Survivors*, and you can find it anywhere books are sold.

Rebekah Kelley: Wonderful. Thank you so much Dr. Rothenberg, for being with us. Those are really valuable insights. Dr. Amy Rothenberg can be found at www.DrAmyRothenberg.com. I'm going to spell that. That's D R A M Y R O T H E N B E R G.com. Let me remind you to subscribe and get access to all our Humanized videos, podcasts and transcriptions from all of our thought leaders on personalized health at HumanizedHealth.com. Thanks for being with us today.

Amy Rothenberg: Thank you for having me.