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Riordan Clinic is a world-renowned, academic medical center that has led the world in integrative oncology and complex chronic illness care since 1975. The Riordan Clinic was established as a 501 (c)(3) non-profit organization with missions in research, provider education, and patient education. The Health Hunter Newsletter has been published since 1986 as an educational resource to providers and patients.

## Food as Medicine: How a Metabolic Plan Can Elevate Your Health

When I design a nutrition plan for my oncology patients, it is individualized based on their specific health concern and, most importantly, their customized labs and epigenetics.



### AUTHOR

Dr. Kirsten West,  
ND, LAc, FABNO

When people are diagnosed with a condition, it is easy to assume there is a “one-size-fits-all” way to eat, but it isn’t that simple and is far more nuanced.

If you don’t have the benefit of labs or epigenetics, I often recommend defaulting to a lower carbohydrate, Mediterranean-style diet. Among other benefits, this style of eating is shown to prevent disease and enhance longevity. It consists of a whole foods dietary intake consisting of lean proteins (poultry and fish), anti-inflammatory fats such as olive oil, nuts and seeds, herbs and spices, and a plethora of colorful vegetables. The cruciferous family of vegetables is my primary and focused vegetable recommendation, as it contains numerous health benefits. These include, but are not limited to, broccoli, Brussels sprouts, cauliflower, and kale. [1]



**FOOD IS MEDICINE ON A  
PHYSICAL, EMOTIONAL,  
AND PSYCHOLOGICAL  
LEVEL. WITH IT, WE CAN  
PREVENT ‘DIS-EASE.’**

NOT all carbohydrates are created equal, and per assessment, some individuals may need to limit their consumption more than others. We will dive into this topic, as well as intermittent fasting, in a later article.

### Food and Inflammation

Food can both mitigate and cause inflammation. We know that the latter is linked to carcinogenesis and oncogenesis

Continued on page 2



in addition to other chronic illnesses such as metabolic syndrome, cardiovascular disease, diabetes, and cognitive decline. [2] The Standard American Diet is inflammatory. It, unfortunately, includes a plethora of omega-6 fats, fatty meats, cured meats, sugar, and processed foods. Avoiding a high intake of omega-6 fatty acids is key in the prevention of inflammation.

While we cannot avoid omega-6 fatty acids – nor should we – there must be a nutritional balance between omega-3 and omega-6 fatty acids. This ratio should be in the range of 2:1 to 4:1, omega-6 to omega-3, and in inflammatory conditions, I will advocate for even lower ratios. Globally, the consumption of vegetable oils (which are high in omega-6 fatty acids) has increased 150 times since 1909, when the average American consumed about 9.5 grams of omega-6, or 2.8% of daily calories. In 1999, omega-6 intake was 24.6 grams per day. Today, Americans are eating nearly 40 grams per day, which represents more than 10% of our overall daily calories. [3]

Healthy diets have a greater focus on omega-3s. These are abundant in cold water fish, walnuts, chia seeds, hemp seeds, black seeds, flax seeds, anchovies, egg yolks, cod liver oil, and salmon fish oil. In addition to fighting inflammation, omega-3s may also diminish or prevent autoimmune and cardiovascular disease, improve mental disorders, and fight age-related cognitive decline. [4] If cooking at higher temperatures, butter from pasture-fed cows, avocado oil, or coconut oil are best employed. It is great to add olive oil, which should be added as a condiment after cooking due to its antioxidant and anti-inflammatory properties.

In fact, observational studies have shown a link between lower risks of cancer, cardiovascular disease, and even dementia in those who consume higher amounts of olive oil than those who use little or none. [5] It remains one of my primary dietary recommendations. An important side note: coconut oil and butter can backfire for some individuals, depending on their epigenetics resulting in skewed lipid panels.

Additional anti-inflammatory/antioxidant dietary choices include leafy green vegetables, bok choy, broccoli, wild-caught salmon, bone broth, and blueberries. Focus on deep-colored foods. While the phytochemicals found in fruits are beneficial, many fruits can be high in sugar. For this reason, I recommend choosing fruits lower on the glycemic index, which include berries (organic strawberries, raspberries, blackberries, and blueberries) and organic green apples.

## Food Sourcing

Food sourcing is of great importance. Choose organic foods as much as possible. The Environmental Working Group, [www.ewg.org](http://www.ewg.org), is a good resource and also offers consumer guides on various topics, including pesticides, personal care products, best current fish sources (which change based on the health of our waters), and more.

Of particular interest, when selecting food, are the Dirty Dozen and the Clean 15. The Environmental Working Group creates these lists to outline produce options that are commonly contaminated with pesticides and those that are generally less contaminated.

The 2022 Dirty Dozen were listed as strawberries, spinach, kale, collard and mustard greens, nectarines, apples, grapes, bell and hot peppers, cherries, peaches, pears, celery, and tomatoes. Make an effort to purchase organic versions of these items whenever possible. [6]

The 2022 Clean 15 were listed as avocados, sweet corn, pineapple, onions, papaya, frozen sweet peas, asparagus, honeydew melon, kiwi, cabbage, mushrooms, cantaloupe, mangoes, watermelon, and sweet potatoes. [7] While “cleaner” than the Dirty Dozen, these conventional produce options still contain small amounts of pesticide residue. When possible, purchase all organic produce. A good rule of thumb: vegetables and fruits that tend to be less contaminated are those with an outer shell or rind.



For beef options, I encourage grass-finished instead of grass-fed beef. Grass-finished cows spend their whole lives eating grass and are pasture raised. On the other hand, grass-fed cows may be fed a small bit of grass before slaughter but are also fed grain. There are considerable health benefits to the consumption of grass-finished beef. These include a higher conjugated linolenic acid (CLA) content, which is a fatty acid with anti-carcinogenic properties and may promote proper metabolism and body weight. [8] Grass-finished beef also contains 2-4 times more omega-3 fatty acids than grass-fed and can have higher levels of E and B vitamins, potassium, and magnesium. [9]

Consumption of dairy is a slippery slope for many. I recommend avoiding dairy altogether with signs of inflammation. These signs may be symptomatic or as seen in bloodwork or lab tests. While cow's milk isn't inherently bad, it depends on the person and the source. Sheep and goat dairy may be better options, given their improved digestive tolerability.

Avoid low-fat choices. Sugar is commonly used to make up for the flavor of fat. The U.S. population consumes more than 300% of the daily recommended amount of sugar. [10]

When choosing oils, focus on good quality oils. Again, olive oil is a primary recommendation. It, as noted, is best used as a condiment and is used this way in Mediterranean countries. Drizzle it on food and keep it on the dinner table. Do be aware that many supermarket brands of olive oil are blended with other oils, including canola or other vegetable oils. When in doubt, read labels carefully and utilize the following article: [www.aboutoliveoil.org/64-certified-pure-and-authentic-olive-oils](http://www.aboutoliveoil.org/64-certified-pure-and-authentic-olive-oils).

Along with a careful selection of pure, well-sourced olive oils, be aware of olives. Mediterranean-style cooking often uses and encourages many styles, including green and Kalamata. Avoid California black olives, however. This style of olive is picked green, mechanically processed, and cured using a sterilizing method that turns them black rather than pasteurized or preserved, as other olives are. Black California olives also contain acrylamide, a toxic compound classified as a probable human carcinogen by the International Agency for Research on Cancer. [11]

## Herbs & Spices

Herbs and spices are also medicine, and variety is very important.

Turmeric and ginger are two of many that have significant anti-inflammatory properties. [12] Garlic (while botanically a vegetable) is commonly used as a spice. It also contains anti-inflammatory and anti-pathogenic properties, which help to fight viruses and dysbiotic bacteria. It also may help to lower high blood pressure. [13] Most find garlic delicious!

Chamomile is another herb that has long been used for health benefits and is known as a digestive relaxant that helps with gastrointestinal issues, flatulence, and stomach aches. Some also find it calms them. [14]

Two additional favorites include lavender, which acts as a natural anxiolytic, and fennel (along with hops), which helps with milk production for breastfeeding mothers. The list goes on and on ...

My family and I have a couple of herb and spice favorites (among many). The first is an herb mix called Herbes de Provence,

## Key Take-Aways

- Food is medicine.
- Individualizing a diet plan using labs and epigenetics is best, but choose a low-carb Mediterranean when in doubt.
- Variety is key. Buy organic whenever possible.
- Food is meant to sustain and be enjoyed. We have permission to enjoy food while nurturing our bodies and health – on every level.

which contains lavender (with unique properties as noted), basil, fennel, rosemary (more on this below), savory, and thyme. We love this on roasted Brussels sprouts (recipe on page 7). We also use rosemary, a fragrant evergreen herb native to the Mediterranean, whenever we grill meat. Grilling meat at high temperatures produces carcinogenic compounds known as heterocyclic amines (HCA). Studies have shown that adding rosemary to meat before grilling or cooking at high temperatures can help offset the production of HCAs. [15] I recommend using it before grilling, broiling, or other high-heat cooking. Additionally, rosemary contains antioxidant, anti-inflammatory, and neurological protective properties.

While dietary intake is best individualized, basic tenets and recommendations, as noted previously, are of importance for most. When in doubt, seek proper assessment with a provider able to decipher labs, epigenetics, and evaluate current health concerns.

There are those that say, “I eat to live,” while others say, “I live to eat.” It is a combination of both perspectives that yields our best health. Food is medicine on a physical, emotional, and psychological level. With it, we can prevent “dis-ease.”

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# Nutrition Consultants Create Specialized Diets



## AUTHOR

Jen Nolan, BS, MS, ONC

A cancer diagnosis or a chronic illness can be overwhelming, and patients are often faced with a barrage of decisions about treatments, therapies, doctors, and so on. In conventional care, that could mean invasive treatments and medication-induced side effects. Luckily, nutrition can be an integral part of disease care and prevention and can make a tremendous impact, and can even help mitigate the harsh side effects of conventional treatment. Nutrition is not a stand-alone therapy but a wonderful integration and non-invasive use of “food as medicine.”

As oncology nutrition consultants, we work with clients to create individualized metabolic-based nutrition therapy programs to complement the treatment of cancer or other chronic illness as well as offer help to those individuals looking to prevent disease.

Taking a metabolic approach to nutrition places a focus on regulating blood sugar and what we call “metabolic flexibility,” which balances the blood sugar roller coaster so many are on. Extreme highs and lows in blood sugar cause that late afternoon crash where folks are either reaching for coffee or a sugary snack or looking for a place to take a nap. Sound familiar? The goal is to have sustained energy throughout the day.

Oncology nutrition consultants are not doctors, and we do not treat disease. However, we can use specific tests such as lab work, microbiome testing, and genetics to help develop the best nutrition and lifestyle plans for our clients. For example, if we see elevated inflammatory markers, we may encourage eating wild-caught fatty fish more frequently. Or, if certain electrolytes are low, we can use that information to encourage hydration and sodium, potassium, and magnesium rich foods and drinks. Avocado with lime juice and Himalayan sea salt, anyone?

While test results are a helpful way to personalize a nutrition plan, a simple food log is most important. Knowing what our clients are eating is critical to accurately evaluate their nutrition status and what changes may be most beneficial.

Following a low-carbohydrate, nutrient-rich, and whole-food-based diet is a good place for most people to start. Easy adjustments include adding an array of colorful fibrous vegetables and nutrient-dense foods such as healthy fats from olive oil and high-quality proteins.

It is largely important to avoid inflammatory foods such as restaurant food, processed food, sugar, and harmful oils such as canola, soy, and peanut oil. Cancer cells tend to thrive in an inflammatory environment, and eating these foods just adds fuel to the fire.



We know cancer cells love glucose as their primary fuel source, so taking out processed food and sugar is critical. Food is a powerful tool in disease prevention, treatment, recovery, post-recovery, and side effect mitigation from various treatments.

Managing side effects in a conventional way often means using medication, which can cause additional side effects that are answered with more medication. Instead, food can be an effective and non-invasive alternative. Nausea can often be lessened by drinking ginger tea and using this incredible spice in food, for example.

Every individual is different, and our approach is to meet everyone where they are. Some clients may come to us eating a Standard American Diet, while others have a very advanced nutritional knowledge and are already eating a diet of organic foods that is very low in sugar. The two plans for those individuals would look very different, especially in the beginning.

Using a terrain approach, we don't simply look at nutrition. Instead, our oncology nutrition consultants look at all the systems, including digestion, circulation, blood sugar balance, and mental and emotional well-being. Once we know the areas that are most important to that client, we get to work. For example, if we know someone has poor digestion, we may add a variety of “live” foods such as kimchi or sauerkraut. We also encourage pre-biotic fibrous foods such as pistachios, leeks, and garlic.

A metabolic approach to nutrition, and medical care in general, encompasses the terrains outlined in “The Metabolic Approach to Cancer,” which was co-written by Jess Higgins Kelley, Founder of Remission Nutrition, and Dr. Nasha Winters, ND, FABNO, Executive Director and Co-Founder of the Metabolic Terrain Institute of Health. This philosophy guides what we do.





Our goal is to address each of the 10 terrain areas to make them as healthy as possible, which makes the body less hospitable for cancer to grow and thrive. We recommend all clients read the book as part of their healing journey. There is also a Terrain 10 quiz on the Remission Nutrition website, [www.remissionnutrition.com](http://www.remissionnutrition.com), to help determine which terrains rise to the top for you.

Flexibility is key to creating a nutrition plan for cancer patients and others. Hurdles can present themselves and require trouble shooting. Clients often think a program is set in stone, but the plan can change week-by-week or even day-by-day, depending on a number of factors.

We love empowering our clients and their families to implement nutritious food and lifestyle choices. Nutrition is something we can control when everything else feels very much out of control. And the best part is that people usually feel much better when they are eating better and making other lifestyle improvements. It is a beautiful thing to watch.

Food truly is medicine and can play an important role in recovering from and preventing disease.

*Jen Nolan is Owner and Oncology Nutrition Consultant at Remission Nutrition, which has provided science-based and metabolically-focused oncology nutrition therapy since 2010.*

## Basil Dandelion Pesto

### INGREDIENTS

1 inch long piece of lemon peel  
Juice from 1/2 organic lemon  
1 garlic clove  
Salt & pepper to taste  
Large handful of organic basil  
Large handful of organic dandelion greens

1/4 cup raw organic walnuts or pecans  
1/4 cup crumbled pecorino cheese

### DIRECTIONS

1. Place all ingredients in food processor and close lid.
2. Pour in high-quality organic olive oil to desired consistency and process.

3. Transfer to glass jar and store in the refrigerator.

*Note: This recipe is a nutritional powerhouse packed full of anti-cancer, liver-loving, anti-inflammatory, blood sugar-balancing, and tasty ingredients.*

*Submitted by Jen Nolan, BS, MS, ONC, Remission Nutrition*

# School Teaches Healthcare Providers About Nutrition



## AUTHOR

Jess Higgins Kelley

After working one-on-one directly with nutrition clients for years, I realized there was a significant gap in nutrition training for medical providers, especially in oncology settings. It was surprising how rarely practitioners in conventional oncology talked about diet, despite one in three newly-diagnosed patients querying their doctor about diet.

Medical doctors receive virtually no nutrition training as part of their medical school curriculum. Meanwhile, Registered Dietitians learn a more conventional approach to nutrition, and additional oncology certification requires more testing. This is where we saw a big gap and a huge opportunity – many medical and health professionals are eager for more nutrition information to help their cancer patients, so the Oncology Nutrition Institute was born out of consumer and practitioner demand.

In creating the Oncology Nutrition Institute and the 250-Hour Oncology Nutrition Consulting Certification Program (ONC), we share evidence in favor of adding nutrition therapy into standard of cancer care for qualified professionals. One of the most rewarding aspects of training healthcare providers is the “ah-ha” moment when they learn how much adding therapeutic nutrition can help improve a patient’s quality and quantity of life. I love talking with our students – especially the ones primarily entrenched in the conventional allopathic medical model. Hearing them say how their patients had improved when they began adding nutrition recommendations makes it all worth it.

Further satisfaction comes from watching the research catch up with what we have been doing clinically with a metabolic approach, then sharing that information with our students, who can translate it into patient care. I love following the research, being an educator, and helping practitioners understand and gain confidence when working with their patients. As a school, we have anticipated a prevalent dismissal of a metabolic approach, and we arm students with hundreds of research papers so they can properly cite their recommendations. Penetrating the tall, strong wall of conventional oncology has been an uphill battle, but I feel like the tide is shifting a bit. This is allowing us to offer people with cancer greater access to complementary therapies like nutrition.

One of the most exciting changes in the field of metabolic oncology nutrition I’ve seen in the past few years is the advancement of nutrigenomic testing, which basically looks at how nutrition and genes interact. Understanding nutrigenomics can help medical professionals evaluate individual nutritional needs and better personalize diet recommendations to achieve desired health outcomes. Personalized nutrition is at the core of our curriculum.

One example of this really shines when constructing ketogenic dietary therapies. Years ago, when we were working with clients, some people’s cholesterol levels increased significantly



on a ketogenic diet, and we would be scratching our heads wondering why it happened to one person and not another. Today, we can look at different lipid metabolism genes and know how to customize the composition of fatty acids in an individual’s ketogenic diet. This is a powerful tool for a health-care provider, allowing us to be more proactive with nutrition therapy vs. trying a new approach and reacting to potentially undesirable outcomes.

The ability to safely integrate a ketogenic diet is key. It is our frontline dietary therapy in the oncology setting. Studies show that people with various types of cancer respond to it very well, as well as to other metabolic dietary therapies like fasting – especially as an adjuvant to standard of cancer care. We’ve been seeing this clinically for years, and now it is becoming validated in the research. It is really exciting to help people feel better and tolerate potentially toxic treatments better than they would without nutrition on board.

Since one of the biggest questions from new students is how to safely support individuals through conventional standard-of-care treatments like surgery, chemotherapy, and radiation, our program addresses these topics extensively.

Beyond the ketogenic diet, our students need to be well-versed in many topics when it comes to safely using food as medicine. Dietary needs of cancer patients change, and individualization is critical. We teach a multitude of therapeutic diets, including low FODMAPS, GAPS, AIP, tube feeding, and soft food.

No matter what the dietary therapy is, food quality is the overarching theme that runs through the program. For example, an egg from a Concentrated Animal Feeding Operation farm will have a totally different nutrition profile from one that comes from a pasture-raised, organically-fed chicken. Therefore, our focus is always on whole foods that are grown, raised, and harvested with best practices.

Like most “alternative healthcare practitioners, many of our students end up with late-stage cancer clients. It is challenging to know where to start and where to focus first when a person is seriously ill. Thus the ONC program begins with the first ten classes focused on the terrain, giving students a comprehensive, systems-based view of the bio-individual process. This provides a clearer picture of where to go first, be it digestion, hormone balance, toxicity, or mental and emotional health. This first course is based on the book



# Brussels Sprouts with Herbes de Provence



## INGREDIENTS

1 pound Brussels sprouts  
1/4 to 1/2 cup olive oil  
Herbes de Provence to taste  
Kosher salt to taste  
Serves 4

Prep time: 5 minutes  
Cook time: 20-25 minutes

*Recipe by Reese Amorosi  
Submitted by Dr. Kirsten West, ND, LAc,  
FABNO*

## DIRECTIONS

1. Preheat oven to 400 degrees.
2. Trim the hard end off of the Brussels sprouts and remove any outer leaves that are discolored. Slice them lengthwise and place them cut side up on a baking sheet lined with parchment.
3. Drizzle the Brussels sprouts halves with olive oil, then sprinkle with Herbes de Provence and salt to taste.
4. Roast at 400 degrees for 20-25 minutes until the Brussels sprouts have reached the desired tenderness and caramelization.

“The Metabolic Approach to Cancer,” which I co-wrote with Dr. Nasha Winters, ND, FABNO in 2017.

While metabolic oncology nutrition isn’t fully accepted yet, I feel the program is starting to give a voice to this field. It is exciting to pioneer a new conversation in oncology, especially when research is backing it up. It is fascinating how excited students get about learning the content. Conversely, it is challenging because our students are often the lone voice in conventional medical settings and face resistance from their institutions or peers. Because working in any element of oncology is emotionally challenging, we have some classes on self-care, which is so important. The burnout rate with these professionals is high, and we want to support our students to remain healthy themselves in mind and body so they can show up and help others.

I hope to incorporate in-person retreats for students at the school campus in Maine. Hands-on is hands-down the best education when it comes to making lifestyle changes, and we want our students to be role models for their patients.

The more we get the message out that when people eat quality, nutrient-dense, low-glycemic, and immune-boosting food, the more it will help prevent cancer in the first place, which is the ultimate goal.

*Jess Higgins Kelly is a nutrition therapist, award-winning journalist, and the founder of the Oncology Nutrition Institute. She is the Co-author of “The Metabolic Approach to Cancer.” The Oncology Nutrition Institute offers a 250-hour certification program to medical professionals that is based on comprehensive research in metabolic oncology nutrition therapy.*

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### LATEST EPISODES



#### EPISODE 50

##### HOW MY IMMUNE SYSTEM BEAT CANCER WITH FRED EVRARD

*Fred Evrard*

In this episode of the Real Health Podcast, Riordan Clinic's Chief Medical Officer Dr. Ron Hunninghake, MD, is joined by Fred Evrard. They discuss how Fred used extended fasting, a strict ketogenic diet, and other techniques to heal himself from advanced colon cancer.



#### EPISODE 47

##### WHAT HAPPENS WHEN YOU FINISH CANCER TREATMENT?

*Dr. Amy Rothenberg, ND*

In this episode of the Real Health Podcast, Riordan Clinic's Chief Medical Officer Dr. Ron Hunninghake, MD, is joined by Dr. Amy Rothenberg, ND, to discuss her book "You Finished Treatment, Now What? A Field Guide for Cancer Survivors."

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