My Story!







The "adventures" continue!



What we did and why!

NO evidence their treatment worked

5FU kills 1000 Americans a year (DPD enzyme deciency. Patented in 1950. Known to make cancer cells metastasis.

New way of doing surgery

"This is NOT about you"

Hostile unsupportive environment

Lost a lot of money when we turned down conventional.







Goals of Treatment



Conventional

- Non-selective (kills all cells)
- Destroys immune system
- Adds toxins
- Focuses on "tumor" response

Integrative/Holistic

- Selective (targets only cancer)
- Enhances immune system
- Eliminates toxins
- Adds nutrition
- Focuses on total body and mind health
- Focuses on the underlying causes

Holistic, Integrative or Complementary treatment. What are the options and costs in Ohio? How is the atmosphere different?

Juan C. Penhos, M.D.

Share Tweet & Share





Pulsed Electro-Magnetic Field Therapy (PEMF) Meridian Stress Assessment (MSAS Test)

Diagnostic Tests

Insulin Potentiation Therapy (IPT)

Cancer Therapy Center in Ohio

Chelation Therapy

Colon Therapy

Hyperbaric Oxygen Therapy

Ion Cleanse Detoxification

Nutritional Therapy Ohio

Rejuvenation Therapy Ohio

Ozone Therapy

Ultraviolet Light Therapy

Lymphatic Therapy

Far Infrared Therapy

Soft Laser Treatment

Prolozone Injection Therapy

General Medicine Integrative Medicine George Washington University School of Medicine, Washington D.C. Medical School

Dr. Penhos has been a physician since age 23 when he graduated from the George Washington University School of Medicine. He completed his residency in General Surgery at the Baystate Medical Center in Springfield. Massachusetts, which included a



rotation at Roswell Park Cancer Institute in Buffalo, New York. His interest in Medicine and Surgery was inspired by his father who devoted nearly his entire life to research in Diabetes. Early on, Dr. Penhos was disappointed with the medical approach to illness and decided to pursue a surgical career. He was an active practitioner and Board Certified in Surgery, a member of the American College of Surgeons. In 2001 when his father passed away after an open heart surgery, he decided to change his course and pursue an interest in the holistic and natural way to deal with illness. His father had expressed his regrets about his own lifestyle choices and urged his son not to commit the same mistakes. It was a sad as well as an enlightening moment, but it changed his life forever.

Changing his focus, Dr. Penhos learned from colleagues with the same interests and from patients who are often the best teachers. He immersed himself in all manner of treatment methods through reading and attending conferences. He resolved to integrate his new found knowledge, using both methods not only to treat disease, but to prevent it in the first place.

Dr. Penhos realizes the limitations of traditional medicine and believes that there is a better way through prevention, diet, exercise, stress management, supplements, hormone balancing, and detoxification. If illness occurs, the treatment must contribute to the patient's overall wellness and deal with the root cause of the illness. Dr. Penhos' area of interest is in the integrative management of cancer, including Insulin Potentiation Targeted Low Dose Therapy (IPT-LD). He has trained and is certified in this innovative treatment

- 1. Insulin potentiation therapy weekly
- 2. High dose Vitamin C (non-corn base) IV therapy daily
- 3. Oxygen therapy every other day: hyperbaric and H2O2 IV followed by UV light
- 4. Lymphatic Therapy Light Beam Generator with Ozone every other day
- 5. Mild Silver Protein 1200 IV every other day for viral, bacterial, fungal and parasitic infections
- 6. Detoxification: ion cleanse, liver cleanse, colon cleanse, infrared sauna, coffee enema, chelation (oral and IV)
- 7. Hyperthermia: far infrared sauna with ozone
- 8. Exercise: free gym access
- 9. Nutrition: organic cancer diet PO and nutrition IV

The patient's condition will be monitored daily.



Risk of relapse:

CTC concentration

Measured: isolated 6.2cells/ml, SD +/- 0.3cells

Cut off point <= 5cells/ml

Resistance markers:

MDR1: 55% MRP: 45% LRP: 2% GST: 20%

Metastases/angiogenesis risk related markers

FUNCTION	CLINICAL RISK	MARKERS	RESULTS	OUTCOME
Migration-		MMPs	45%	HIGH RISK
invasion	HIGH RISK	KISS-1-r	normal	LOW RISK
		Nm23	normal	LOW RISK
Angiogenesis	·	VEGFr	60%	HIGH RISK
	HIGH RISK	FGFr	55%	HIGH RISK
		PDGFr	45%	HIGH RISK

Proliferation related markers:

MECHANISM	CLINICAL RISK	MARKERS	RESULTS	OUTCOME
Signal transduction	HIGH PROLIFERATIVE	Ras/raf/MEK/Erk1- 2	45%	HIGH RISK
pathways	SIGNAL	mTOR	normal	LOW RISK
Growth factor	HIGH	EGFr	55%	HIGH RISK
receptors	PROLIFERATIVE	TGF-β1/2	45%	HIGH RISK
	SIGNAL	c-erb-B2	normal	LOW RISK
Hormone		Estrogen Receptor	normal	LOW RISK
receptors	HORMONE	Progesterone Receptor	normal	LOW RISK
	INDEPENDENT	NC3R4-A	normal	LOW RISK
		NC3R4-B	normal	LOW RISK
Cell cycle rate		P27	30%	LOW RISK
	RAPID	P16	25%	HIGH RISK
		P53	20%	HIGH RISK

Resistance phenotype markers:

MARKERS	RESULTS	OUTCOME	PHENOTYPE		
Dnmt1	normal	LOW RISK			
06-methyl-DNA-tran.	normal	LOW RISK	NON DEGLOTANT		
HAT	HAT normal LO		NON RESISTANT		
Histone deacetylase	normal	LOW RISK			

Non cell cycle depended	S phase of cell cycle						
Alkyliating agents	Inhibitors of topoisomerase I	Inhibitors of topoisomerase II	antimetabolites	Inhibitors of tubulin polymerization	Spindle poisoning agents		
Carboplatin Oxaliplatin			Fudr				

Targeted therapies

Moab (Monoclonal Antibodies)	SMW (Small Molecular Weight molecule)
Bevacizumab as inhibitor of neo-angiogenesis.	Regorafenib as inhibitor of angiopoietin 1,
Panitumumab as inhibitor of EGFr.	PDGF r and RET.

Biological/natural substances:

Class I (cytotoxic agents)	Class II (immuno-modulatory effect)	Class III (growth factors inhibitors)
Agaricus Blazei Murill Artecin Ascorbic acid Bio D Mulsion NuMedica Micellized D3 DCA (dichloroacetate) Poly-MVA Salicinium Super Artemisinin		Curcumin (turmeric) Genistein Indol 3 Carbinol Quercetin VascuStatin

It is recommended to use in a monthly base one agent from each class and then switch them after a month with the next potent agent from the same class in order to avoid secondary resistance.

Radiotherapy/Hyperthermia sensitivity:

Marker	Result (%)	Clinical outcome per marker	Clinical outcome
HSP90	-5%	SENSITIVE	
HSP72	normal	RESISTANT	SENSITIVE
HSP27	-10%	SENSITIVE	

Follow-up options:

YES	/
NO	

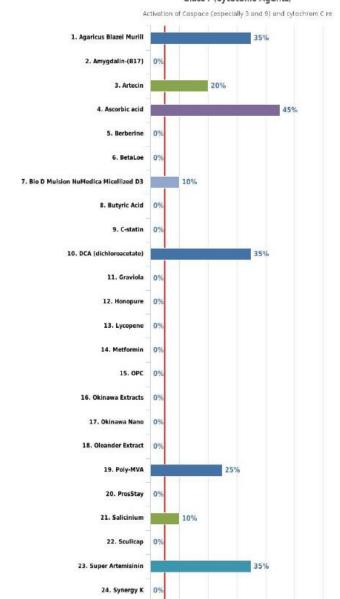
Time interval (when)

After 3 months	After 6 months	After 12 months
/		

Test for follow-up

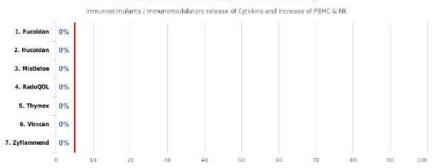
ONCOTRAILS					ONCOTRACE	ONCOCOUNT		
Breast	Lung	Sarcoma	Colon	GI	Prostate	melanoma		
							1	





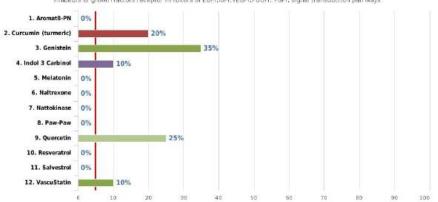
25. Teavigo

Class II (Immunostimulants/immunomodulators)



Class III (PK inhibitors)

Inhibitors of growth factors receptor inhibitors of EGFr, IGFr, VEGFr, PDGFr, FGFr, signal transduction pathways



CONCLUSION: It seems that this specific population of malignant cell have greater sensitivity in Agaricus Blazei Murill, in Artecin, in Ascorbic acid, in Bio D Mulsion NuMedica Micellized D3, in DCA (dichloroacetate), in Poly-MVA, in Salicinium, in Super Artemisinin, in Curcumin (turmeric), in Genistein, in Indol 3 Carbinol, in Quercetin, in VascuStatin and less in Amygdalin-(B17), in Berberine, in BetaLoe, in Butyric Acid, in C-statin, in Graviola, in Honopure, in Lycopene, in Metformin, in OPC, in Okinawa Extracts, in Okinawa Nano, in Oleander Extract, in ProsStay, in Scullcap, in Synergy K, in Teavigo, in Ukrain, in Vitanox, in Fucoidan, in Hucoidan, in Mistletoe, in RadoQOL, in Thymex, in Virxcan, in Zyflammend, in Aromat8-PN, in Melatonin, in Naltrexone, in Nattokinase, in Paw-Paw, in Resveratrol, in Salvestrol.

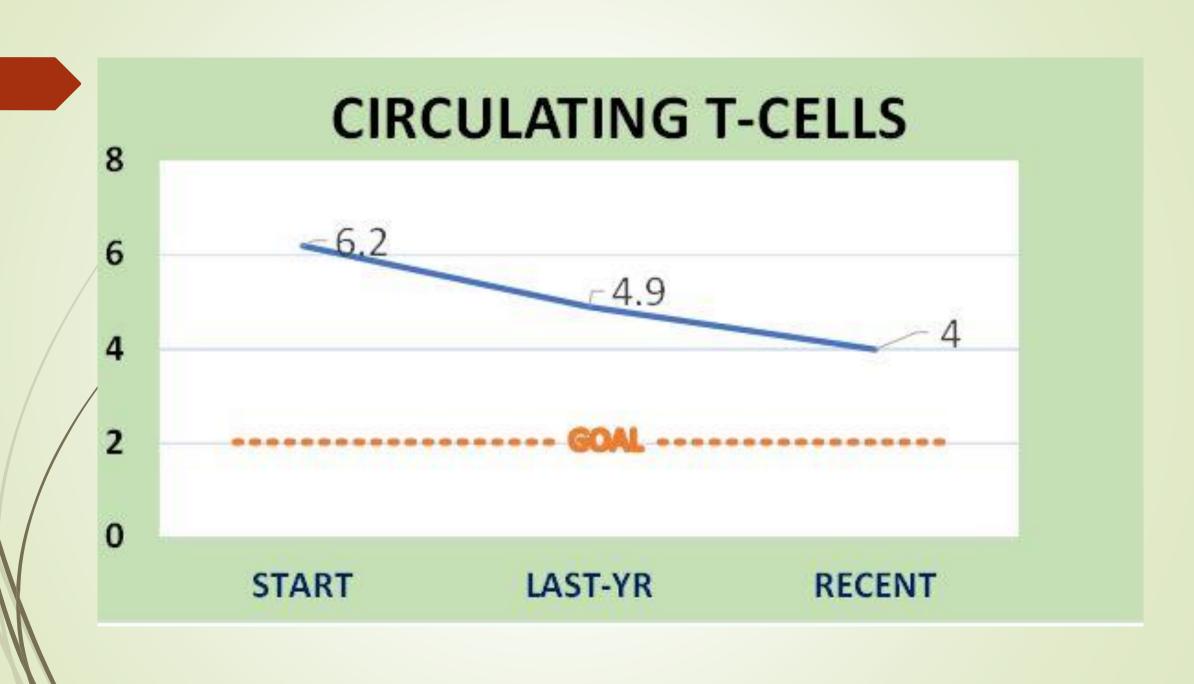
Sincerely,

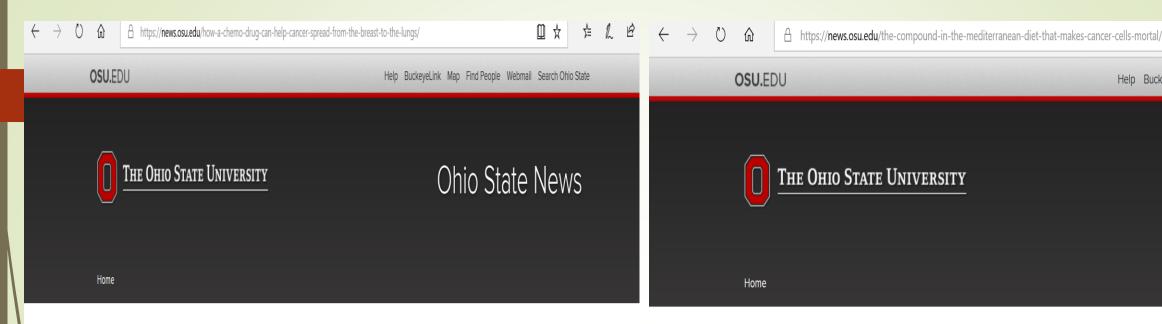
CHEMO doesn't kill cancer stem cells (CTC's)











August 07, 2017

How a chemo drug can help cancer spread from the breast to the lungs

COLUMBUS, Ohio - The very same treatment that thwarts breast cancer has a dark side - it can fuel the spread of the disease to the lungs.

Researchers at The Ohio State University studied the cascade of events that lead to metastatic cancer and found clues to why it happens, opening up the possibility of one day interfering with the medication's downsides while preserving its cancer-fighting properties in breast tissue.

The front-line chemotherapy drug paclitaxel sets off a variety of molecular-level changes that allow breast cancer cells to escape from the tumor. At the same time, it creates an environment in the lung that is more hospitable to the cancer cells, facilitating the

Share this release

How a chemo drug can help cancer spread from the breast to the lungs







Connect with us





May 19, 2013

The Compound in the Mediterranean Diet that Makes Cancer Cells 'Mortal'

Help BuckeyeLink Map Find Pe

Scientists Design 'Fishing' Technique to Show How Foods Improve Health

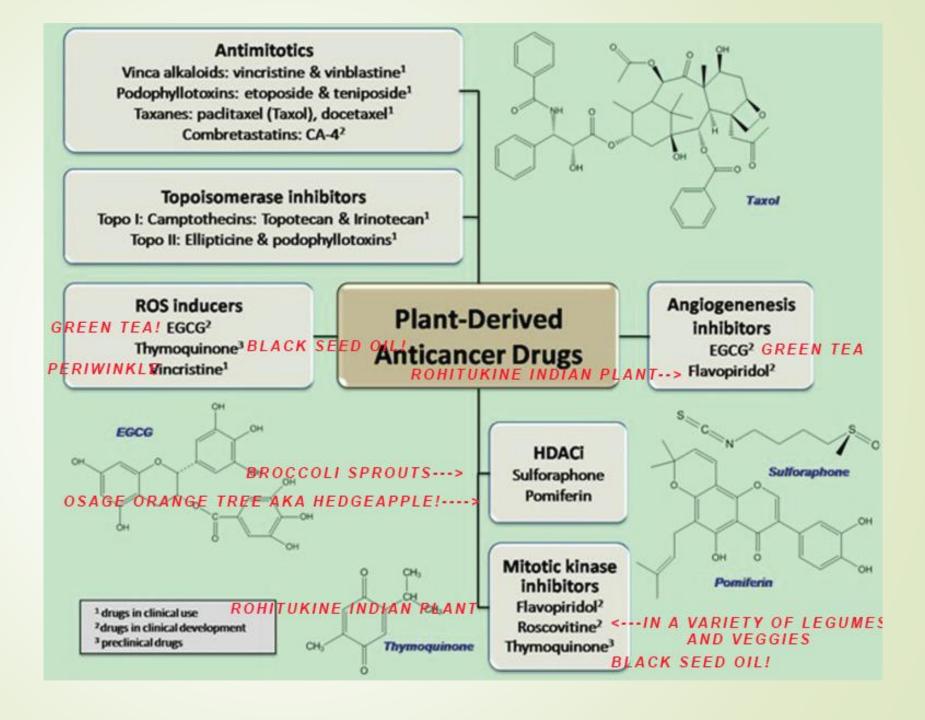
COLUMBUS, Ohio – New research suggests that a compound abundant in the Mediterranean diet takes away cancer cells' "superpower" to escape death.

By altering a very specific step in gene regulation, this compound essentially re-educates cancer cells into normal cells that die a scheduled.

50% of

Cancer drugs

are plant based!



Summer of 2017







Current Stats: 1 out of 2 men 1 out of 3 women!

Unless you have an really aggressive cancer you've had it a decade before diagnosis.

Researchers from The University of Texas MD Anderson Cancer Center looked at data from more than 393,000 people diagnosed with colon or rectal cancer between 1975 through 2010 who are part of the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) registry. Based on current trends, they predict that by 2030 the incidence rates among people ages 20 – 34 years will increase by 90% for colon cancer and by 124.2% for rectal cancer. Among people ages 35 - 49 years, they predict the incidence rates will increase by 27.7% for colon cancer and by 46% for rectal cancer.



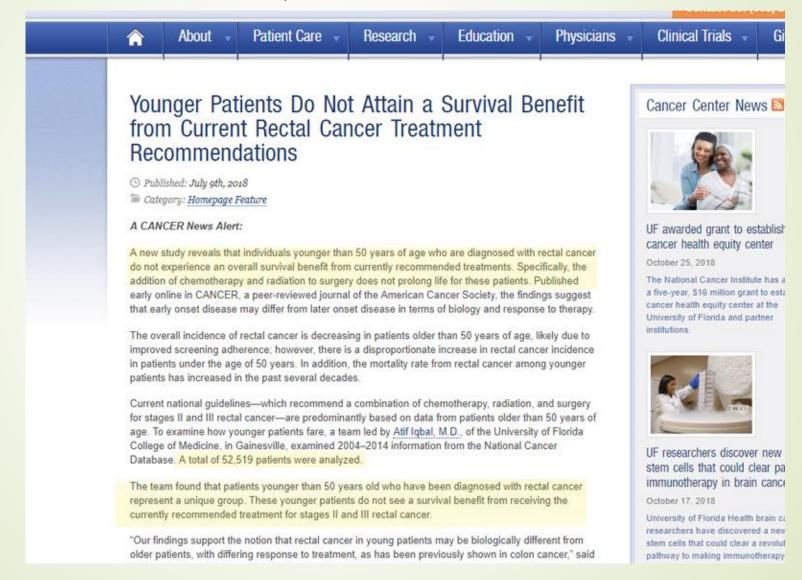






University of Florida Study July 9th 2018

https://cancer.ufl.edu/2018/07/09/younger-patients-do-not-attain-a-survival-benefit-from-current-rectal-cancer-treatment-recommendations/



Microbiome?

Fusobacterium

- Elevated in colorectal cancer
- 87% tumors are positive
- Periodontal disease
- What feeds it?
- What bacteria does it compete with?

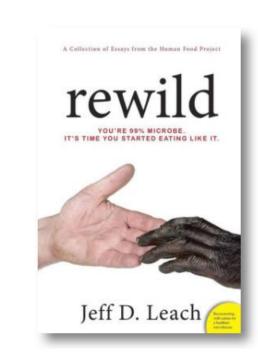
Lachnospiraceae

- Decreased in colorectal cancer
- Considered protective of colorectal cancer.
- Creates butyrate which inhibits cancer.
- What feeds it?

Fiber per day

Paleo-like 19 g Omnivore 19 g Paleo 25 g Omnivore- with no red meat 27.8 g Vegétarian 32.8 g V∉gan 43 g African kid under 5 years old 30-150g!!!!!!

- Low carb = no gut fermentation=kills microbiome.
- Low plant matter dropped protective species and raised harmful bacteria levels.
- Hadza tribe adult members gut microbiome does not include Bifidobacterium and lactobacillus after infancy!!!!!!!!!!!!
- The above bacteria can compete with native species!!!!
- Can very quickly turn up or down bad bacteria based on how the amount of fiber consumed.







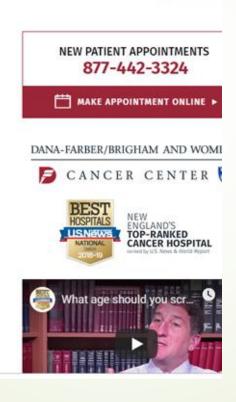
Young-Onset Colorectal Cancer Center

Overview Our Specialists Research and Clinical Trials Patient Events Contact Us

HOME / GASTROINTESTINAL CANCER TREATMENT CENTER / CANCER TYPES & PROGRAMS / YOUNG-ONSET COLORECTAL CANCER CENTER







■ *

The UK Grand Challenge!

"We've all been working on this problem in our individual labs and hospitals,"

The robo gut mimics nature using a special tank called a bioreactor. "We've created a bunch of bioreactor vessels that allows the whole microbiome from a person's gut to be grown in the lab."

Things that fuel cancer cell growth.

Heterocyclic Amines Methionine Heme Iron **Animal Protein** IGF-1 MTOR Amino acids

This is NOT what indigenous people ate!



Some ate their meat raw and when cooked, it was boiled or heated on a stone. Did they eat the muscle or just the organ and bones?

What was their toxic burden???

We are being exposed to too many carcinogens and therefore, we need more medicine...



Juice Recipe

Base
5lb carrots
1bunch celery

Extra-Knob of ginger
One beet



Smoothie Base

2-3 cups fruit

1 banana

Extras!

7 apricot seeds (take it slow)

Broccoli sprouts (Start with a large pinch)

Amla powder 1 tsp

Barley Grass Powder or Moringa Powder

Walnuts

Jason Winters Tea (until thin)

Cancer Stem Cell Killers

- **EGCG** -Green Tea
- Genestein red clover
- Delphinidin Blueberry
- B17-apricot seeds
- Sulforaphane and Indole-3-broccoli sprouts
- Resveratrol-berries and grapes
- Vitamin C-Amla
- 6-Gingerol Ginger
- B-carotene/falcarinol-carrots
- Apigenin
- Beta vulgaris L.-Beets

- Isothiocyanates –
 Cruciferous veggies.
- Piperine Black pepper
- Quercetin Capers, onion
- Curcumn-Tumeric

HEALTH & MEDICINE

Broccoli and Brussels sprouts: cancer foes



Research finds compound in such cruciferous vegetables that may help to suppress tumors

Indole 3 changes PTEN one of the most important tumor suppressors in the history of cancer genetic to allow it to do its job!

Dosage 6 lbs broccoli a day!

No worries! Use broccoli sprouts, then have 100 Indole-3 and 25x sulforaphane than mature broccoli!

Lemon and Garlic study!

Treated with lemon extract OR garlic extract tumors shrunk by an average of 80%, and 60% of the mice were completely cancer free!

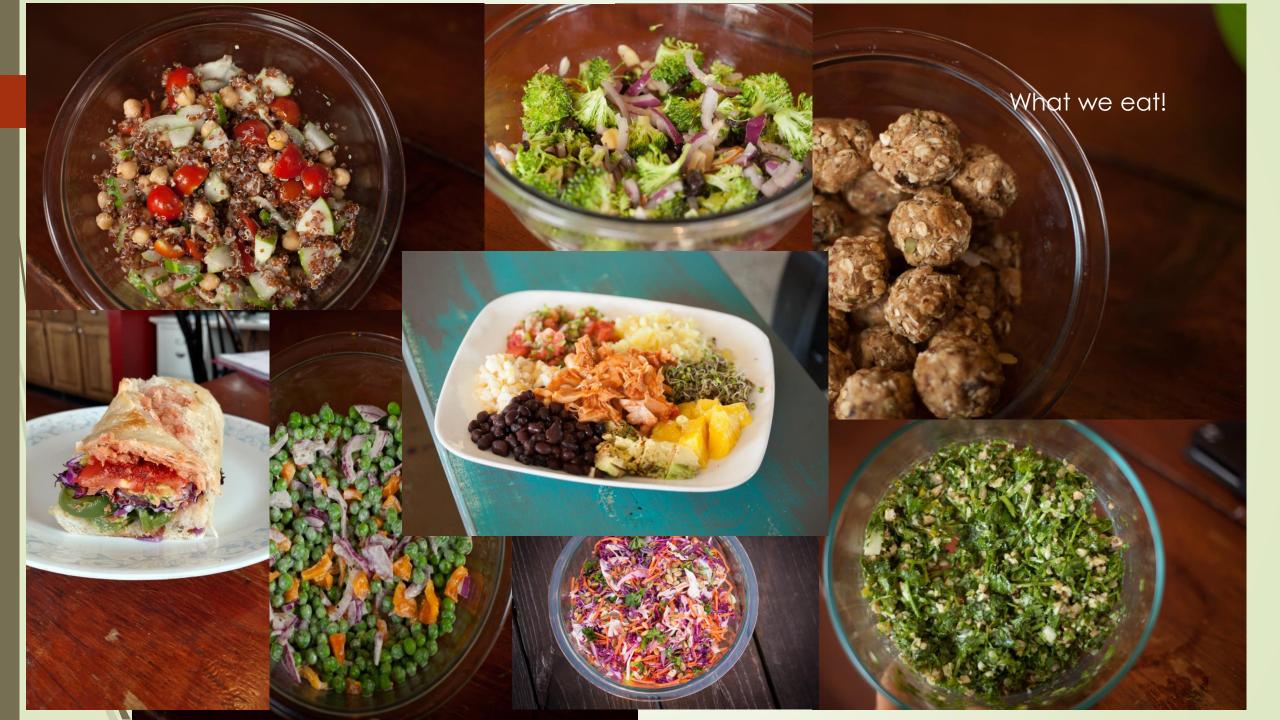
The control group of mice not given either extract had an increase in tumor size of 566%.

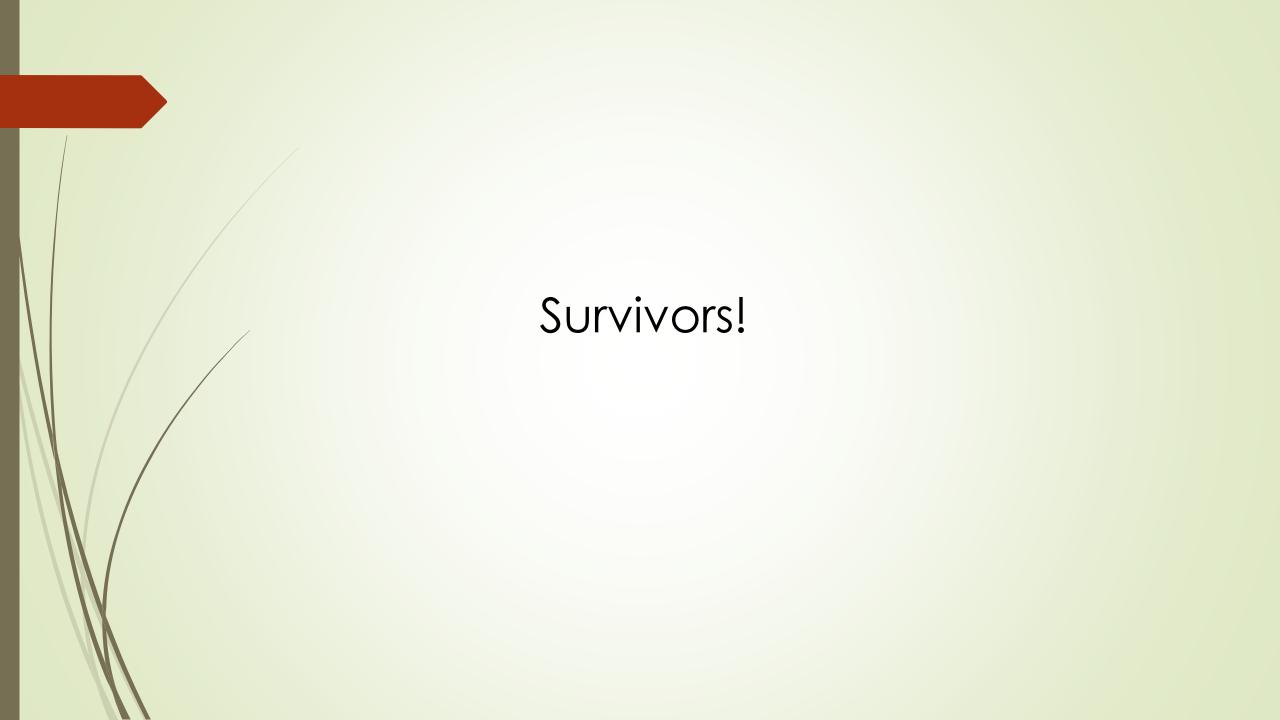
Tumors shrunk by an average of 91% and completely disappeared in 80% of the mice treated with BOTH lemon and garlic extracts!



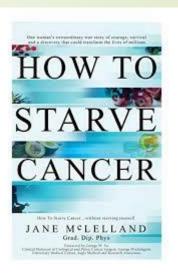
https://www.sciencedirect.com/science/article/pii/S0899900717301260













Survivors!

	Excel Online	Excel Online OneDrive > Documents Book 10 - Saved												
File	Home , Insert	t Data Review	View Tell me what you	want to do Open in Ex	icel	75.00	J. L.							
Y	ears live	d d	St	a g e Open in Ex	100	Juic	6							
Z47	- fe			La		-								
	8	D	E	4 6	н	V	1	K	L	M	N	0	р	Q
26	7 Sue Ledbetter	A THE RESIDENCE AND COMPANY OF THE PERSON OF	6 r Inflammatory Breast	jEliminated, meat, diary	AND DECIMAL STREET, ST			1000			1000			
27	14 Kathy Bero	The second contract of	Inflammatory Breast		ds at least 10 servings, occasional grass fed a	animal and fish								
28	9 Bain Cantin		Breast	The second secon	dairy /no red meat-keto		-			Yes				
29	18 Janette Murray-Wake	A STATE OF THE PARTY OF THE PAR	Breast-366 marathons in a rowl	3 Raw Vegan			Raw Vegan							
30	37 Ruth Heidrich		Breast-Iron Man champ	4 Raw vegan (McDougall)			Low Fat Raw Vegan							
31	11 Jessica Biscardi	DX 2002-Not sure if ali		CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE	e/no proccessed foods and no conventional			Yes						
32	39 Doris Sokosh	DX 1971-passed 2014	Breast-Mirade-very end stage!	Carrot Juice/apple/celer	Y/h Carrot	Carrot/appl	Ne/celery							
33	10 Sheila Herron		Breast	4 Dr Burzynski's gene targ	yet therapy									
34	11 Karen Dennis	DX 1992-p2012	Carcinoid	Passed away 11 years a	after terminal dx when she stopped treatmen	ant, no details on diet bu	ut she gave nutrition class	ise: no details	on diet					
35	Jane Van Benthusen	n DX 2007-? Not sure if s	's Cervical	eliminated, animal, sug.	gar, processed foods. Juiced.		Raw vegan		1					
36	8 Allan Taylor	Dx 2011-Alive	Colon	4			Raw Vegan	Alk diet						
37	7 Ann Cameron		Colon	4 Carrot Juice only, no die		Carrot								
38	3 Lindsey Martin	DX 2011 Passed 2014 i	Colon	3 Cannabis Oil after conv	ventional failed.	1000000								
39	15 Chris Wark	Dx 2004 Alive	Colon		2x month or less now. Red meat only once	t a year spe Carrot/Cele	er Raw Vegan-initially							
40	3 John Tanzi	DX 2013-PASSED 2016	6 Colon -70 years old at dx	and the second s	siac tea/beta glucan/given 2 months to live									
41	11 Ivelisse Page	DX 2008 Alive	Colon	4 Mistletoe/Juice/high pe		beet/apple	*							
42	The second secon	DX 1993-3013	Kidney-Renal Cell-given months	The state of the s	T diet whole food organic	Carrot/beet								
43	10 Jim Gordon	45000000000000000000000000000000000000	Kidney		rest herbs/eliminated sugar	1000.57656								
44		The state of the s	CIL	Macro					Macro					
45	38 Glenn Sabin		CLL-N if 1 Book		nd veggies, Genestien, ECGC-green tea. Only	voccasional fish like sale	mon, halibut or sardines.	No other ani						
46	John Dicarlo	Marie Control of the State of t	Leukemia	4 Dandelion Tea-No other	the color of the c	THE PERSON NAMED IN COLUMN TWO								
47	Bill Trucks	100000000000000000000000000000000000000	Liver	4 Black Salve-whoa crazy!										
48	44 Dr. Carl Helvie		Lung-given 6 months	4 75% raw and vegan plu	A Parl									
49	33 Donald Factor	and the first transmission of the pro-	7 Lung /son of Max Factor Need to	the contract of the state of th	vegan diet, IVC, laetrille, enzymes									
50	24 Janet Vitt	The state of the s	Lung small cell lung-miraculouse r	4 Macro					Macro					
51	4 Joe Mancaruso	DX 2013/Passed away		4 Keto-high meat/process	sed				-	Meso	1		High amou	int of m
52	17 Aine Shaw	The state of the s	as Lung-no details on diet	4 photodynamic therapy										
53	18 Ante Kresic		Lung	Honey/pine needles	-									
54			Burkitt's Lymphoma	4 Gonzalez/enzyme										
55	14 Joyce Forsyth		Non-Hodgkins Lymphoma	4 Gerson										
56	Lou Sina		Lymphoma	the state of the s	sed food/juice/enzymes/cocffie E	Carrot/cele	ery/beet/spinach							
57	11 Cortney Campbell	and the first of the second principles (second principles)	Lymphoma		eatgrass, Budgwig-eiminated all sugar, meat									
58	Becky Gaw	DX 2011-cant find her,			ian, various tintures-red clover/apricot/rebo									
59	8 Sandi Rog	the section is not the section of th	Lymphoma	and the state of t	eatic enzymes, high plant, rarely eats meat	and the same of th	7		_				_	1
60	16 Stacy Kneeeshaw Jet		Melanoma		uicing/Budwig/DMSO+vitamin C				_					
51	33 Mariene McKenna		Melanoma	4 Macro										
62	Control of the Contro	DX 2010-Passed 2017		4 Keto					_				_	
63	CONTRACTOR DESCRIPTION OF THE PARTY OF THE P		Mulitiple Myeloma Mulitiple Myeloma		grams) and Oxygen therapy									
64	THE RESIDENCE OF THE PARTY OF T		Neuroblastoma		grams) and Oxygen therapy and Supplements(alfalfa?possibly red clove	er?) Carrots/app	oles	_	_		1			
65			Neuroblastoma Neuroblastoma		photodyamic therapy-no details on animal		-		_	1	1		_	
56	19 Evita Ramparte	T-11-11-11-11-11-11-11-11-11-11-11-11-11	Ovarian	Raw vegan/juicing-wan/				_	_				_	
7	27 Sanae Suzuki	A STATE OF THE PARTY OF THE PAR	Thyroid	4 Macro					Macro		1			
8	19 Sarah Ann Cooper		Pancreactic- nearly escaped the "bar		syme/is/cing		1		- FIBUTO		1		+	
9	Kim Thacker				100 to	monthia a carrett and	Terespeni		_	_	+		_	-
	The second secon				amount of raw dairy and eggs. 64 oz Juice, sa	amounte, et carrots at.	Secrety	_	_	_	+		+	-
70	16 Felicity Corbin-Whee William Holeman	The second secon	Pancreactic Proctate	Raw vegan/B17/Juicing		A	ter and 1 mars hits	Veloci	+	+	+		+	
71	William Holeman	The state of the s	Prostate	Gerson/vegetarian diet		2 carrot ju	ices and 1 green juice per	. U0)	+	+	1			+
16	17 Issa Khalaf	DX 2002-Alive	Prostate	4 Gerson/vegetarian diet									1	

Years Alive (2019)	Survivors-Thankful they shared their stories!!! DX date		Type of Cancer	Stage
8	Corrie Yelland	dx 2011-Alive	Anal Cancer, Vulva, and skin	
	Randal Black	DX 2017	Basil cell Carcinoma	
11	Enoch DeBus	DX 2008 Alive	Basil cell Carcinoma	
7	Trevor Smith	DX 2012 Alive	Bladder Cancer T2A	
5+	Ray Wiseman	DX 2003 alive in 2008 for sure. I think he's still alive.	Bladder Cancer	
	Josie Numez	dx 2009-not sure if alive	Brain Cancer/ Conventional failed	
9	Ginger Rollins	DX 2010-Alive	Brain Cancer	
	Kevin Raymond	Dx 2004-not sure if alive	Brain Cancer	
10	Kelli O'Brien	Passed away June 3 2018/10 year survivor!	Brain Cancer	
18	Allison Huish	DX in Junior High, can't find date.	Brain Cancer	
10	Megan Sherow	DX 2009-Alive	Brain cancer-Pilocytic astrocytoma	
21	Brenda Cobb	DX 1999	Breast and Cervical	
12	Jessica Richards	May 2007-Alive	Breast	
9	Di Georgiou	DX 2010-Alive	Breast	
15	Veronique Desaulniers	DX 2004	Breast	
12	Suzan Macco		Breast	
27	Lorraine Day	Dx 1992-alive	Breast	

Years Alive (2019)	Survivors-Thankful they shared their stories!!!	DX date	Type of Cancer	Stage
11	Karen Dennis	DX 1992-p2012	Carcinoid	
	Jane Van Benthusen	DX 2007-? Not sure if she's alive	Cervical	
8	Allan Taylor	Dx 2011-Alive	Colon	4
7	Ann Cameron	DX 2012 Alive	Colon	4
3	Lindsey Martin	DX 2011 Passed 2014 of a surgical error, not cancer	Colon	3
15	Chris Wark	Dx 2004 Alive	Colon	3
3	John Tanzi	DX 2013-PASSED 2016 no detail	Colon -70 years old at dx	4
11	Ivelisse Page	DX 2008 Alive	Colon	4
20	Rita Znamirowsky	DX 1993-3013	Kidney-Renal Cell-given months	4
10	Jim Gordon	DX 2009 Alive	Kidney	4
36	Christina Pirello	DX 1983 Alive	CLL	
38	Glenn Sabin	DX 1991-Alive	CLL- N if 1 Book	
	John Dicarlo	DX 2009?	Leukemia	4
	Bill Trucks	DX 2005	Liver	4
44	Dr. Carl Helvie	DX 1975-Alive	Lung-given 6 months	4
33	Donald Factor	DX 1986-passed 2017	Lung /son of Max Factor!Need to conf	4
24	Janet Vitt	DX 1995-Alive	Lung small cell lung-miraculouse reco	4
4	Joe Mancaruso	DX 2013/Passed away July 2017 Blood clots and stroke Lung		4

PBS Chef Christina Pirello



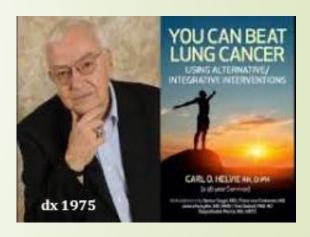




The most shocking thing I've learned about cancer!!!!!!!!!!!







Books!







Health Coaching!



Jodi Ledley

Author Speaker Coach

Skype consultations In-person consultations

adventureswithjodi.com jpo45843@yahoo.com

Experience in Overcoming Obstacles

Let Food Be Thy Medicine