Keep away from people who try to belittle your ambitions. Small people always do that, but the really great make you feel that you, too, can become great.

MARK TWAIN

Dr. Barry Boyd has been a practicing medical oncologist since 1993. In 1998, he founded the Integrative Medicine Program at Greenwich Hospital–Yale Health Systems, where he is currently the director of nutritional oncology. He is an assistant clinical professor, the director of curriculum in nutrition, and the director of curriculum of integrative medicine at Yale School of Medicine and an affiliate member of the Yale Cancer Center. He was also the associate clinical director of the Weill Cornell Center for Complementary and Integrative Medicine at New York Presbyterian Hospital.

Dr. Boyd obviously brings insights from alternative and integrative treatments to his practice, but he doesn’t call himself an alternative doctor at all. Nor does he admit to working outside the box. “I call it a bigger box. I use conventional treatments in unconventional ways. In addition, much of what is scientifically valid, such as nutrition and lifestyle factors, has not been actively integrated into cancer care. These areas are within the bigger box!” he exclaimed enthusiastically.

It’s reassuring (and inspires much needed hope) to know that there are MDs working within the traditional system who recognize the dysfunctional nature of how cancer is being treated and how cancer patients may be subject to what he calls “medical hexing.”

“The nocebo effect is the opposite of the placebo effect,” Dr. Boyd explained. “If a doctor tells a patient their outcome will be bad, then . . . people are susceptible. Their outcome probably will be bad. But that’s not just a function of biology; it’s also the result of giving up because you think there is no hope.”

Dr. Boyd recalled a patient who was diagnosed with the early stages of lung cancer. “The man had an early but very treatable pneumonia. I knew we could treat him, and he’d be OK. I admitted him to the hospital on Friday, signed him out to a colleague, and when I returned on Monday, I found that he had died. I asked the family what had happened. They said that the covering doctor had said to the patient, ‘I am sorry you have terminal cancer.’ At that point, they said the patient just gave up. He quickly declined and died the next morning. The family was sure it was the devastating impact of those words. He had been ‘hexed.’”

In 1994, Dr. Boyd founded and became director of the integrative medicine program at Greenwich Hospital–Yale New Haven Health, and in 2000, he opened the Boyd Center for Integrative Health, which is devoted to cancer, nutrition, and lifestyle. He has worked with the Connecticut Challenge, a cancer-survivor charitable organization based at Yale, in order to develop a model cancer survivorship program within the Boyd Center.

Dr. Boyd believes that instilling hope in newly diagnosed cancer patients is not only important,
but also realistic. “I believe in what I call the Mutual Fund Rule, which states that past performance is no guarantee of future results. In cancer treatment, past prognostic data is not an indication of future outcomes, even though patients are frequently given a prognosis that can only be derived from prior studies. I rarely give a specific prognosis based on statistics. I’ve had patients who have remained free of recurrence and off treatment for years with a number of different advanced cancers, often with dire prognoses at the time of diagnosis. You can change your biology, in part by how you feel. I’m convinced of that.”

By the sound of it, you’d think the mind-body relationship is where Dr. Boyd focuses his medical attention, but providing hope and bypassing the nocebo effect is simply the platform of his work. His true passion is rooted in the science and study of what causes and cures cancer.

In our conversation, Dr. Boyd, who was so excited by his passion for the subject, talked so fast and rattled off so many university studies that my fingers couldn’t keep up. What I gleaned from the conversation is that Dr. Boyd believes that the existing paradigm of cancer treatment must be reformatted, starting with what goes on inside medical schools. Specifically, they need to integrate nutrition, exercise, and lifestyle into the curriculum and determine how they can either lower the risk of getting cancer or help cure it.

“Oncology is driven by pharmaceutical drugs, and medical students are taught to rely on them. But if you can increase the survival rate of cancer by up to 40 or 50 percent with lifestyle changes alone, shouldn’t we be teaching that?”

Dr. Boyd then referred to a study that questioned medical students about how they perceive the role of nutrition when treating cancer. “In their first year of med school, they thought nutrition was of value. But each year, the value they placed on it progressively decreased until, by the time they graduated, they thought nutrition was of limited value. This was particularly true of students planning to become specialists (which is, by now, the majority of medical school graduates) rather than primary-care physicians. It gets trained out of them. Nutrition never gets coherently understood as a vital role in people’s health, so essentially they ignore it.”

To read the rest, buy the book!