

CHAPTER 7

WHAT IS “CONSTITUTIONAL CARE” IN THE ANTHROPOSOPHIC WORLD?

Seeing the Whole Person, the Whole Human Organism, before Providing Care

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“One will understand the human body only if one sees it as an expression of the soul and spirit. If it is seen only as a physical body, it will remain incomprehensible.” —RUDOLF STEINER

First, a story: Robert grew up in a family of teachers. His father’s parents were teachers, and his older sister had become a teacher, too. It was the family tradition. So young Robert felt a significant expectation that he would become a teacher. He set out on that path without giving it a whole lot of thought. Then, as he finished University, Robert’s mother said to him, “You know how much you like Susan, and the two of you were such pals when you grew up next door to each other. Why haven’t you proposed to her yet?” Robert couldn’t deny that he did like Susan very much, even considered her his closest friend. So, he married her.

Then, when Robert was in his forties, he got terrible news. He had colon cancer. Not only was the illness deeply troubling, but the whole situation set him into a whirl of deep self-reflection. He realized that

he really hadn't chosen his current life. He was married and had two children and was well into his academic career. Sometimes that career was exceedingly stressful, and university politics wore on him. But in all honesty, he'd never wanted to be a teacher. He really wanted to be a carpenter. He was married to Susan, but he'd never been sure that he was even attracted to women. He was in great crisis from his illness, and an even greater crisis of personal identity and purpose. Sometimes it felt like the cancer had entered his life story in order to interrupt and uproot everything. It felt strange, but he began to see his cancer journey as an opportunity to discover who he really was.

Why is this such a common theme among people who have cancer? The phenomenon is so common, it was the focus of Lawrence LeShan's book, *Cancer as a Turning Point*. We know that cancer diagnosis often triggers deep soul-searching.¹ But why is that? Why does this disease in particular become a doorway to refining one's own purpose and identity?

In this chapter, we'll wrestle with those questions. We will look at the anthroposophic description of cancer development and how spirit and soul interact with the physical and functional realities in the body. We'll see that today's physical risk factors for cancer (such as toxin exposure and unhealthy foods) are real and influential, but they are not the only factors involved for people who have cancer. As many of my own patients have discovered through their healing journey, there are other factors related to the soul and spirit, which are equally influential. Mistletoe, so well-known for its measurable immunological effects, has surprising gifts to share with the soul and spirit as well. With these deeper understandings, we can see how to address root causes and care more effectively for the whole person.

Understanding the human being's layers: Fourfold and threefold aspects

In the previous chapter, Dr. Blanning described the concept of the fourfold human. Let's briefly review that model. Then we'll look at

one other anthroposophic model and explore both in terms of cancer development.

Physical: We each live in a physical body that is, without any other forces present, only a composite of minerals and elements arranged as organs and structures in a human shape. Without life force, the body is merely a corpse.

Etheric: The physical is enlivened by life forces, which anthroposophic practitioners refer to as the etheric body or etheric forces. In Asian medical traditions, this is known as *chi*, or *qi*. Etheric qualities include the person’s age and general vitality. Are they frail or sturdy? Do they have energetic reserves, or are they exceptionally fatigued? At the most basic, the physical and the etheric together indicate that a body is alive. Etheric forces are pure life forces. They require structure and organization to grow and create in healthy ways.

Astral: A level above the etheric, we find the astral forces, which are more commonly referred to as the soul. These forces encompass a person’s emotions, character, and temperament. Astral forces are highly involved in all daily activities, decisions, and interactions. They also interact with the physical and etheric to bring structure and balance to those realities. Astral forces influence and direct motion and emotion.

The “I”: At a level even higher (and potentially more unifying), we find the “I” or the spirit—the person’s truest self. Ideally, the “I” is in touch with all three other aspects of the fourfold human. The I cannot be damaged or traumatized like the astral forces (soul) can be. The “I” *is*—it does not change. However, the “I” is *cut off* far too often from the other members (the astral, etheric, and physical). In a moment, we’ll see how that cutting-off, or disassociation, can affect the physical body and etheric forces.²

Anthroposophic medicine (AM) practitioners often refer to soul and spirit as the higher members of the human being and physical and etheric as the lower members. How these higher members and lower members connect—or fail to connect—is key to how well the immune system functions.³

It's fairly easy to recognize the *physical*. That's what we perceive with our eyes. That's the part of us that can be observed and quantified by physical, analytical means. The difference between the other three levels can feel a little more challenging. I think of it this way: The *spirit* (the "I") connects us to the Divine. It is unchanging, and it is what makes us truly unique and individual. How the spirit experiences daily life is connected to the *soul* (the *astral forces*). Through our senses, we are constantly exposed to stimuli when we are awake. Initially we react to these stimuli through the astral forces. The initial reaction is instinctual, either sympathy or antipathy. Only through our "I" can we modify these impressions and make them specifically personal. The *etheric forces* are pure, unbridled growth, like yeast. Etheric life forces are not formative or structural on their own. Their tendency is to expand, to multiply. Although they give structure to organelles (intracellular "organs" like nuclei, mitochondria, and ribosomes) and cell membranes, they depend on astral forces and the "I"-organization to create boundaries, structure, and specialization.

That concept of "I"-organization requires some description. The "I," on its own, is eternal. It exists, with or without a body. But once the "I" is incarnated in a body, it needs a tool, an instrument, with which it can dive down and bring structure and boundaries into the astral and etheric forces and all the way down to the physical cellular level. That instrument is the "I"-organization. Throughout childhood and early adulthood, the "I" uses the "I"-organization to individualize the body and all its systems fully, including the immune response. The "I"-organization is what directly encounters the astral forces and the lower members, serving as an organizing and supervising entity.⁴

In AM, in addition to this fourfold human paradigm, we have one more lens through which we view and assess a patient. The threefold human refers to three energetic-functional systems that are at work throughout the body all the time. The nerve-sense system, the metabolic system, and the rhythmic system are each associated with certain organ groups, but they are actually present and active in every cell of the body.⁵

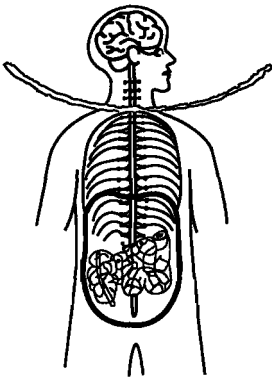
Metabolic system: Focused on creating movement and change.

It is associated with anabolic processes (making complex molecules), warmth, activity, and has a centrifugal (outward, expanding) tendency. This system is centered under the diaphragm (digestive tract, liver) and in muscles. It governs the metabolic processes of every living cell.

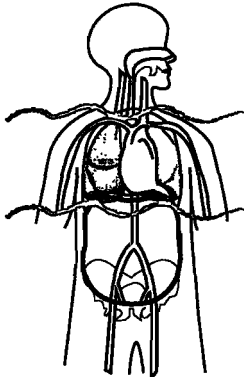
Nerve–sense system: Focused on taking in and processing stimuli. It is associated with catabolic processes (breaking down complex molecules), coolness and stillness, and has a centripetal (inward, contracting) tendency. This system is centered in the brain and CNS, but is active throughout the body, wherever sensory cells take in and processes stimuli.

Rhythmic system: Balances the activities of the metabolic and nerve–sense systems. The regulator between those polar opposites, the rhythmic system maintains balance and harmony between all body systems. It is strongly associated with the rhythmic activity of the lungs (inspiration–expiration) and heart (diastole/systole), but this sense of rhythm is clearly active in every biological process in the body. Every cell has cycles of activity (expansion) and receptivity (contraction), movement and stillness.

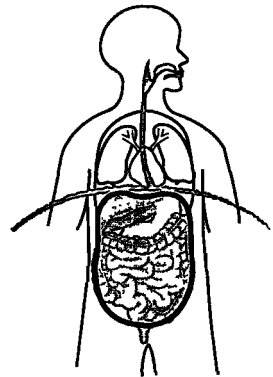
The Energetic/Functional Systems of the Threefold Human



A. The sensory-nervous system



B. The rhythmic system



C. The metabolic system

Looking at the threefold human, we see the organism as fluid, waveform, and rhythmic. The systems are associated with certain organs, but all three systems work synergistically and parallel in every cell, in all organs and tissues. These are not reductionist binaries, rather they are energetic systems that are healthiest when there is a sense of balance and flow. Harmony of these systems equals life and vitality.

When AM practitioners talk about “constitutional polarity,” they’re referring to the nerve–sense system and the metabolic system working at opposite poles. The rhythmic system is the balancing center. Any of these three systems can be imbalanced (over- or underactive), resulting in a host of symptoms that might appear unrelated at the surface. AM practitioners constantly evaluate their patients through both the threefold and fourfold paradigms. This is a framework through which we evaluate a patient’s constitution—their overall condition in terms of energy, temperature, and rhythmic balance. Disparate presenting symptoms begin to reveal their common connections when we look at the whole person from this layered and systemic viewpoint.⁶

*Threefold and fourfold principles in modern life:
A perfect storm for cancer development*

As far as the threefold human, the most common imbalance that I see today is overstimulation of the nerve–sense system. We are constantly in our heads, feeling overwhelmed, overworked, and overloaded with minute-by-minute news cycles. Work and life stress command our days. The body was not made for excessive exposure to electronic devices and relentless chronic stress. The human being is designed for slow processing, metabolizing, and maturing—both food and ideas! When presented with a new idea, the human being would prefer to have time to digest it and warm up to it. A new thought often will not impress us at first. But with time and digestion, we modify the information, merge it with our own thoughts, and synthesize something new. Eventually, we share the new information with someone else, completing our learning process.

Today, we rarely make time for that healthy processing. We let sound bites hit us rapid-fire, never digesting them, and feeling the stress of only the initial reception of a new and abrasive thought. We tend to be force-fed far too much stressful information each day—sometimes every hour! We now know that high-stress lifestyles are associated with accelerated cancer progression.⁷ There are multiple energetic reasons for that, as we'll see after looking at how modern life affects the other two spheres of the threefold human.

Threefold dysregulation and cancer risk factors

Along with an overstimulated nerve-sense system, the standard Western lifestyle tends to include a diet of many processed foods as well as a lack of exercise and time outdoors. The metabolic system struggles under the stress of low-quality fuel and a lack of healthy movement. Simultaneously, the rhythmic system is confused and dysregulated by our loss of day-night rhythm. Electric light and electronic devices force our bodies to stay wakeful and alert all the way up to bedtime, which may be much later than is healthy.

Both integrative and conventional medicine have begun to take these risk factors seriously, recognizing the existence of Metabolic Syndrome. The associated diseases (heart disease, pre-diabetes, diabetes, fatty liver) respond beautifully to lifestyle transformation. But, left unchecked, such conditions can become cancer risk factors themselves.⁸ Some conventional practitioners have also begun to acknowledge the seriousness of rhythmic system dysregulation. They refer to this more commonly as circadian disruption. Dysregulation in the rhythmic system is associated with certain cancers. Multiple studies have found that night shift workers have higher cancer rates.⁹ This holds true regardless of the individual's socioeconomic status.¹⁰

What is happening here? From a threefold human perspective, our modern lifestyles predispose us for *dominance of the nerve-sense system*. Meanwhile, the *metabolic system is weakened* by poor lifestyle choices, and the *rhythmic system is weakened* by an arrhythmic schedule and artificial day and night rhythm. It is painfully common to live

in a body where all three of these energetic systems are imbalanced. This threefold dysregulation often first manifests as a chronic feeling of cold, especially cold hands and feet, and as a lack of feverish diseases. The imbalance can also appear as inexplicable fatigue. Conventional medicine has few answers for someone who merely feels tired and not-their-best most of the time. Often standard lab work seems to indicate they are healthy.¹¹

So many of my patients come to me saying, “I was never the person who got sick. But now I have cancer!” This is always a clue to me that a deep threefold imbalance was developing long before the cancer diagnosis. When I ask such a patient when they last had a strong fever, they say that it was in childhood, if they’ve ever had a significant fever at all. Here is where we see the first vivid connection between an imbalanced threefold system and the cancer development process. The body’s ability to dance back and forth between nerve–sense and metabolic system activities is deeply connected to immune function. Warmth is a sign of immune system activity as much as it is an indicator of heightened metabolism. When AM practitioners say that “we lack warmth today,” this is what they are talking about. The immune system has been slowed, muted.^{12,13}

As much as we need stillness and coolness to properly sense and process new information, we need warmth and activity for healthy growth, repair, and immunity. Nerve–sense system activities are inwardly focused; metabolic system activities look outward. The rhythmic system balances and coordinates the two poles. In anthroposophic care, we often witness how much we can improve any patient’s general condition simply by increasing warmth and nurturing healthy rhythm—particularly by bringing warmth to the limbs and supporting the heart. The body needs all three systems functioning in harmony in order to be well. Just as the stress of an overstimulated nerve–sense system can compromise immune cell numbers and activity,¹⁴ we’ve also seen exercise and meditation practices improve immune cell counts and function.^{15,16}

Fourfold imbalance and cancer development

We've seen how imbalance in the threefold human can set the stage for the immune dysregulation that is present when cancer takes root. Let's look through the fourfold lens as well. There are even more clues here regarding how the immune response begins to lose its ability to monitor and address cancerous cells.

Cancer cannot be compared to any other illness like diabetes, hypertension, arthritis, and son on. Once a person is diagnosed with cancer, the patient feels like there is a foreign entity in their body. For the rest of their lives, they will not forget that they have cancer. Every event, every decision is shared with the cancer: "How would my cancer react, how does this influence my cancer?" Cancer is seen like an unwanted guest or a bully.

People who have survived a major childhood trauma have a higher incidence of cancer as adults.¹⁷⁻¹⁹ Though profoundly unfair, this is also a clue, and neuro-immunological clues can be empowering once you are aware of them. From an AM perspective, we view both "shock trauma" (single, highly impactful incidents) and "chronic trauma" (many micro-traumas over the years) as significant risk factors for cancer. The person who survives an earthquake as a child, and the person who is worn down by decades spent in an unhealthy workplace, can both experience damage to their immune system function.

From a fourfold human perspective, the trauma, or traumas, trigger a disassociating chain reaction, in which soul (astral) and spirit (I) begin to pull back from the physical body and its etheric life processes. The stages and progression of cancer are caused by a dysregulation of the fourfold principle. The physiological breakdown develops like this²⁰:

Initial overwhelming and disassociation

1. The sensory system (stress) overwhelms the metabolic system. This arrhythmic, catabolic dominance weakens the etheric life forces. This leaves an area in the physical body bare of life.

This is a “void” in the physical, which we refer to as *locus minoris resistentiae*.

Proliferation

2. Cells in that area start to divide and proliferate of their own accord in a disorderly fashion leading to autonomous proliferation or dysplasia.
3. Tumor cells impose and use their own etheric forces for growth, leading to localized (*in situ*) carcinoma.

Invasive movement

4. Cancer cells impose and use their own astral forces for movement (astral forces are the basis for motion), leading to *invasive cancer*.
5. Cancer cells impose and use their own I-organization leading to *metastasis*.

Metastatic cancer

6. Cancer cells establish their own “personality” and overwhelm their host, leading to *Stage IV advanced cancer* and *cachexia*.

By the end of this process, the spirit (“I”) is quite cut off from the soul (astral) and lower members. Rudolf Steiner hypothesized that the “void” in the physical (mentioned in step 1) is the beginning of cancer.²¹ Eventually, if the cancer progresses unchecked, the tumor imposes its own “I” or character on its host. Thankfully, there are many moments earlier in the process when this cascade can be checked.

Undifferentiated cells are a primary feature of this process. For many patients swept up in this experience, there is also a sense of *poor psychological differentiation*. Remember the spirit (the “I”) is never traumatized; it is the truest self and is always connected to the Divine. But the soul (astral) can be profoundly traumatized, to the point that the spirit cannot take hold of the soul and the lower members. The spirit can be cut off from the other fourfold members. This is how wounds in the soul can manifest in the physical. A person’s soul formation, their

psychological differentiation, can influence *cellular differentiation*. Poor cellular differentiation is associated with cancer development.²²

When the spirit is cut off from the physical, the immune system is also affected. The primary task of immune cells is to differentiate between self and non-self. When the “I” (the truest expression of self) cannot connect with the immune system, that core purpose of recognizing self and non-self becomes confused. Yet, this is the essence of what the immune system must do in the presence of cancer. It needs to clearly recognize cancer cells as unhealthy—they are no longer an expression of the healthy self.

Threefold and fourfold understandings in tandem

Taken together, the threefold and fourfold perspectives show us a picture of modern life as a perfect storm of cancer risk factors. In conventional medicine, when we discuss cancer risk factors, we are usually referring to environmental toxin exposure, smoking, or genetic issues. These are legitimate and powerful risks. But they are rarely the only factors involved. Psychological, spiritual, and circadian disruptions are just as influential from an AM point of view.^{23–25} Indeed, when we look at geographic regions where cancer rates are higher, such as the Mississippi delta area, we see a concentration of carcinogenic toxins (water-borne agricultural chemicals and oil refinery pollution) paired with the inherent stress of severe poverty.^{26–28} Both physical and spiritual risk categories must be addressed to bring lasting healing.

Remember the story of Robert at the beginning of this chapter. From a threefold and fourfold standpoint, modern people are keenly at risk of living someone else’s life (fourfold disruption), while also chronically dysregulating their core energy systems (threefold dysregulation). This alone fosters a spiritual terrain that is especially vulnerable to an active cancer process.

All these ideas are philosophical and spiritual, and yet there are clear quantitative findings associated with them. Whether we look at cancer incidence among night shift workers or among trauma survivors, we can’t deny the connections. The book *Radical Remission* by

oncology researcher Kelly Turner is also compelling. When Turner interviewed over 1,000 cancer survivors who had experienced inexplicable spontaneous remissions, she identified nine lifestyle and treatment choices that all the survivors had in common. Only three pertained to common integrative treatment strategies: significant dietary change, using herbs and supplements, and taking leadership in one's healing. The other six factors were related to the individual's soul and spirit care, including: trauma resolution, cultivating healthy relationships, and purpose-finding.²⁹

From an AM perspective, these remission cases are radical but not inexplicable. Turner's intensive research interviews happened upon principles that AM practitioners have applied for over one hundred years. We regard soul and spirit care as equally efficacious therapeutic modalities, alongside any other anthroposophic, integrative, or conventional treatments. *Self-care, purpose-discovery, decreasing electronics exposure, increasing exercise and time outside, switching to a less stressful job, cultivating empowering friendships, trying artistic therapies, and fostering healthier sleep patterns*—from an AM perspective, these are medicinal therapies.

Acute versus chronic inflammation:

The body's early warning flags before cancer appears

Throughout this book, we've looked at inflammation as it relates to assessing a patient's immune system. Anthroposophic practitioners often express concern about the lack of feverish diseases and a dominant cold constitution among most of our patients today.^{30,31} Now that we understand a little more about how modern life affects the threefold and fourfold human organism, perhaps this concern about inflammation makes more sense.

Again, as my colleagues have already noted, we often see signs of unhealthy *chronic inflammation* among our patients. Chronic joint and soft tissue pain, injuries that heal poorly, gut health issues, and even cognitive problems can all be signs of a chronic inflammatory state. This type of inflammation, believe it or not, is associated with a

cold constitutional tendency. It is not a healing inflammatory response; it is inflammation that has gotten stuck in a damaging cycle. Chronic inflammation hardly ever causes fever and can even be accompanied by below-normal temperature. Instead of serving the healthy purpose of clearing out a pathogen, it forms deposits and leads to hardening processes like atherosclerosis, osteophytes, and cirrhosis of the liver.^{32,33} This is an inward, focusing, centripetal process. The end result is tissue hardening and energy stagnation. We feel worse than before.

Conversely, healthy inflammation is associated with a heightened and healthy immune response. A strong fever is a sign of healthy immune activity. It is transient; after it resolves, the body is stronger than before. When people have an acute fever all they want is to rest, fast and drink fluids. Those are good instincts, and the end result is healing. Similarly, heightened immune activity at the site of a wound or injury is uncomfortable, but not a bad thing. Good inflammation is defined by its wave form—it rises, flushes out the problem, then subsides.

Symptom	Acute Inflammation	Chronic Inflammation
Fever	HIGH	None, though occasionally LOW
Energy	Severe sudden lethargy	Chronic tiredness
Thirst	Dramatically increased	No change
Appetite	None	No change, though occasionally intense cravings
Direction	Centrifugal – Moving outward	Centripetal – Moving toward center, concentrating
End Result	Healing – Feeling better than before	Hardening – Wearing out

Table 7.1: *Acute vs. chronic inflammation*

As we learned in chapter 5, monitoring markers of chronic inflammation can be highly empowering for patients. When we see the immune system swing back toward a chronic inflammation profile, we know it’s time to provide focused support to bring the patient back into balance. Chronic inflammation is an early warning that lets us know the immune system is not in a place where it can effectively deal with existing cancer or ward off potential recurrence.³⁴

In AM care plans, we look for ways to come alongside the body and support a healthy inflammatory rhythm. This is the case for any of our patients, but especially so for those with cancer. Part of the reason VAE provides such surprising effects is that it helps with this core task: reestablishing healthy warmth cycles. Our therapies are often focused on helping the immune system remember how to cycle through times of heightened inflammation and then progress through to optimal resolution. Mistletoe, as a warming therapy, is an especially effective adjuvant.

Mistletoe's mysteries: Applying fourfold and threefold principles to reverse course and restore health

Mystery is mistletoe's standard. We've studied mistletoe's effects and its active constituents extensively, but many of the plant's characteristics remain inexplicable: its strange orb-like symmetry, its metabolic activity in winter, its parasitic quality that somehow doesn't kill its host. Even mistletoe's leaves are a mystery. The leaf surface is identical on both sides; there is no definable top or bottom as we would see in any other leafy plant. This indicates that mistletoe is an exceedingly primitive plant—predating all the tree species we know of today. But if that's the case, how did mistletoe first survive on this planet without any host trees? These are touch points that thrill the souls of those who are interested in the gesture and character of botanical medicines.

As an anthroposophic physician, I look even more closely at specific mistletoe gestures that compare and contrast with the gesture of cancer. Constitutionally, one might regard cancer as “freedom in the wrong place.” Similarly, mistletoe has a kind of displaced freedom; it does not follow seasons, it has no typical root system, and it is evergreen, though it does lose its leaves every seven years. Cancer is comprised of “primitive cells” that have, in a sense, forgotten their differentiated purpose, and mistletoe has a highly primitive plant structure. Both cancer and mistletoe have abundant life forces and strong creative energy.

The two entities differ significantly too. Cancer is similar to pathogenic parasites, in its capacity to steal energy from and eventually kill

its host. Mistletoe is a *hemiparasite*; it needs a host tree, but it does not kill its host. Rather, it preserves its host. In a sense it has overcome its own parasitic identity. Cancer and mistletoe appear to be polar opposites in several other categories, with cancer typically described as chaotic and fast-growing, while mistletoe is highly structured and slow-growing. Instinctively we associate cancer as a dark entity. Mistletoe has a remarkably interesting relationship to light: it prefers dark over light but contains chlorophyll in its root system (the sinker root). Chlorophyll depends on light. How chlorophyll can thrive in the sinker root is still a mystery!

All these energetic signatures are important. From an anthroposophic perspective, mistletoe conveys these unique gestures when we use VAE as a remedy. Let's look at how mistletoe interacts energetically with the threefold and fourfold human.

Cancer	Mistletoe
Displaced -- Freedom in the wrong place, undirected growth	Incongruous -- Freedom in areas that are usually well-bounded
Abundant life forces	Abundant life forces
Primitive cells -- Undifferentiated	Primitive plant structure
Parasitic Qualities -- Can destroy its host	Hemiparasite -- Doesn't destroy its host
Earth-oriented	Cosmic plant
Chaotic	Structured
Fast-growing	Slow-growing
Prefers darkness -- Little magnesium, anaerobic (low-oxygen) metabolism	Balanced between light and dark

Table 7.2: Comparative gestures of cancer and mistletoe

Using mistletoe to restore both systemic harmony and personal purpose

Mistletoe is well researched for its quantifiable effects on the immune system. We've identified mistletoe lectins and viscotoxins and determined many of their specific activities (chapter 2). Researchers are continuing to identify the actions of other compounds in VAE. From a threefold and fourfold perspective, those researched *quantitative* effects harmonize with broader *constitutional* shifts.

Through the threefold lens, mistletoe restores rhythm. It certainly warms the metabolic system. Whether observing the reaction at the subcutaneous injection site or heightened body temperature during fever therapy, mistletoe clearly warms the body. Mistletoe practitioners also observe its ability to reset the rhythmic system. This is equally valuable. Mistletoe seems to restore rhythm to the dance between nerve-sense and metabolic systems, thereby restoring coordination between all body systems. This is still a clinical observation only, but researchers are starting to explore the possible methods of action.³⁵ We often pair mistletoe intentionally with cooling therapies to further reeducate the body in its ability to complete and resolve cycles of warm and cool (see chapters 8 and 9).

From the fourfold perspective, warmth enhancement is again central. According to AM, warming the immune system and warming the soul and spirit are synonymous. Throughout published case studies, one finds stories of mistletoe's most fascinating side benefit. During mistletoe fever therapy, some patients find that old traumas are stirred up and organically resolve themselves (see chapter 3).³⁶ There are spiritual shifts, that we regard as deeply intertwined with the health of the immune system. The immune response is, at its essence, a defense system commissioned to discern between self and non-self. The "I" is the essential self. The immune system is an expression of the "I"; it reflects the person's degree of "I"-organization. Cut off the spirit from the physical and etheric, and the immune response becomes inefficient and confused. Restore that connection, and the immune response clarifies. These are philosophical and spiritual ideas, and yet quantitative research supports them. Depression (often a kind of loss of connection to one's truest self and purpose) affects immune cell counts.³⁷⁻³⁹ Unresolved trauma can influence cancer risk.⁴⁰⁻⁴³

With that in mind, maybe "improved sense of purpose" isn't a random side benefit of VAE therapy. Rather, it stems straight from the underlying healing mechanism. Mistletoe's warming effect restores the "I"-organization. The "I" (spirit) is able to plunge downward to the etheric and physical to restore order among cells and the immune response.

Healthy formative forces can finally lay hold of the unbounded life forces that allowed cancer to take root. Mistletoe seems to convey its gesture—all its symmetry and structure—during VAE therapy. It centers the spirit and soul, and out of that essential shift, formative and organizing forces can reach the body and its immune system.

Researchers point to mistletoe’s ability to increase beta-endorphin levels.⁴⁴ It’s true this effect likely helps with overall outlook. Patients feel more positive and, in some cases, experience mild pain-relief, too.⁴⁵ However, there is a deeper reinvigoration of the soul and greater sense of connection to the spirit, which seem beyond the reach of an endorphin boost. It’s worth noting that these spiritual “side effects” are common among all warming therapies. There’s something spiritually powerful about physical warmth.

Anthroposophic care for the whole human organism

When someone has cancer, it is like a house is on fire. You wouldn’t go after a massive house fire with a handheld extinguisher. Instead, you call professionals who come in, and then it gets ugly. The firefighters break the windows, and they flood the house, and they get the job done. They are effective. Mission accomplished. The fire is out, but the house is not livable anymore! Now, you wouldn’t call the firefighters the next day and ask them to rebuild your house. They would say, “This is not in our job description!”

Metaphorically, that is where anthroposophic and integrative oncologists come in. But we can actually get involved before the house is completely ruined. Thankfully, the body is different from a house. We can support the body during chemotherapy and radiation and surgery. In the best situations, our therapies can mitigate side effects of conventional care and even enhance the desired effects of the conventional treatments.

Conventional oncology aims to destroy the cancer, and it is very good at this objective. *Integrative oncology* seeks to optimize the patient’s inner terrain in order to starve the cancer and help the human organism fight the cancer. *Therapy and pastoral counseling* help the

patient fight the cancer on an emotional and spiritual level. *Anthroposophic oncology* includes all the above and adds artistic therapies to enhance the patient's creative resources, as well as distinctly anthroposophic remedies that encourage normal form and function. The world would be a better, more healing place for people who have cancer if all these practitioners began to speak with each other and care for each patient as a team.

Ultimately, we could strive for what Rudolf Steiner called "spiritual science."⁴⁶ Particularly with cancer, we cannot limit ourselves to the physical reductionist sphere only. If a patient comes to me and they have hypertension, the reason is often quite obvious. With cancer, the "why" is rarely obvious. Spiritual factors are involved. Analytical science looks solely for molecular answers. Spiritual science looks at the whole being. It is no coincidence that most spiritual paths encourage people to think with their hearts and feel with their minds. If we combine the two like that, we develop a *holistic consciousness*. When we take action from within that holistic consciousness, we create sustainably. There is a moral quality to our action that is not self-righteous, but compassionate. When I treat the whole person, transformation can take place, for both my patient and myself. Patient and doctor work together to develop the treatment and care plan.

Nature is synergy. So, we treat the whole person, acknowledging that all factors (threefold and fourfold) matter equally. AM practitioners also tend to use whole plant extracts, acknowledging that all components of the plant matter in its ability to convey helpful effects. With mistletoe, we recognize that all its activities—immunologic, anti-tumor, warmth-enhancing, "I"-organizing, soul-centering—all these effects taken together, convey the benefit of improved quality of life.

Begin with balancing constitutional polarities

Almost every medical practice on the planet understands that the physical manifestation of disease is the last manifestation of an imbalance on the non-physical level. Only conventional Western medicine fully divorces its diagnostics and treatments from any spiritual

awareness. The threefold and fourfold models are *constitutional frameworks* through which we can restore awareness of both physical and non-physical realities.

An anthroposophic practitioner begins with looking for imbalances in the polar nerve–sense and metabolic systems. We look at the rhythmic system and assess its function as the balancing center for those two poles. Observing the fourfold human, we look for weak life forces (etheric) and any sense that the soul (astral) or the spirit (the "I") are pulled back from the physical and etheric. We look for the energies that are dominant and those that are weakened or cut off. Patient care stems from this assessment, rather than a list of physical symptoms only.⁴⁷

Cancer is not solely a genetic or physical problem. An individual patient may have genetic and physical risk factors. Yet, there are non-physical factors involved too. With all cancers, we want to empower the immune response. Understanding that the immune response is an expression of the patient's spirit (the "I"), the anthroposophic practitioner's goal is to bridge any disconnection in the fourfold human and to bring the "I"-organization and its warmth downward, back into the physical and etheric. This is why we use warming therapies like mistletoe.

Involve patients in their own care

Anthroposophic care involves the patient actively, and appropriate VAE therapy is an excellent example of this foundational principle. As practitioners, we can provide a remedy, even mistletoe, in a way that is not empowering. The patient may passively take the remedy and hope for the best. This takes freedom and power away from the patient; they are dependent on their physician and the drug. Instead, if I describe a few changes that the patient could make, and let them choose, this is empowering. I might say, "Just try this way of eating. Try it for three weeks; that's all." They try it, and they come back and say, "That was very hard. But I feel so much better." That experience is *em-powering*; it puts power back in the patient's hands.

The anthroposophic practitioner does not interfere with the patient's freedom. Serious disease often gives us an opportunity to change, but

we have a choice in the matter. Among all modern diseases, cancer is unique in its ability to prompt major personal transformation. It is not like arthritis or heart disease. Cancer is so individual and intimate. So, it often becomes a major turning point.

Mistletoe therapy, when provided appropriately, is empowering for the patient. Finding the appropriate dosage, administering the subcutaneous injections, self-monitoring, and reporting on injection site reactions—these are all the patient’s responsibility. Particularly when VAE therapy is paired with appropriate and personalized dietary change, I see patients become true leaders in their own health and treatment plan. This further strengthens their will. VAE therapy can be hard work, and a patient must actively choose it. Dr. Marion Debus said:

Patients tend to think of doctors as the ones who will get them out of their crisis. But with cancer, because of the stuck-ness and the coldness, we actually have to get them into a *stronger crisis*. The therapy is not meant to be gentle; it’s meant to put the person into a new crisis so that the “I” is able to take hold of the warmth organism in a new way.⁴⁸

This refers to the heightened acute inflammation that comes from awakening the immune system. This is not a comfortable process, and a patient must be aware of this, understand the ultimate benefits, and choose from a place of resolve and commitment.

In anthroposophic care, developing the treatment plan is highly collaborative and personalized. I regard every patient encounter as a karmic event in which I will learn as much as the patient. As we journey together I, too, learn more about the importance of reinvigorating the “I”-organization and restoring the rhythmic system in its balance between the metabolic pole and the nerve–sense pole. In today’s imbalanced world, we spend so much time in a cool, analytical space inside our heads. We all benefit from providing ourselves with more focused care for our metabolic systems, through enhancing warmth and physical movement. We all benefit from incorporating more natural rhythms into our lives. You cannot go wrong with increasing warmth

and restoring rhythm! It’s these lifestyle choices that allow the body to return to a state of self-regulation and harmony.

Other adjuvants alongside mistletoe

Mistletoe is itself a powerful adjuvant to conventional cancer care. Similarly, there are other anthroposophic and integrative therapies that serves as effective adjuvants to mistletoe. Dr. Steven Johnson will discuss other anthroposophic remedies next. He’ll focus especially on *Helleborus niger*, which is often provided to enhance the rhythmic effects of mistletoe. Anthroposophic remedies tend to focus on caring for the etheric, astral, and “I” levels. They also encourage threefold balance and rhythm. After learning about some of the more common anthroposophic remedies, Dr. Nasha Winters will comment on well-vetted integrative therapies that are safe and particularly helpful alongside mistletoe. Through all these recommendations, I hope you notice the personalized nature of anthroposophic and integrative oncology. I hope you see the degree to which every aspect of the human organism is respected and valued for its involvement in the healing process.

CASE STORY ONE: JANE

<i>Singing My Own Healthy Song</i>				
Physician: Dr. Peter Hinderberger	Patient: Jane	First seen: 2011, cancer diagnosis Nov. 2015.	Age: 57 (first visit)	Sex: Female
Cancer Type & Stage:	Invasive ductal ER- PR-, HER2-negative, Stage III right breast cancer			
Risk Factors:	Stressful homelife, multiple metabolic health challenges, food sensitivities, and chronic fatigue			

Jane was my patient for a few years before she had cancer, but she came to me with many other health challenges. She was in her fifties, and she was struggling with serious chronic fatigue. She described herself as “feeling drained to near collapse.” At the time, Jane was 5’6” and weighed 211 pounds. She also had several food sensitivities (milk, wheat, tomatoes, nuts), chronic diarrhea, menopausal complaints (hot flashes), hypertension and hyperlipidemia (high cholesterol), heart palpitations, euthyroid multinodular goiter (meaning her thyroid was still functioning well), tinnitus,

beginning cataracts, and fibrocystic breast disease. That last concern was a flag, but there were so many other challenges we needed to work on just so she could face each day with any energy at all.

Jane was alone at her initial visit with me. Her husband did come with her to at least one appointment, but he was not especially engaged. He seemed quite stoic. He wanted to know my recommendations, but there was not much active compassion coming from him. He and Jane were raising two adopted daughters, who were teenagers and had begun to present some intense parenting challenges. Both daughters were depressed and had suicidal ideations. So, Jane's homelife was not easy or necessarily supportive in the face of her own health issues.

Whenever I spoke with her, I saw a woman who was completely worn out. She needed to be cared for. She asked me to be her Primary Care Physician, and I began to coordinate her care. I referred her to a cardiologist, endocrinologist, and gynecologist, and I recommended a few supplements, dietary changes, an exercise program, and *calcarea carbonica* (a homeopathic remedy appropriate for her constitution).

Over the next four years, Jane began to proactively care for herself. She became interested in nutrition and lost 36 pounds on a diet that was gluten-free, dairy-free, and avoided processed carbohydrates. She put herself on a brisk walking program. Jane felt physically and emotionally lighter, even though her children continued to struggle in life, and they still weighed on her.

Then, in 2015, Jane was diagnosed with a 2.5 cm area of poorly differentiated invasive ductal Stage III right breast cancer. Initially it was assessed as ER+ PR+, HER2-negative. But then her onco-type score came in at 53 and showed that she was actually triple negative (ER- PR-, HER2-negative). This was concerning as this typically implies a fast-growing cancer that is more likely to recur.

Oncotype scores don't always mean much, but a score of 53 is high and was indicative that Jane would benefit from chemotherapy. This was an aggressive cancer, so she had a lumpectomy (six out of six lymph nodes were negative) and began what was supposed to be seven cycles of Taxotere and Cytosan. Jane did not tolerate chemotherapy well, and she stopped after four cycles. She did continue with twenty fractions of radiation therapy over 28 days.

Alongside her conventional care, I treated Jane with *Viscum Mali* Series 1. She was able to build up to 50 mg for her subcutaneous (SC) injections. She remained at 50 mg of *Viscum Mali*, three times per week, for three years. She also took pregnenolone, along with calcium D-glucarate and DIM, as an alternative to an aromatase inhibitor (a strategy also described in Mary's case story, see chapter 4). She took vitamin D for general wellness and an herbal anti-inflammatory product. .

At three years out, Jane still showed No Evidence of Disease (NED). This was fantastic news for someone who'd had a Stage III diagnosis. We dropped the SC injections down to twice per week. With all my patients who have survived breast cancer, I recommend this minimum twice-per-week VAE schedule for ongoing preventive care.

From 2016 to 2018, I saw more than just physical changes in Jane. She let me know that she had been exploring reiki, working with crystal therapy and chanting exercises, and taking tai chi classes. Her daughters were grown and had moved out. They continued to struggle in adulthood, but Jane was making powerful choices to nurture herself. Her own self-care had evolved from avoiding poor dietary habits to building her health proactively in a positive form.

Jane attended programs at her community's nonprofit support center for cancer survivors and began meeting with a psychologist. Going to therapy was especially transformative for her. As she put it, this helped her better cope with "...my body, life's griefs, and environment." Jane read Dr. Kelly Turner's book *Radical Hope: 10 Key Healing Factors from Exceptional Survivors of Cancer and Other Diseases*. This was inspiring for her. Soon Jane was describing a whole lifestyle of spirit and soul nourishment. She began barefoot walking in the woods, went to a massage therapist regularly, and began playing a musical instrument. She intentionally made time for relaxation. She said she was getting rid of physical and emotional clutter and had learned to "sing my own healthy song."

There is nothing more encouraging, more heartening than watching someone face cancer head-on and then seize the time for greater personal change. This is when the deepest astral (soul)

healing can occur. As of January 2021, Jane had been cancer-free for over five years and was dismissed from her oncologist’s care. She continues on mistletoe and her supplement protocol, and she’s in an incredibly positive space now.

CASE STORY 2: RACHEL

<i>Small Community, Giant Creative Spirit</i>				
Physician: Dr. Peter Hinderberger	Patient: Rachel	First seen: Nov. 1995; first cancer diagnosis July 2006	Age: 73 (58 at dx)	Sex: Female
Cancer Type & Stage:	Poorly differentiated (grade3) endometrial cancer; all four lymph nodes found negative upon total hysterectomy. Two small, unspecified nodules in the lungs.			
Risk Factors:	Metabolic and cardiovascular health challenges; history of basal cell cancers			

Rachel was in her mid-forties when I first met her in 2012. She had a history of basal cell cancers but was coming to me for several other health concerns. At the time of her new patient exam, she was 5’6” and 188 pounds with high-normal blood pressure and a systolic murmur (3/6). She also had uterine fibroids and IBS, along with significant anxiety. Her main anxieties were about her family and friends. And cancer. She was worried about some form of cancer appearing again. She wanted to make her own health a more significant priority.

Rachel was married and had four children. She was a Licensed Clinical Social Worker (LCSW) specializing in family therapy. An Orthodox Jew, she worked at a Jewish community center known for its incredible services for the unemployed and people with disabilities. I got the impression there was significant pressure for her to maintain incredibly high-quality client care. She was composed, thoughtful, attentive, and a good listener. I could see more of the therapist than the mother in her. I could also tell she had a comfort level with listening to others—far more than expressing herself.

A nutritionist helped Rachel with some dietary changes, probiotics, and digestive enzymes that helped her gut issues. I recommended some herbal tinctures, vitamin E, and prescribed calcarea

carbonica (a homeopathic remedy appropriate for her constitution). Rachel continued to come to my clinic, on and off for the next 12 years. I helped her through some perimenopausal ups and downs and back pain.

Unfortunately, Rachel's earlier anxiety became a reality when she was diagnosed with poorly differentiated endometrial cancer at age 58. She had a total hysterectomy, and all four removed lymph nodes were negative. One oncologist recommended five weeks of daily radiation. Another oncologist recommended chemotherapy, because the cancer consisted of poorly differentiated cells and extensive lymphovascular invasion (only four lymph nodes were harvested). Indeed, a CT scan showed two small, unspecified nodules in her lungs. Rachel said she felt like there was a "ticking clock" inside her.

She opted for chemotherapy: six cycles of Abraxane and Carboplatin. She completed chemotherapy, the CT scan was repeated, and the scan was clear! This news was "a powerful emotional, religious experience" for her and motivated her to "work on preventive measures for the future." This is when something really clicked for her in terms of soul (astral) and spirit ("I") care. She declared that she had decided "to become more differentiated... pursue my needs as an individual, less driven by my expectations of others, the need to please, the need for approval." In short, she wanted "to focus on healing me." She took a sabbatical from her work and set aside that time for her own healing.

Rachel started on an alkaline diet. She began taking curcumin, LDN, and vitamin D, and began SC *Viscum Mali*. But the dietary shifts, supplements, and mistletoe therapy were small adjustments compared to the personal transformation that unfolded.

To some degree, as rich and beautiful as her Orthodox community was, I'd often sensed that Rachel's experience there was keeping her small. She remained in that community, but she began to drastically alter the tone and expectations of all her relationships. She even rewrote her *ketubah* (a Jewish marriage agreement) and managed to stay married to her husband through that process! She wrote a book about rising above disease and, in it, quoted both Rabbis and leaders from other traditions. Rachel's life began to be characterized by a sense of expansiveness. Her

own children were grown by now and starting families of their own. She became more active in the lives of her grandchildren and began learning a musical instrument. This was a time of true personal renaissance.

As of 2021, Rachel has now gone 15 years with no evidence of disease (NED). That is to be celebrated. Her personal transformation is equally worth celebrating. She has come into her own. Rachel is a woman who treated cancer as a wake-up call instead of a punishment. She laid hold of this season in her life and bloomed, without concern about where she was planted or how others might perceive her. It's been a transformative experience for her and all her loved ones.