Live LONGER Feel BETTER

DEFEATING DEMENTIA, DEPRESSION & DIABETES

Episode 1: Toxins

Complete Transcript

Every word.

www.LiveLongerFeelBetter.com/toxins

Trevor King: Welcome to Costa Rica. Why are we in Costa Rica? Well, two reasons. First

of all, it's a Blue Zone, which some of you might know, you might not. Secondly, there's a very good friend here who we've decided to involve in this series of Live Longer Feel Better. You've already seen Mike in the intro. Obviously, I've been involved from day one, and we've decided to involve a

very good friend of ours, Mr. Timmy Centner.

Timmy Centner: Hey, Trevor.

Trevor King: Timmy, lovely to be here.

Timmy Centner: I am so delighted to have you on top of this mountain with me. One of the

more pivotal things that we've done in our life is move my family from South Alabama to Costa Rica, and it's been truly life-changing. I'm so excited that

you guys have come here and let me be a part of this.

Timmy Centner: Now, I'll come clean and say I am a marketing copywriter by trade, so that

might seem like a strange person to involve in this project, but the unique

thing is that I have been behind the scenes in some of the biggest

documentary series in the health space over the past several years. I have

some, I think hopefully, interesting insights into this project.

Trevor King: For sure.

Timmy Centner: When you presented it to me, you and I have been friends for a while, and

when you showed me what you had done with the original series, I was blown away. I think that we have something very specific to share with

people that will change lives.

Trevor King: Yeah, I agree. One of the things we've decided to do is to make an "action

movie." You might think, what does that mean? Well, we want to give more

action steps this time around than we did the first time.

Timmy Centner: That's right, that's right. One of the things that's become clear is that when

you showed me the feedback from people that had seen the original documentary series is they wanted more. They wanted more information but not just information, ways to actually put the things that we have in this

series into effect in their lives to actually make changes. I think it's an

important aspect of what we're trying to do.

Timmy Centner:

In addition to, at the end of this series, like many other documentary series, you'll have the ability to get it for yourself. In addition to that, what we've done is we've designed a 21-day health accelerator program that will take the most important pieces from this documentary series and put them into your hands with actionable steps that you can take to make changes to make your life better.

Trevor King:

Absolutely. We're genuinely excited about this. It's something we've never done before, and it's something that will help you take every episode and put it actually into practice, so it's going to be of immense benefit to you. That's what we mean by an "action movie."

Trevor King:

We're going to start with episode one, which is actually all about toxins. Now, that might seem like a strange place to start but, Timmy, explain why we're starting there.

Timmy Centner:

Well, one of the things that we forget is in our modern world there are many, many more toxins than there ever have been before, through manufacturing methods and new technologies, chemicals, and all kinds of other things you're not even aware.

Timmy Centner:

Some estimates, it's interesting, some estimates say that they are up to 80,000 toxins that you encounter on a regular basis in your life. We figured that we would go ahead and frame this entire series with the negative things first to get them out of the way, to show you the things that you're facing as a human being in your health, and then show you the good things, the things and the steps that you can take and the things that you can affect directly in your life.

Timmy Centner:

We're going to start with toxins, because those are the things outside of your control right now, and ways to eliminate them and ways to mitigate the effects of those things in your life. Then we'll go from there, and I think it's a great place to start.

Trevor King:

It's a good starting point. Bear in mind as you watch each episode, what we're really trying to do is lay out for you why you need to make changes in your life and why you need to do these things to move towards a healthier existence. With that being said, Toxins Part I.

Michael Beattie:

This is the Hollow in East Belfast, famously mentioned by Van Morrison in his huge hit song, Brown-Eyed Girl, and these are the pylons he sang about. Somehow he makes them sound romantic, but there's not much romance with pylons. In fact, we now know there are significant health risks associated with high-voltage power lines. A lot of other potential sources of toxins are much less obvious than these.

Michael Beattie:

Whether you realize it or not, your body's waging a daily battle against the toxins all around us, and there are probably a whole lot more than you ever realized or imagined.

Tom Malterre:

The part that I play in this entire picture is to raise awareness as to exactly where the environment is at, and this picture became kind of bleak for me when I was lecturing at an autism conference in Atlanta in 2011. 2011, I was out there, and this gentleman rushes up to me before I'm about to go onstage and lecture and he says, "You have to read this article."

Tom Malterre:

I say, "Well, I will in just a little bit." He says, "No, read this article. It'll change what you talk about." This was an article in the American Academy of Pediatrics, and basically it was a policy statement. The policy statement said, "Look at this. We have something called the Toxic Substance Control Safety Act, and it's not doing a very good job of protecting the health of pregnant women and children."

Tom Malterre:

I started this and I was like, "Oh, this is piquing my interest," and within the first few paragraphs I read something that was fascinating. It said, "We're up to producing 27 trillion lbs of chemicals in the United States every single year." It said, "That equates out to 74 billion lbs of chemicals being imported or produced in the United States every single day. If you break that down, it equates out to the equivalency of 250 lbs per person per day."

Tom Malterre:

You continue through the article and it wows you thinking, "Wait a second, 250 lbs per person per day? What are we talk about here?" Well, you look around this office here, you don't see it, because I have all nontoxic furniture, I have nontoxic flooring, I have nontoxic adhesives in between the tiles in the bathroom. I'm very conscious of what's going on with my influence to myself and my clients.

Tom Malterre:

If you go to a hotel, for example, you will see stain-resistant carpeting that has these chemicals called PFOAs on the carpet. You'll have pesticides on the carpet to keep down fleas and other organisms from growing. You have on the walls themselves, you have dark paints that have something in them called "volatile organic compounds," things like toluene, xylene, benzine. These things are harmful to human cells.

Phillip Day:

The big dangers are just in the banality of those little rituals we do every day, brushing our teeth with sodium fluoride, which is rat poison, washing our hair off in a cheap industrial garage floor cleaner and engine degreaser called sodium lauryl sulfate, spraying aluminium into our lymph nodes, and putting the makeup on ladies, monoethanolamine, diethanolamine, triethanolamine, cocamide DEA, lauramide DEA.

Phillip Day:

When you look at what's being sold off supermarket shelves just in the personal care arena, that's kind of frightening, it really is. People are using these products in the belief that if they bought them out of these stores they're safe, because somebody would've checked them out, right? That's not the case at all.

Dr Ben Johnson:

We want healthy water without chlorine, without fluoride, extremely toxic chemicals. I read in the newspaper here a few years back where there was a reporter at the American Association of Water Treatment Specialists, and they said from the podium, "We know that chlorine causes disease and

cancer." This was at the Water Treatment Specialists of America's annual meeting! This was reported in the AP! It's like, holy smokes, they admitted that? Yes, they did.

Well, I understand that they want to kill bacteria. That's the chlorine. Now, fluoride, why you put that in there is a whole complete mystery, maybe to get rid of these toxic wastes that nobody, that no one ... You read on toothpaste "keep away from children" because if a child swallows that fluoride it's very toxic, especially to the brain. What child doesn't swallow their toothpaste? This is an oxymoron! You just have to shake your head and go, "Really?"

Dr Daryl Gioffre:

Well, I've been a board certified chiropractor for 18 years, and my first few years in practice, I had more of that straight chiropractic approach where a client would come in, I would adjust them, they'd go away feeling great, and then they'd come back a week later feeling just as bad again. I said there's something missing, something's getting in the way. Why aren't these people holding their adjustments? As I started to really uncover why this was happening over and over and over, I realized that there were things happening outside of here that were out of my control. There were people exposed to toxins.

Dr Daryl Gioffre:

When you look at life, we have dietary toxins from the foods that we eat. You have toxins from the environment, whether that's the air, the water that we drink. You have chemical toxins, things like antibiotics. What happens is, as these toxins come into the body, they massively deplete the body. They drain the minerals. I would adjust somebody, their spine would be in perfect alignment but because they were deficient in minerals, their muscles would go into contraction and pull them right out.

Dr Daryl Gioffre:

I started looking into these vitamins and minerals and I said, okay, if we start giving these people the things that they need to make themselves healthier to optimize their health, perhaps maybe they can hold their adjustments in place longer. That's when I discovered raw food, I became a raw food chef, and it was really because of my own addiction to sugar. Being addicted to sugar for so many years, I realized that I had to change my approach as far as the foods that I was eating.

Dr Daryl Gioffre:

A lot of the foods I was eating, I just didn't like the taste. When I look back, that sugar changed your taste buds. My taste buds were so acidic they were used to these sugar laden foods, but the cool thing about your taste buds is that they can switch within two weeks. They have the ability to actually alkalize and change the way that food tastes. As I started to add more of these healthy foods, things like raw soups, raw juices, smoothies, healthy fats, more salads, things like that, I actually started to expand my flavor profile and things started to taste better.

Dr Daryl Gioffre:

Basically, I just took that approach with my clients, and things that made me healthier I want to do for them, so I became my own test subject and things that I was doing in my own personal life I just started to recommend to them.

Tom Malterre:

If you look at the vast array of research that's coming out every single day, you'll see that the human cell will malfunction in the presence of these chemicals at extremely small doses. In fact, one of the first things that goes when you're exposed to chemicals is something called your mitochondria, your cellular powerhouse, the thing that produces energy in every single cell of your body that allows you to think and allows you to feel and allows you to actually move your muscles, to digest your food, to create neurotransmitters of happiness, right?

Tom Malterre:

All these things rely on energy, and yet these chemicals interfere with that mitochondria and they do this by producing something called free radicals, which you know. In fact, if you look closely in the literature, you'll see extremely tight correlations between aging and antioxidant function. Some people are looking at the master antioxidant called glutathione, and they'll see as people's glutathione levels go up their cellular function goes up and their longevity goes up.

Tom Malterre:

Well, what we're doing by producing lots of fossil fuels through coal, petroleum, gasoline things, and by not being conscious of our pesticide use in industrial agriculture, we're actually creating an environment where we age tremendously faster than we did just a few decades ago.

Phillip Day:

The chemical industry is largely self-regulating, really, out of necessity, because government does not have enough hours in the day to stick a beak into every nook and cranny of our life, and they certainly cannot regulate the somewhere approaching 80,000 to 130,000 chemicals that have come into our society over the last 130 years. Nobody has any clue how big the problem is, it's just a big problem, and government can't regulate it because they would have to test each of these chemicals for 15 years to find the effect on the reproductive system, the blood work, the respiratory system.

Phillip Day:

They can't do it, so they go back to the chemical industry and they say, "You're on the hook if a bad one gets through," and guess what? They get through all the time. The company concerned is fined a few million. It's chump change to them, it's coffee change to them. These corporations are making billions.

Gina Bria:

I want to help people understand that we live a totally artificial life. The environment, the ecosystems that we live in now, do not support us biologically. We live indoors all the time. We go from our homes, which are air-conditioned or artificially lighted, those light waves are not the kind that hydrate us. We go from those artificial indoor environments where we eat poor food that's not stocked with high nutrition or dense nutrition to our cars, which are an indoor environment which has a dehydrating effect on us, to our offices and cubicles with fluorescent lighting where we are saturated with electronic devices around us.

Gina Bria:

Those electronic devices are having a percentage hit, a high percentage hit, on our hydration, another big, important part of this story. We actually need more hydration now in the last five years of the rise of so many cellphones and so much electrical equipment than we did ever before, so hydration has

become a new kind of urgency because of the ecologies of the environments we're living in.

Tom Malterre:

We have these programs I teach online, and this nurse practitioner who is learning this training, she challenged me and she said, "Causation is one thing, and then correlation is another. You're telling us that air pollution is correlated with all this disease, but they don't necessarily cause the disease." I said, "Here's what I want you to do. I want you to look at the research associating air pollution and heart disease, and then I want you to look at the research associating cholesterol and heart disease."

Tom Malterre:

She just called me today, that was Tuesday night, she just called me a few days later and she said, "You're right. I looked at it and I looked at particulate matter 2.5, I looked at benzo(a)pyrene, I looked at all the different chemicals in air pollution." When you look at certain chemicals in air pollution, the rate of heart disease with air pollution is much higher than cholesterol, and yet the entire globe is out here saying, "Let's look at statin medications and lower cholesterol."

Michael Beattie:

So many of the benefits we enjoy and take for granted these days come at a price. Technology gives, but it can also take away. Until we started making this series, I, for one, had never given much thought to electromagnetic pollution, to the potential dangers of sitting in front of a computer screen for hours at a time, the WiFi reader, the lights around me, and one of the greatest offenders of all, the mobile phone.

Robert Scott Bell:

Something that's inescapable in our Western world, and this is the 3G to 4G, now 5G, discordant energies, not ionizing radiation but significant nonetheless because of the energies and how discordant they appear to be relative to the way we have an energetic or vibrational frequency. We've measured it in terms of, how does it impact cells, if you hold a cellphone up or if you're in a high EMF disrupted area, that there's inflammation that's present. There's heat detections that you can do through thermography.

We know that there is something physical and independent and objective to measure, but there are obviously subjective scenarios where people come into contact with neutralizing energies and they experience things not even having been told these things.

Michael Beattie:

EMF, it seems to be an area that people are beginning to be concerned about. What would you say are the inherent dangers or what would you be concerned about in terms of frequencies?

Rob Verkerk:

I think we're beginning to see, as we move to an increasingly wireless world, a very similar scenario that we have seen with environmental chemicals. When it comes to RF, radio frequency exposures, microwave exposures, from wireless systems, obviously there have been limited studies that had to be done so that mobile technology could go live, we've obviously been working closely with the key scientists, particularly the Swedish scientists that have been at the forefront of this work.

Rob Verkerk:

The pattern, again, is quite similar, that the people who are doing the predominant work back in the '90s and early 2000s, once they showed that there were problems particularly from non-thermal effects, the non-heating effects, they lost their funding. They had all the funding withdrawn, and so it's become harder and harder to research this.

Jon Landsman:

The telecommunications industry would have people believe that if you put a cellphone next to the head and it doesn't really raise the body temperature more than a degree, everything is fine, but the bio-initiative report which was really put together by a lot of great very intelligent scientists and doctors who look at this kind of stuff and really study it, a tremendous amount of research was done, shows that there's DNA damage.

Jon Landsman:

This frequency vibration, this microwave radiation which we're all being bathed in, is actually affecting us on a cellular level. It's actually creating these stress proteins that get pushed out by our cells. Now, one cellphone call, that's not what we're talking about is a big deal, but on a constant basis this kind of vibrational frequency that's hitting our body is affecting us in so many ways, with cell damage but also causing free radical damage. Over time, this is what's breaking down our blood, our lymphatics, and even our organ function.

Veronique D.:

If you look at all the electro-pollution in our environment, 100-150 years ago that didn't exist. We now know with the WiFi, the cell towers, all our cellphones, we're being exposed to non-ionizing radiation every day of our life.

Veronique D.:

Ninth graders in Sweden did a very simple experiment. They took some sprouting seeds and put a group of seeds in a room with WiFi, took the same kind of seeds, put them in another room not exposed to any WiFi. After 12 days, the seeds that were in the room with the WiFi did not sprout compared to the others. What does that tell you? If ninth graders can figure that out, it's a no-brainer.

Robert Scott Bell:

Now, the question is how much is it impacting us negatively? I think the answer to that is everybody is going to be different. People are sensitive, some are hypersensitive, some are seemingly insensitive to it all, and so because of that they say, "Well, it's not real. Well, everybody's an individual."

Jon Landsman:

The younger generation, the millennials, the X generation, even, for that matter, they're using cellphones for alarm clocks. They're keeping it by their bed. They're keeping these phones on all the time, and we can certainly talk about the ways to minimize our exposure. There's no way to avoid this kind of danger. But there are a lot of ways that we can minimize the risk, plus, of course, all the other things that people are familiar with, eating a healthy diet, living a healthy lifestyle.

Veronique D.:

For those of you who may be a little bit skeptical, there's a great website called bioinitiative report.org, and it's a study that was a 10-year study done by 29 independent scientists from all over the world that looked at the data, and conclusively DNA repair was compromised. It caused DNA damage, lowered the immune system, stimulated several cancers, affected childhood leukemia, and the list goes on, reproductive disorders.

Phillip Day:

You shouldn't be living within 300 yards of a 400-kilovolt pylon line. I've been into inter-areas around the world where towns are living under these substantial electromagnetic fields, and they have leukemia and lymphoma and problems like that.

Phillip Day:

The human body is essentially an electromagnetic machine, an incredible device, and we live on a battery. It's interesting, isn't it, that you've got the cathode, the negative, which is the earth that we're on, and then the positive is the sky, which is why you have those big bolts of lightning coming down. The key here is that we can disrupt those fields very straightforwardly simply by mobile phones, through phone towers.

Veronique D.:

Women especially are very sensitive to electro-pollution because it affects our melatonin production, and melatonin is a cytotoxic hormone that kills breast cancer cells. The lower your melatonin, the higher your risk for breast cancer.

Michael Beattie:

Some people are convinced this new device is one of the answers to EMF pollution.

Paul Barattiero:

We all rely on WiFi, cellular transmissions, satellite, electrics, all these things. We all want our gadgets. We want to be able to communicate. We want to be able to ask Google what it is that we don't know about anything and have it there on our fingertips in two seconds, right? We all live and rely on these technologies, whether it's a blender or it's a bed that moves up and down. All of these things produce EMFs. Whether we're talking about cellular or WiFi or electricity, this is a part of our life.

Paul Barattiero:

My perspective is this. I'm not interested in combating or stopping that, because then we'd be going back to 3" x 5" index cards, no computers, no things. What I want to do or what I think is important is to protect people from the effects of the radiation that occurs from the EMFs, from the cellular, from the WiFi, from all of the towers that are surrounding us. Whether we realize it or not, we are all in it 24/7.

Paul Barattiero:

We could put tinfoil around our house, we can do all these things, but you're not ever going to be away from it because it's everywhere. The next neighbor has their WiFi and their router, and everywhere you go hotels, it doesn't matter, you're going to be surrounded by radio waves of some kind. The perspective that I have is protect us from the damaging effects of it while keeping the benefits of the technology.

Robert Scott Bell:

When we look at technologies, the key QI technology out of Germany was fascinating to me because it's a water-based technology setting up a field of electrons that would flood your environment. In this case, we have this beautiful little Qi-Home technology right here. In it, it creates a circuitous flow through the water, but it's a passive system. Charged up initially and

maybe 10 years later you'll get it recharged, but it doesn't require being plugged in, which is another nice thing, having that. No matter what happens, you have the ability to use it.

Robert Scott Bell:

When you set it in your home, then what happens is it starts producing an electron field much like a big doughnut shape all the way up down and around and for many feet in every direction. The size of this is like a traditional standard home. When I brought it home, my wife immediately said something feels different, something feels different. Didn't know what it was, but over the course of the next days to weeks she was sustaining energy that she hadn't in six prior years of dealing with the medical issues she had with the cavitation and the devastation, the pain and everything, she suffered from.

Robert Scott Bell:

She had a very short limit on what she could function in a day and then she would have to retreat totally. She was extending that every day, to the point where we would be going out and I'm looking at her and I can't believe she's still functioning and she's looking at me, "We're out and I'm okay." The only thing we had changed at that point was having this at home, so protecting yourself in a home setting is significant in that it reduces the burden so that you're more resilient when you go out into the world because there's no escape totally from it at this point.

Michael Beattie:

It looks beautiful. What's in there? How does it actually work?

Robert Scott Bell:

Well, there's technology out of Germany that they did, but I'm most fascinated because they have the specially formed water vials that are always surrounding this. When it's up on its side, it's inactive. When you set it down as you see here, it becomes active and then the field is generated in that regard. There's technology that is likely proprietary, but I've seen what it is and it's brilliant in its simplicity and the fact that it doesn't require an ongoing source of electricity.

Robert Scott Bell:

I don't know how to describe it in more depth than that except that we know what it produces and that is measurable, these fields of electrons that will then settle on you, your pets, your kids, so that the EM field disruption, whether it be cellphone, whether it be cell tower, whether it be WiFi, when those signals hit you they would normally penetrate and that's where the damage and inflammation and heat might be assessed. Whereas in this case, it would interfere or interact with the electrons that have now settled on you because of the production that happens passively in this Qi-Home technology.

Michael Beattie:

That's a kind of home device. What about bigger spaces or smaller spaces?

Robert Scott Bell:

Yeah, there's a larger, for some people living in big American homes, "big" is not even but "bigger," and so there's a larger unit that's about 45 lbs that you, again, set somewhere in the center of your house.

Paul Barattiero:

I became acquainted and found a technology that is made in Germany. Actually, a dear friend of mine now developed this. The reason he did is because he was out living alone up north of Germany where there was no cellular, was no WiFi, was no radiation of any kind, and he lived there for a few months. It was when he came back into society where there are all these things that he started noticing, "Whoa, why am I feeling this? Why I feeling that? What's going on with this, and how can I protect myself and help myself?"

Paul Barattiero:

He did research about this, and what he learned was that these radiation, these waves, will go inside of the body and react with our cells, which creates heat, and some people are more affected by the heating up of our cells inside the body than other people are. What he did was create a system that releases electrons into the air in an environment, whether it's a personal environment or entire house or a business, that when those electrons, just like if you went to the ocean or the forest and you have electrons that get onto your skin and you feel amazing, this device that he developed releases electrons into the environment that gets on your skin. The radiation, then, reacts on the surface of the skin instead of going inside the body.

Michael Beattie:

I don't understand physics, I don't know chemistry. Can you explain the technology to me? Can you explain how it works in a very simple way?

Hagen Thiers:

Okay, let's give it a shot. You see radiation is always locked on the first point of view on heat. That's the thing. When you use a cellphone, there is a user manual, you have the SER word, and it's saying the specific absorption rate, which is meaning the temperature which is produced in your tissue, in your brain, for instance, when you're using a cellphone to call. This is the first option where you're looking into what are the effects of EMFs.

Hagen Thiers:

The second part is the electrons, which are pushed out of the cells. This is called the ionizing effects or the DNA damaging effects, also. If the radiation with magnetics fields and so on is so strong that it pushes electrons outside of their cells and out of their environments, then there is big damage occurring. The radiations which we have now surrounding ourselves, high frequency EMFs like mobile phone signal and WiFi and things like that, they have many, many protons, so positive charged particles, and not meaning "positive" in a positive way but just positively charged in an electric point of view, which is confusing sometimes so that's why I just want to clear it out.

Hagen Thiers:

We have the electrons in our bodies, which are the good guys, and we have the protons in the EMFs, which are basically the bad guys, which are the villains. They push this out of our cells, and they produce damage. They produce free radicals and they produce stress inside the cells, and these electrons which go lost, they also are needed to produce our life energy, our ATP.

Hagen Thiers:

What we were looking into in the first place is building up a technology which is not based on a frequency or a frequency changing or a blocking of frequencies or lowering the EMFs in the first place but to look on the damage which is happening inside of the body, what is produced in the body as a result, and try to prevent this from happening.

Hagen Thiers: This is what we do. We take electrons, the things which the body is missing

and needing, and the good things, and resupply this with our devices emitting electrons, negative charged particles, and negative and positive are always attracting each other. We know this from basic physics, we learn this

in fifth and sixth grade in school.

Michael Beattie: I remember that bit.

Hagen Thiers: That's great. This is all we need to understand the technology, and we try to

keep it simple. We have the protons, positive charged particles in the EMFs and they usually interfere with our electrons and taking up our electrons which we need in our bodies, producing free radicals, producing oxidative stress, producing cell damage, DNA damage and things like that. We are just not letting the EMFs only work against our own electrons inside our body, but we are giving out into the environment of a home electrons in a really

high density.

Hagen Thiers: That's why the EMF's already interfering with the electrons which come

from the devices and interfere in the room and before you encounter as the object where it's taking it away. It's basically a little bit like a filter which you can imagine being built up in your room, which is just helping you for not

being the object which you're exposed to.

Paul Barattiero: I brought it into my home and took it into our bedroom, and my wife said

immediately, "What is that in your hand?" I said, "This is that Qi device that we talked about." "What is it?" I'm like, "Why are you asking?" She said, "I don't know, but I feel stuff in the air. It's like a sizzling. I can feel it, as soon

as you walked past me in the room."

Paul Barattiero: I was like, wow, this is who I'm married to, very sensitive, very sensitive. For

me, I've spent my life creating ways to help people that are more sensitive or affected by things than I am, because I didn't feel sizzling in the air. I didn't feel anything. I'm carrying a 45 lb thing, that's all I knew. I'm carrying a

heavy thing and bringing it in.

Paul Barattiero: I've had many people say, "Oh, my gosh, this has changed my life. Thank

you." I'm grateful that we can do that, and I'm grateful that we understand the why. For those that are not affected, it's not going to harm us. For those that it helps, it tremendously blesses their life. That's what I would say is instead of bashing something or instead of talking negatively about something that clearly will help other people, it doesn't harm the people that aren't being affected negatively, let's enjoy it. No different than going

into the forest and everyone says, "I feel great."

Michael Beattie: This is spelled Q-I?

Paul Barattiero: Yeah, Q-I.

Michael Beattie: It's pronounced "ki" or "chi"?

Paul Barattiero: "Ki" or "chi," yeah.

Michael Beattie: Depending on your part of the world?

Paul Barattiero: Right.

Michael Beattie: What's it made of? How does it work? What does it do?

Paul Barattiero: It's a very interesting technology. Gerald Pollack, who is an amazing,

amazing man, discovered, didn't create, but discovered a water, a type of water, called the fourth phase. This gentleman in Germany figured a way to make vials, small vials of water that are assembled in a naturally beautiful Swiss pine assembly, and this water creates an effect when it's all connected into this unit that's round. These vials of water, combined with a metal ring around it, create a natural electrolysis very similar to what we do in our

water machine.

Paul Barattiero: It creates a natural electrolysis and what we call a torus field. It creates a

torus field that goes 65 feet out in each direction, 25 feet up, 25 feet down, 65 feet out from either direction of it, and it creates this amazing torus field of electrons. That's what fills the environment within 24 hours of putting it. It's a nonelectric system. It uses this water that naturally will create

electrons into the environment, and it comes off in this copper ring, and you

can feel it when you come up to it.

Paul Barattiero: You can feel what's coming off, but you don't plug it in. There's no electricity

used. It's a very natural, beautiful thing, and it'll last 10 years without doing anything to it, and then you would need to increase the water because you'll lose about 30% of the water inside from using it for 10 years. It's an amazing

technology.

Michael Beattie: Tell me about the different devices that you have.

Hagen Thiers: We have our standard device, which is the Qi-Home or the Qi-Home cell,

which is now the latest device, which you just build up in your home. It's made to sooth a house or a flat. You build it up, and all the people which are in a distance of 7.5 meters of a ratio, so in all directions 7.5 meters and 5.0 meters high and low. This is an environment device. You build it up, and it

exposes electrons in the environment offering protection in this way.

Hagen Thiers: Then we have a mobile device which you can take with you for work, for

travel, on airplanes and cars and so on, and you feel you have an EMF protection in a mobile way. Then we also have the biggest units for companies, for offices, for call centers especially. We have quite some clients and technician offices which want to offer their solutions. This is basically our three brands. We have devices for industry, we have devices

for home, and we have mobile devices.

Hagen Thiers: Nowadays we have our latest device is the Qi-Shield, which is our latest

device now published in 2019. This is a device which is mobile use, but it's also very, very well equipped for using in stationary. This is a small device just like this. You can put a picture maybe inside the video, and you can just

put this on your shelf, on your bedside, and your whole room is EMF

protected. This is especially when you have a low budget. This is a good solution because you can just take this with you later on in the car when you go to work and you put it on your desk in your office and you have your office covered for EMF protection.

Hagen Thiers:

This is a mobile device which you can use stationary and mobile, and this is already equipped, also, for the now coming up 5G. This is now a very nice thing and this is now especially if you're into small budget and looking for a protection just for if you're a single person or living with your partner together and having just not-so-big space. This is a good device to look at.

Hagen Thiers:

Another device, basically usually the people start with a Qi-Home cell for the family and it doesn't usually matter if you have four or five people living inside the house. Usually the size of the Qi-Home is sufficient for a normal house and this is already the best thing you can do to start because you have the most benefits, because you are staying the longest time in your home.

Hagen Thiers:

Then we he have right now the University of Oxford making measurements inside the water showing the differences in the water when being exposed to Qi. There you see a tremendous difference in the spectra of the water, which is already being done, also, by the court which is proven and now Oxford is redoing it as a more renowned institute, of course, but it's a fascinating, really, field. For instance, we find solutions also in areas where we never expected them to be.

Hagen Thiers:

For instance, in water, redox potential is changing, surface tension is changing, and electrons which are in the water are changing. Also, we had a sales agent, salesman, coming to us being on a training, and he was coming to me after a seminar and telling, "Hey, I think you have a tremendous market ahead of you in the concrete business." I was like, "What? Wow, really? Why? How come?" He said, "Well, because of the changes you see in the water, there must be a change in concrete production. I have big contacts there. Would it be okay, me trying it and doing studies on it?" I said, "Sure."

Hagen Thiers:

What they found out is they just put a device near the concrete production, and they take a block like this of concrete and they put pressure to it to see how much pressure they can hold. When just being added, our device, into the concrete production, the same concrete, the same water, the same concrete, is two times stronger when being exposed to the Qi's, just of difference in surface tension and in redox potential and of how the concrete is apparently changing and things like that.

Hagen Thiers:

We have also governments which are now buying our devices. For instance, for water supplies, the public water supplies, for water towers and so on, and they give us the studies and show, "Hey, we have been putting in your device and we have seen that the bacteria growth is decreasing and that we have changes in the water, in huge amounts of water."

Hagen Thiers:

This is also all these kinds of case studies and there is so many of them in regards of food production, in regard of technical production like concrete and all this kind of work, and also now the public supplies of water, which got us in the first place to work with those renowned institutes. Because when you give them a black box and it doesn't have electricity and they tell you, "How is this supposed to work? Is this some guru-guru?" No, it's some deep science, actually, behind it, and there's really a lot of stuff backing it up which is actually just now getting us the access to those renowned institutes to test it and to get some proper testing done.

Hagen Thiers:

This is a really interesting time now, and we are constantly working on new studies like now with Oxford, with the TOV in Germany, which is like the most renowned technical institute for EMF measurements, also as well as in other areas which have like in 66 countries they have institutes measuring and so on. We are working always on getting more proof work, but it's still always a headache for people to understand how the devices work and I think that's why it's so important to the study work so that the people feel confident to use the devices.

Rob Verkerk:

Actually, one of the greatest single exposures can be a decked phone, a cordless phone, so, obviously, get rid of decked phones at home. If you need to have a home phone, just put a corded phone in. Secondly would be your mobile phones. Because of the relationship between distance and the non-thermal effects, really do not put a mobile phone against your head.

Rob Verkerk:

The younger an individual is, the greater the risk. This issue that has evolved recently in society that all children believe it's their right to have a mobile phone, generally speaking, they're given a mobile phone by their parents without having the risks explained. The thinner the skull is, the greater the risk of thermal and non-thermal effects.

Ty Bollinger:

There's a lot of different devices out there that have different ways that can either minimize that radiation or mask it, so I'm a big believer in that technology. We have a couple of devices that we use here in our house that make your body not affected by the radiation. There's a lot of good research that's out there on this.

Michael Beattie:

What do we actually do? Do we turn off the WiFi at every opportunity? Do we box it in? How do we protect ourselves?

Veronique D.:

Well, the good news is that there is patented technology that has been shown, it's a noise field technology that helps to minimize the effect of the EMFs, so you can put a guard on your cellphone, you can put guards on your computers. You can plug in a harmonizer in your home to protect from all the electrical wiring, you can wear specific pendants that help to protect your biofield, and you can do simple things. Don't wear your cellphone on your body.

Veronique D.:

Women who use their bras as cellphone carrier, for example, many of them have developed cancers in the breast as a result of that constant radiation. Same thing for men, don't put your cellphone in your pocket over your heart

because that can cause some issues. Turn off your WiFi at night, you don't need it. It's one less thing. When you go to bed at night, remove all your electronics. No TVs, no computers, no cellphones by your bed because that will affect your sleep patterns.

Rob Verkerk:

You can use the phone on speaker phone. It's quite interesting if you look at the small print under "legal" on an iPhone, you'll actually see that it suggests that you don't put the phone within five millimeters of the body, and yet everyone has them plastered against their head.

Rob Verkerk:

You can use it on speaker phone. You can also get an air pod attachment so you're actually communicating from a speaker unit through a tube to your ears so that you minimize exposure in that sense. You should try and, when you're sitting near a phone, to have it some distance away from you so it's at least more than one meter away from you.

Jon Landsman:

In terms of other wireless devices, this is huge because it's something that I'm very conscious of every day. I wire my mouse for my computer. I wire my keyboard. I wire my computer. I find that that's a better connection for all my work, more secure. But it also minimizes the EMF pollution.

Rob Verkerk:

Another major issue is, of course, wireless routers in the home. The way in which technology has moved along is very few people manage to do without them. The question is, do you need to leave them on all the time, and, particularly, do you need to leave them on during the night?

Rob Verkerk:

In our household, we use it, we turn it on when we are using it, but we always have it off at night. Again, where you position that router is also key. You don't want to have it close to the kids' bedrooms. You probably don't want to have anyone sleeping in metal beds because they can act as amplifiers for the radiation.

Michael Beattie:

Straddling Europe and Asia across the Bosporus Strait, the historic city of Istanbul, I've come here to meet a biochemist, a specialist in what she calls "preventive and customizable medicine." Eshigal Coloru is a medical doctor who also has a PhD in biomedical engineering. From an early age, Eshigal was fascinated with biology and chemistry, and her passion to understand what happens at the cellular level has never diminished.

Dr Aysegul Coruhlu:

I'm fascinated by what happens at a cellular level at the subatomic processes inside the body. For me, it all boils down to one thing, energy. The more I learn, the more I realize the key is electrons and protons, the difference between being sick or well, alive or dead, is our electron level. The more electrons you have, the more you have life, the more you can live. If there's a loss of electrons, it accelerates the aging process, the degeneration. It's exciting for me to discover that the balance between the pluses and minuses can lead to so many different things.

Dr Aysegul Coruhlu:

Let me begin like this. Maybe the biggest mistake done by humanity is the discovery of shoes, especially the plastic ones. Maybe it's cutting our connection with the earth. Why is it so important not to wear shoes?

Because the world is like a battery, and shoes are cutting our connection with the earth. The surface of the earth is filled with fields of negative ions. On the plus side, you have thunder and lightning. You can see the interaction between them.

Dr Aysegul Coruhlu:

What we are looking for and it's something really good, is to walk barefoot on the earth and absorb negative ions. Just 20 minutes of walking barefoot on a wet, sandy beach or on soil makes a difference. We actually absorb through our feet the negative charge. Why do we feel good walking on the beach or by a waterfall or in a forest? Because that's where we find the highest level of electrons, so all the people who say this kind of place is their happy place, that's because they're receiving electrons. This is healing. It helps the whole body.

Dr Aysegul Coruhlu:

Why do we sleep, eat, drink water? Because the sensation of feeling well comes from getting the electrons from nature to neutralize the pluses, the protons in our bodies.

Michael Beattie:

If you believe the Johnny Cash song, Ireland has 40 shades of green. What we don't have are genetically modified crops, but, of course, like almost everywhere else we're buying lots of imported foodstuffs with GM ingredients. Some scientists maintain there's no evidence that GM foods can harm us. Do you believe them?

Jeffrey Smith:

When I made the film Genetic Roulette, it was my third film, but it was the first feature-length. As I was touring with it, I had the idea to start asking audiences, "How many people noticed an improvement in their health when they switched to non-GMO food?" A tremendous number were raising their hand at this point and I'd say, "Okay, what did you notice? What kind of improvements?"

Jeffrey Smith:

The number one condition was always gastrointestinal, the number two was always increased energy and reduced brain fog. Number three or so was reduced weight gain and then there was headaches, anxiety, skin conditions, allergies, asthma, autoimmune disease, a whole host of things. In fact, there were like three dozen different ones that I came across, but some so reliable in every single lecture it became predictable. I even sent out a survey and got 3,600 people who said that they improved from switching to a non-GMO diet, and it was the same order that I had seen in 150 lectures.

Jeffrey Smith:

It turns out that these same problems are also reported as improving in livestock when the livestock are switched to non-GMO feed, in pets, and they're the same problems that are experienced in lab animals when they're force-fed GMOs. If you look at the incidence of these types of diseases in the United States, they're rising in parallel with the increased use of GMOs and the Roundup herbicide which is sprayed on most of the GMOs. If you look at the GMO and the Roundup herbicide, and the other aspects of genetically engineered foods, it demonstrates a mechanics, a viable reason why these specific diseases and disorders including cancer, including autism, including diabetes, are related to consumption of these dangerous foods.

Michael Beattie:

If the research is there, if the knowledge is there, why are these things allowed?

Jeffrey Smith:

There is a tremendous disinformation campaign related to GMOs, and there's a lot of fraud associated with its representation. One of the classic examples was the Food and Drug Administration in the United States. Their policy officially says there's no, they couldn't find any real difference between GMOs and non-GMOs, therefore companies like Monsanto that had falsely told us that Agent Orange, PCBs, and DDT were safe can determine on their own if their GMOs are safe and put it on the market without telling the FDA or consumers.

Jeffrey Smith:

Well, if you look carefully, that policy was overseen by Michael Taylor, Monsanto's former attorney. They created a position for him after the White House told the FDA, "Promote GMOs." After he created that policy, he then became Monsanto's vice president and then he went back to the FDA as the U.S. food czar in the Obama administration.

Jeffrey Smith:

Seven years after the policy was created because of a lawsuit, we became aware of the actual documents in the FDA's possession from their own scientists. In reading them, they found that the overwhelming consensus among the scientists working at the FDA was exactly the opposite as that projected in the policy. They said actually GMOs are not the same, they're different and they're dangerous and they need to be tested. The entire promotion and approval of GMOs in the United States was based on fraud and political collusion.

Phillip Day:

I think more unsettling is the fact that the personal care and food system across the world is essentially now being monopolized by about, I would say about a dozen companies. The whole thing is locked down tight and, again, we see farmers that have an honest heart. We've got farmers around this area who want to grow organic but they're meeting obstructions at every turn. The public wants organic, the public has heard bad things about pesticides, herbicides. Nobody wants genetically modified foods, and yet all of these agendas are being pushed upon them when they're trying to sort of squiggle out from underneath and get real food instead of fake food.

Phillip Day:

We've looked at fake £5 notes and fake news. Well, go into a supermarket, what are you looking at? You're looking at row upon row of shelves packed solid with highly processed fake food palmed off on the public as foodstuffs and it's not. Our world has changed immeasurably over the last 130 years but our biochemistry has not, and our bodies still need the same old food, the real food, they always did. That's becoming a rarefied item now.

Jeffrey Smith:

If you find that there's an independent scientist who discovers problems with GMOs and it happens regularly, there is an echo chamber of people in high places who are friendly with the biotech industry, sometimes on their payroll, who repeat the same talking points trying to discredit the research and the researcher. This has suppressed the enthusiasm of researchers to even do research in this field, and it has also suppressed coverage on the research that has been done.

Michael Beattie:

Where does this leave the poor member of the public who wants to avoid these things, who wants to try to eat healthily? I presume you steer people towards an organic-based diet.

Jeffrey Smith:

We strongly recommend an organic diet, and if you can't get fully organic at least get non-GMO. In our analysis of GMOs, most GMOs are engineered to be sprayed with herbicide, Roundup herbicide in particular. Roundup ready soybeans, Roundup ready corn, cotton, canola, sugar beets, and alfalfa, they're the six major GMOs, all designed to be sprayed with Monsanto's Roundup. Now, the Roundup gets absorbed into the crop and we eat the Roundup and that's very dangerous.

Jeffrey Smith:

Now, Roundup is not only sprayed on the Roundup ready crops, but it's also used as a ripening agent on grains and legumes and some fruits and vegetables. Wheat, barley, rye, rice, sweet potatoes, potatoes, lentils, sugar, sunflowers, kiwis, they're sprayed with Roundup before harvest and it dries down the product, and then it ends up in that product, too. We had to become an expert in Roundup when we were dealing with GMOs and went, oh, my God, Roundup is now throughout the food supply. It's not good enough just to be non-GMO, it's also necessary to be organic.

Jeffrey Smith:

My next film, Secret Ingredients, it's about families that switch to organic and autism diagnoses go away, infertility is cleared up, cancer is handled, skin conditions, a whole host of conditions are handled in the protagonist in the film, in the actual families. Then we have doctors saying, "This is what happens typically in our practices when we've prescribed organic diets," and then we have the scientists explaining why.

Michael Beattie:

If someone Googles your name, they're going to get probably a lot more negatives about you, some of it very vicious than they will get positives. How do you feel about that?

Ty Bollinger:

I feel like we're hitting the target. To me, that's a badge of honor. Now, my wife doesn't feel quite so friendly towards that. It really offends her and it really bothers her, a lot of the hit pieces that are out there about me. You can find out that I'm a quack that kills cancer patients all the way down to, I've read articles that I'm a Jesuit that's under cover trying to kill people for the Vatican. It's just insane some of the stuff that's out there.

Ty Bollinger:

To me, it's a badge of honor because I know that we're over the mark, we're hitting the target, and we're making a dent in the money trail of this pharmaceutical industry.

Michael Beattie:

Does that not in any way make you feel if it goes just a step further, at risk that there is danger here in doing what you're doing?

Ty Bollinger:

Oh, there's definitely danger, but I'm not afraid about it. I don't even lose a minute of sleep over it. I firmly believe that we're doing God's work, that we're in the Lord's hands and that He's got a hedge of protection around us, and we're no more at risk than anybody else because we're doing His work. As soon as our work's done, then we go home.

Ty Bollinger:

It's not something that I lose any sleep over or even dwell on, because I really do believe that we're being supernaturally protected. That doesn't mean that some of the doctors that have been taken out weren't good people or weren't believers or protected, but maybe their work was done at that point, because this is all part of a bigger plan.

Michael Beattie:

If you see it as a spiritual battle, where does big pharma, where do Monsanto fit into that picture in terms of a spiritual battle?

Ty Bollinger:

Yeah, they're the devil. I laugh about it, but they are the, whatever you want to call it, the dark side of the spiritual battle. There's light and there's darkness, and we're trying to spread the truth, spread the light to people. Then on the flip side of the coin, the opposite side, the enemy is trying to spread darkness to keep people in the dark, to keep people ignorant so that they will keep buying their lies and keep buying their drugs.

Michael Beattie:

Well, here I am asking people about living happy, healthy, long lives, and it's a pretty depressing picture because you have the GMOs, you have the news I'm constantly hearing about obesity, about childhood obesity, about poor nutrition in the food there is. Would you have any hope that people can live longer, maybe 100 and beyond, with the technology and awareness and the knowledge we now have?

Jeffrey Smith:

It's interesting that when you look at both the animal feeding studies and the anecdotal evidence, you find longevity increasing on an organic diet or non-GMO diet.

Jeffrey Smith:

When they did a study of rats in France under Séralini's team, they found that when the animals were fed either Roundup or Roundup ready corn, or the combination of the two, the rats died earlier compared to controls. They also had massive tumors and organ damage and changed hormonal balance. When you talk to veterinarians, and I've spoken to several, they say when they switch animal feed for cats and dogs to organic or non-GMO, then the animals not only improve in terms of the intractable diarrhea, itching, allergies, and other problems, they tend to live longer. Some veterinarians say quite a bit longer, even double in many cases compared to the average. You could see the reduction in longevity over the years according to these doctors corresponding to the introduction of GMOs and some of these chemicals in the food.

Jeffrey Smith:

GMOs have not been around long enough to be able to judge longevity in terms of humans, but it makes sense because if you look at Roundup's mode of action, Roundup is a chelator. The actual active ingredient, glyphosate, is patented as a chelator, binding with important minerals making them unavailable for functions in the body to take place. One of those functions is the shikimate pathway used by gut bacteria to produce the building blocks of serotonin, melatonin, and dopamine. Without that, you may have trouble with blood sugar regulation, Parkinson's, sleep disorders, anxiety, depression, the ability to stop eating when you're full, etc.

Jeffrey Smith:

You also have the blocking of another pathway that normally detoxes through the liver or produces vitamin D or metabolizes pharmaceuticals. You have the fact that glyphosate is an antibiotic, killing the beneficial gut bacteria causing an overgrowth of the negative gut bacteria which in linked to all sorts of diseases including leaky gut. You have, also, that it's a mitochondrial toxin, so it can suppress the energy in the body leading to brain fog and fatigue. It's also an endocrine disruptor in the full formulation of Roundup, which can affect all our hormones, which can affect the organs, etc, etc, and I'm just getting started.

Jeffrey Smith:

We have a situation where virtually the entire system of the body from the endocrine system, the immune system, the digestive system, is compromised in the presence of glyphosate-based herbicides. That's probably why when you look at all these diseases, over 30 of them, they rise in parallel with the increased use of Roundup sprayed on GMO soy and corn, so we think that it's not a coincidence if these graphs which are correlations, not causation, we think it's in fact due to the modes of action of GMOs and Roundup.

Leanne Ely:

I think organic is important. The pesticides that are out there, half of them or more than half of them aren't even tested to see how do these pesticides work with children specifically. Children are growing at a rate that should be frightening to these pesticide makers because, honestly, it's not a stagnant thing. They're growing, the pesticides are in them, and there's no testing to say how safe they are. That kind of thing just really ruins me. I can't tell you how I think it's just wrong and upsetting.

Leanne Ely:

The other thing is, in our country we make pesticides and sell them. They're outlawed here, but we still make DDT but we sell it abroad. That's sad and wrong.

Tom Malterre:

We have a 0.77% increase of population every year on this globe, but we have a 3.0% increased use of chemicals. Between the years 2000 and 2024 if you do the math, you'll see we'll have doubled the use of our chemicals.

Tom Malterre:

Now, personally, I think 250 lbs per person is excessive, and I think we should be conscious of that. This should be, I think, on the tip of everybody's consciousness right here, right now. What are we doing for the environment? Because what we're doing for the environment we're doing to the human.

Michael Beattie:

If there are hidden toxic dangers all around us, there are also hidden toxins inside us. Mercury is one of the most deadly substances known to man, but for years it was used by dentists in amalgam fillings. Dr. Tom Levy is passionate to get across his message that our mouths can be the source of major chronic illness.

Tom Levy:

The main source of toxins that starts, provokes, and propagates most chronic degenerative disease is, and by "most" I mean 90% of the time, are focal infections in the oral cavity, infected tonsils, infected teeth, either in the form of root canals, chronically infected gums, infected lymphatic tissue,

and these things produce enormously potent toxins that the body ends up using up its antioxidant stores to deal with. When you use up these antioxidant stores, then all diseases as we know them are free to start and get entrenched in various tissues.

Tom Levy:

The prototypical disease, heart disease. Okay, I'm a cardiologist by training, I'm board certified, I know all the background things that regular medicine knows about, but I will tell you that we now have rock-solid evidence of the cause and effect, not association, not correlation, but cause and effect is that pathogens from the mouth usually from infected gums or an infected tooth like a root canal are found accumulated in a very high concentration in the blood clots that acutely block off the blood vessels that cause heart attacks.

Tom Levy:

I got to say this, so many internists and my fellow cardiologists, they think if you're 55 years old all your risk factors look good and you get a heart attack, they won't tell the patient this, but what they're thinking is, "The poor son of a gun just had bad luck." Bad luck's got nothing to do with it. You can have bad luck, but bad luck is not the factor that causes a heart attack because the mainstream cardiological literature published a study and then apparently completely ignored it in terms of how they practice cardiology, and there's also a host of other articles in the cardiological literature that shows definitively that these same oral pathogens that I'm talking about are present in the atherosclerotic plaque and in the blood vessel underlying the atherosclerotic plaque and are the direct causative agents of the inflammation that cardiology now says is always present when starting atherosclerosis.

Tom Levy:

Just for some reason, even though the answer is in their own literature, they refuse to seem to want to ask, well, why is everybody having this inflammation? Why are the coronary arteries just getting inflamed for no reason at all? Well, they're not. They're getting inflamed because a large subset of people release these pathogens and toxins into the blood supply of the jaw bone through the body into the heart, and the first high-pressure blood pressure system they hit is the coronary artery.

Tom Levy:

They're going along low-pressure systems into the left ventricle, squeeze it, high pressure, and embed into the coronary arteries and start atherosclerosis. That type of medicine that completely ignores why things are happening and they just look to treat your chest pain, give you a bypass, give you an angioplasty, that can help some people live longer, okay, for sure, because cardiology probably does more for longevity than most subspecialties of medicine, but it's still not going to make you the healthy person you should be.

Jon Landsman:

Is it dangerous with the wrong dentist? Yes. Is it very safe with the right dentist? My experience is absolutely yes as well. I had 14 amalgams, mercury-based silver fillings in all the quadrants of mouth, and in four visits, one, two, three, and four, I had them taken out by a great biological dentist who protected himself. He looked like Darth Vader with the mask on and everything, protected his staff well. He was in a great room with fantastic

ventilation. He protected me as well with charcoal rinses and oxygen and all the advice about what to do before the extraction process, during the extraction process, and even after the extraction process.

Jon Landsman:

I can tell you, without a shadow of a doubt, that man to this day, I feel, is one of the most important people who has saved my future life. I got through all four of those visits, no pain whatsoever, no symptoms afterwards, and I've never felt better. I'm so thankful for that work being done.

Michael Beattie:

You see, what I still can't get across, I met you over a year ago, you were telling me this kind of information. I took it to my own dentist, who hadn't been aware of this and was very interested to hear it, but I'm a reasonably objective person. There's a lot about orthomolecular medicine I don't quite get, but there's an awful lot that I do and I have seen evidence there that supports it all, but why?

Michael Beattie:

I, as an objective person, researched this information and I'm believing what you say because I've seen the evidence and lots of other things, but I still can't fathom why the medical profession and others don't generally take this onboard. What can be done?

Tom Levy:

I've spent so many years thinking about that. For many years, from my perspective, I cut a lot of my fellow physicians slack as to, "Oh, they don't know it," or this, that, or the other. I've come around full circle.

Tom Levy:

If you're a professional and you're treating people, it's incumbent upon you to learn what's out there and not just to turn a cold shoulder or turn your eye away because it's going to change the way that you do your practice, okay? That, combined with the overwhelming financial incentive in the pharmaceutical companies, and people don't like to hear the fact that many physicians just might not have the best health of their patients at the top of their list of priorities, but, sad to say, that's what I believe is the case.

Tom Levy:

Because I can present evidence one on one to physicians and many times they're very impressed. You say, "Oh well, they're open-minded." Well, no, they would have never allowed that information to come into their consciousness unless they were at least open-minded enough to listen to me. No matter who you're seeing, no matter what doctor's advice you're following, you are still in ultimate control of what happens to you and you should never give that up, okay?

Tom Levy:

Lots of people like to be cynical about it, especially when they know their interests are being threatened, but we live in a brave new world of Internet and everybody has information to them that has never been available before in the history of mankind. If you have any sort of symptom or medical condition and don't research it thoroughly for yourself on the Internet, I humbly suggest to you, you're a fool.

Michael Beattie:

In Orlando, Trevor and I caught up with some of the team behind a controversial anti-vaccine movie, Vaxxed. They were touring the Vaxxed bus

across America, promoting the film and finding hundreds more families claiming vaccine injuries.

Polly Tommey: When you have a vaccine, I am absolutely sure now you are going to have

some injury of some kind, and it might not be obvious straight away, it might

be way down the track.

Polly Tommey: One mother said her daughter was absolutely fine, perfectly healthy, had

the Gardasil vaccine, and five months later was diagnosed with leukemia, and she is convinced that her daughter got the leukemia from the vaccine. Now, if she was just one story on its own, I'd think, whatever, I don't know,

but there's so many stories like this.

Michael Beattie: Dr. Suzanne Humphries is a leading nephrologist, a kidney specialist. She

became alarmed when she started to see complications in vaccine patients.

Suzanne Humphries: There was a fellow admitted to the hospital, and my colleagues had taken

care of him over the weekend when I was off. I got in on Monday morning and then I started asking him, I thought he was a visitor from another dialysis unit, and he said, "I'm not a visitor, I've never been on dialysis before." I said, "Oh, okay, okay," and then he says, "I was fine until I had those vaccines." It was as if he had told 10 other people and nobody would

listen to him, and I was like, "What vaccines?"

Suzanne Humphries: He's like, "The flu shot, the flu shot! I had two flu shots, one for the seasonal

and one for the H1N1." This was in 2009. I thought, okay, that's odd, but I'll look into it. I did look into it, and sure enough there was medical literature that showed kidney failure of all types after influenza vaccines, and there was more medical literature that showed kidney failure after other types of

vaccines as well.

Suzanne Humphries: What I started doing after that was looking at my inpatients when I was

consulted on inpatients, seeing what their kidney function was. They would give people shots on their first day of hospitalization no matter what was wrong with them. Then I would watch the kidney function drop and I would say to my colleagues, "Look, you consulted me about a kidney problem. I'm showing you here that there's no other reason that we can put on this," because as a nephrologist we always look for the drugs first as the cause,

except this vaccine.

Suzanne Humphries: My colleagues would look at me in dismay and disbelief, "How could a

vaccine possibly cause kidney failure?" I'd have to explain to them that vaccines are biological. They are basically super-drugs. They have chemicals in them. Their intention is to stir up the immune system. It's an autoimmune disease that we're seeing here. It's a destructive inflammatory disease. They

still, they just couldn't believe it.

Suzanne Humphries: I kept going with this. One day I went up to admit one of my own patients to

the hospital, and it was an elderly woman who had an inflammatory kidney disease. I admitted her intentionally to do a kidney biopsy to see exactly what was happening in her kidneys. I got to the floor and she had already

been given an influenza vaccine, and it had my name as the ordering physician. Right, my jaw dropped as well.

Suzanne Humphries:

I went to the nurse and I said, "This must be a mistake, because I haven't even been here. How could she have the vaccine? I wouldn't have ordered a vaccine." She said, "Oh, this is the new policy. The pharmacist goes in and tells the patient the risks and benefits." They basically gave them a one-page pink sheet of lies from the CDC, and then the nurse takes the order and gives it to the patient before I even get there.

Suzanne Humphries:

In other words, here we are trying to deal with people with significant pathology, trying to sort out what's wrong with them, and then they toss a cluster bomb in there and it makes our job even harder. That was one thing that frustrated me, but the other thing is that I would have never given this woman with an active inflammatory kidney disease another inflammatory substance ever in a million years. My colleagues even agreed with me, even though they wouldn't stand by me through the whole thing. They agreed with that.

Suzanne Humphries:

I tried to negotiate with the hospital administration and I said, "Look, if you have to give these vaccines, fine, but can we at least give them on the day of discharge, and can we at least have a decent, informed consent process?" They said, "Well, we'll talk about it and we'll get back to you." They had a meeting which I was not invited to and they got back to me and said that the vaccination policy would stay as it is, and so that's when I really went into my research more heavily.

Suzanne Humphries:

I wrote like a 13-page paper with more than 50 medical references, and I handed it to every top-level administrator and it was deafening silence, I didn't hear back from any of them. Then they hired somebody from New Hampshire, a consultant from New Hampshire to come and set me straight. His answer was moronic, was absolutely moronic. It didn't address the patients that I was having trouble with. His peer-reviewed medical literature response to me was to give me a sheet of paper that had all these studies that showed that if you give influenza vaccines to people with AIDS that they would mount an antibody response. What a joke, right?

Suzanne Humphries:

After that, I thought to myself, I can stick around here and try to battle this from the inside out with the risk of losing my job, or I can leave and continue to edify my knowledge base and bring the information to the public, and so I chose to do that. I still have two medical licenses. I'm still board certified in internal medicine and nephrology, but I'm an independent practitioner. There's been no damage to my career as a result of this in the sense that nothing's been taken away from me, except the huge salary and my houses and everything I could no longer afford, but I have no regrets about it whatsoever.

Ty Bollinger:

We're told they're safe and effective, but that's a lie. Now it comes down to, what are the risks and the benefits of vaccines? The reality is, you can give me your proposed list of benefits. I'll look at them and I can make my mind up whether that's really a benefit or not or whether that's even true, but

there are certain risks that we know are there. The risks are the fact that almost every vaccine contains ingredients that we know cause neurological damage and alter DNA, and several of them have ingredients that we know are cancer-causing agents.

Michael Beattie:

Helen Saul Case is an educator, author, and mother. Her daughter's vaccine experience was frightening.

Helen Saul Case:

There is a debate on whether or not vaccinations are harmful. However, in my opinion, there's no debate, because I saw firsthand what a vaccination did to my daughter at a very young age. When she was 15 months old, she was given a DPT shot, and she had a serious reaction just a couple hours later. I remember it distinctly, because she was in our sandbox outside playing and she tried to stand up and she couldn't. She couldn't stand up. She was walking just fine at this time and she tried to stand up on this day and she fell over and she was screaming at the top of her lungs and trying to walk to me but couldn't. It's an image I'll never be able to get out of my head.

Helen Saul Case:

I knew beyond a shadow of a doubt that it was the vaccination that caused this reaction. She had literally had it a couple hours prior. I took her inside, she had spiked a fever, I put her in a tepid bath, and she didn't stop screaming. I did what I knew to do, which was to give high dose saturation level vitamin C to this child experiencing this severe vaccine reaction.

Helen Saul Case:

I loaded her up and within about 45 minutes, once the C finally kicked in, she stopped screaming. Her temperature started to come down. I continued to give her C every hour or two throughout the entire night. By the next morning, she was a normal kid. Now, when I went to talk to, not one, but two medical doctors about what had happened to my child, admittedly these were orthomolecular physicians, they explained that had I not given my child high dose vitamin C, saturation level vitamin C at that time, that she may have indeed experienced permanent brain damage.

Helen Saul Case:

Now, that sends shivers through my spine, and someone's going to look at me and say, "Well, why are you vaccinating? Why are you doing this? Clearly, it's dangerous. You've seen it happening. Why are you still giving your kids shots?" It's because many of us do not have a choice. You want to go into the military? Guess what. You're going to get vaccinated. Foster child? Guess what. They're going to be vaccinated.

Helen Saul Case:

In New York State where I live, there is no philosophical exemption to vaccinations. You can't say, "Well, I don't believe in that," or, "You know what? Here's all the research that says that vaccinations are dangerous. Doctor, I don't want to get shots for my kid." That doesn't work around here. You're either religiously exempt or you're medically exempt. For my daughter, she now does indeed have a medical exemption for one component, just the pertussis component of the DPT shot but nothing else.

Helen Saul Case:

This information, honestly, it isn't really for the parents that don't vaccinate. This information is not so much for you. If you're seeking natural immunity, I

think you should be taking vitamin C as well, whether or not you're vaccinated. For the parents that have children and they're being forced to vaccinate, this is when high dose vitamin C is so incredibly important.

Helen Saul Case:

According to Dr. Thomas E. Levy, taking vitamin C before, during, and after vaccination time not only decreases the likelihood that you're going to have any side effects, but it actually increases the vaccine's effectiveness, so this is good. The side effects of vitamin C are safe. The side effects of vaccinations are not. When it comes to vaccinations in our house, we do not take any chances. We take a huge amount of vitamin C before, during, and after vaccinations. I want to tell you what this looks like.

Helen Saul Case:

When my kids have a vaccination coming up, for about a week prior I give them high dose vitamin C, saturation level vitamin C, every single day. Saturation, once again, is that rumbling tummy or slightly loose stool. Once they reach that point, you throttle back. You wait a few hours, then you give a little bit more later in the day and you continue on once again, just like you're feeding a baby. You're giving divided doses of C.

Helen Saul Case:

Then the day of the shot, I literally bring vitamin C to the doctor's office. After the child receives the vaccination, I give them vitamin C. Right now, my kids are old enough where I can take vitamin C powder and mix it into juice and just bring that along, and then they chug it right down after the vaccination. As soon as we get home, they take more. For the next week or two or however long is necessary, they continue to take high dose saturation level vitamin C.

Helen Saul Case:

Now, I have watched this work with my children again and again now, no side effects, no swelling, no redness, no fever, no nothing, just happy, healthy kids. For those out there looking for an option, vitamin C may offer that extra level of protection that they're looking for.

Michael Beattie:

I know you told this story before and you told it to me before, that experience, but I want to make sure no parent or grandparent out there misses on the impact of that. You must have been panicking. How on earth did you feel going through that? What were you doing? Were you just sitting with her? What was happening?

Helen Saul Case:

I was completely panicked. At the time, my husband was out of town, too, so it was all just on my shoulders. I was watching this child that I don't know what to do. What do you do if this child who's just screaming and inconsolable?

Helen Saul Case:

I did what any mom does. I called the doctor, and the doctor didn't even report it. They said that I called and reported that she had a fever. When they wrote it down in the doctor's report which, yes, I obtained afterwards because I was curious, it said, "Mom called withh fever," and "withh" had two H's. They hadn't even spelled it correctly. There was no mention of a vaccine reaction, even though I was very specific about what was happening to my child. They basically told me, well, not "basically," they told me, "Give her Tylenol." That was it.

Helen Saul Case:

When my daughter was receiving high dose vitamin C to prevent vaccine reactions, I can give you a basic idea of how much I was giving her before, during, and after. For example, before her first of two MMR shots, I was giving her approximately 8,000-9,000 mg a day of vitamin C to get her ready. Now, at this time she would've been five, because this was right before her kindergarten year. Then, once she received the shot, that very day, she held up to nearly 30,000 mg of vitmain C a day and after that continued to hold quite a bit, like 28,000 mg, 26,000 mg, 25,000 mg.

Helen Saul Case:

While I don't have the exact number memorized, the fact is you could tell that she was only getting 8,000-9,000 mg and then all of a sudden she was holding like 30,000 mg, which was incredible to us. That's a massive amount of C for a little five-year-old to be able to hold. Then that amount would slowly ramp down, 18,000 mg, 12,000 mg, until we would eventually return to her normal maintenance doses of vitamin C.

Helen Saul Case:

Now, New York State decided that they were going to add another MMR shot to the schedule right before she went to school, so, unfortunately, we were in a position where we had to get yet another right before she attended kindergarten. Only a month later, we had to go through the whole process all over again. Once again, we started her at a high level. She was probably getting 8,000-10,000 mg of vitamin C to get to saturation right before, ramped up, well over 30,000 mg, and then once again down into the 20s.

Michael Beattie:

Our experts may emphasize different strategies, but they all agree on one thing. You can change your lifestyle, and if you start with even little steps you will see a difference.

Ty Bollinger:

One of the biggest things that you can do to detoxify daily that people don't realize, and it has nothing to do with what you eat, is to sweat and to exercise because both things help you to detoxify. If you exercise, you might not be somebody that wants to work out with weights, you might not be a runner, but I guarantee you anybody's that's watching this can take a mini trampoline and jump 20 minutes on it, even an elderly person, because they sell them with the little things, handles, that you can jump.

Ty Bollinger:

Just do that 20 minutes a day on a rebounder to get your lymphatic system to move. The lymph doesn't flow unless it's pumped, it doesn't have a pump like your heart. If your lymphatic system isn't moving, if you're not moving, your lymph is stagnant. What do we know about stagnant water? It's poisonous water, right? You need to move. Everybody that's watching this that's able to walk or stand can do a mini trampoline. That detoxifies your body on a daily basis and it's easy.

Ty Bollinger:

Put it in front of the TV when you're watching the evening news. Watch for 30 minutes, and by that time you jump for 30 minutes your exercise is done. Then also sweating, so you should be exercising outside to sweat or we have a sauna that I sit in almost every night to sweat. You need to sweat, and that detoxifies the toxins out of your skin through your skin. Your skin's actually the biggest organ of detoxification.

Michael Beattie: Why would I, why woul

Why would I, why would anybody need or benefit from exposure in an

infrared sauna?

Paul Barattiero: That's a good question. We know that infrared is in the sun, near and far

infrared is in the sun. We understand that the best way to detoxify is to sweat. This is the natural way that our body releases toxins. It's either through elimination, urination, going to the restroom and eliminating things out of your body, and also sweating. We know that we sweat out toxins,

obviously.

Paul Barattiero: Really, what a sauna is, is I would say a controlled sweat. You are not going

outside and running around the block. You're sitting in a little sauna for a few minutes to initiate a sweat so that you can release toxins, and then you would go shower or what have you. That's really the purpose of the sauna. Now, the reason infrared is better than a conventional sauna, conventional saunas are just hot. Because your skin gets hot, the body wants to cool itself.

In a roundabout way, you're initiating sweat.

Paul Barattiero: Infrared is heat, but it goes beneath the surface of the skin so that it goes

into the body and invigorates the cells to release as well. Not just making you hot and so you sweat to cool yourself, it's actually going into the body and initiating healing in deeper layers of the skin. That's what infrared does, it goes into the body instead of just heat that would provide that cooling or

that need to cool.

Paul Barattiero: It's a big difference. It's actually huge, and there are many studies out there

showing how infrared waves are of benefit to the body, many, many studies

on that.

Jonathan Wright: It's really necessary to do something on purpose to detoxify, and heavy

sweating is one of the better ways to do it, so take your pick of which way you'd like to heavy sweat. It can be that interval training. That'll make you sweat. You can get an infrared sauna, that's very good, and the infrared is even better for us guys because it helps a man and a woman's body produce nitric oxide, but guys have this other reason for producing nitric oxide in their bodies. Those are two of the most popular ways, and there are other ways of working up a sweat. Just go do something that makes you sweat

quite intensely.

Jonathan Wright: Researchers somewhere in Southern California did research with people

who, on purpose, got in a sauna, 30-40 minutes of heavy sweating, 30 episodes, and they did fat biopsies before and after. They found that the toxic burden, and many toxins are stored in fat, they found that the toxic burden was reduced by two-thirds after 30 episodes of heavy sweating. I say 30 episodes rather than once a day, once a week, whatever because it takes those 30 episodes. If you string them out over 10 years, of course, you're gonna get more toxins back in, but let's say you do those 30 episodes over

90 days and you've got your toxic burden down by two-thirds.

Robert Scott Bell: One of pathways of excretion is through the largest organ of the body. That

is not the liver, which is your main organ for detoxification internally, but the

skin. Now, the skin, of course, covers all kinds of layers of fat, of bone, of nerve tissue and everything else, but particularly the fat cells that are the receptors, if you will, inadvertently as an adaptation for survival to a lot of toxic poisons that the liver is not able to get rid of, heavy metals, things like that. We have these fat-soluble toxins persist in organic pollutants. They situate themselves, they are very hard to relinquish, the body very reluctant to do so, because they're dangerous.

Robert Scott Bell:

One of the pathways out is via sweating through the sweat glands, and you can sweat through heat of the sun, which is wonderful in the summer but in the wintertime it's a little more difficult to get that. One of the, let's say, wavelengths, it's not ultraviolet but infrared as a normal exposure to even sun. What this ultra, well, let's say, infrared technology does is it creates this wavelength that can heat from below like it's a separate wavelength. It's warm, it feels great, but it actually goes into the area of the fat-soluble toxins deeper into the cells and to heat them up and cause them to relinquish through the sweat, through the water that would then come out.

Robert Scott Bell:

In a very unique and powerful way, we can assist and lower the burden, the toxic burden of the body, by increasing our sweating in times where many people are so ill they can't exercise vigorously to sweat. To be in a passive situation where infrared heat can be a source for you, you can do a wonderful thing to reduce the burden. Some have argued and some scientific papers have shown that it actually enhances or increase glutathione production from within. Not only is it great for external detox through the skin but you're going to enhance detox pathways internally as well.

Ocean Robbins:

A lot of times people ask me if it's too late for them to change their diet. They're like, "I've eaten this way my whole life. What's a few years going to matter?" What I want to say is, if you've eaten a diet that you don't think is the best for any part of your life or even for your whole life up to this point, that's probably even more motivation to make a change. Because as bad as things are with the status quo, that's how much better they could be.

Ocean Robbins:

Your body can only take so much toxic load. You never know what the breaking point is. If you heat water up, get it to 211°, you'll have some steam. You get it to 212° and suddenly it starts boiling. For a lot of us, our breaking point or our boiling point is a moment when things crash, when you get a dreadful diagnosis or you suddenly can't do the things you took for granted before. You don't have to wait until you reach that point. For some people, it's too late by the time they reach that point. Wherever you are right now, you can make a shift. You can say, "Yes, I want to live the most healthy, vibrant life I can," and you have immense power to transform your life.

Ocean Robbins:

If you have excess weight, you can let it go. If you have a toxic load that's impacting your body, your mental clarity, your sleep, your sex life, your joy, your vitality, whatever it is, your heart health, you can make a change and the statistics are clear. When you step into a healthier diet and a healthier life, you maximize your chances for transformation and wellness, perhaps, in

many cases beyond what you could have dreamed possible. It's so worth it, so yes to you, yes to you thriving, yes to you making the choices that help you thrive.

Michael Beattie:

I hope the contributors in this episode have opened your eyes as much as they opened mine about the toxins all around us and what we can do about them. I'm learning that I need to be more aware, I need to be more vigilant, and I need to educate myself more.

Michael Beattie:

If this series is about anything, it's about encouraging you that you can take responsibility for your own health and well-being. You can't change where you've come from, but you can decide where the rest of the journey takes you.

Trevor King:

Okay, that was episode number one on toxins. There was a lot of things in there that you will have thought about. No doubt there's a lot of things in there that you won't have given much consideration to. EMFs, for example, EMFs is one of the things that really is so intrusive in our lives now that we don't give enough thought to.

Timmy Centner:

I absolutely believe that. It's one of the things that, I've always had super sensitive hearing as a musician, and one of the things that strikes me about EMFs is the frequencies. There are things so far out of our range, and I don't think that we fully understand how they affect our day-to-day lives. There are two schools of thought that cellphones and technology, we deal with it on a daily basis, but do we really know what the effects on our bodies are over time?

Trevor King:

No, we don't. The other thing that's interesting, because you and I talked about this a couple of nights ago, is the fact that we are actually energetic beings.

Timmy Centner:

That's right, that's right.

Trevor King:

We have an energy field.

Timmy Centner:

We do.

Trevor King:

Which is basically being screwed up by the EMFs in our homes.

Timmy Centner:

That's exactly right, yeah, true story. The other thing that I think struck me in this episode was the portion on vaccines. I've been on both sides of the fence over the course of my life, but I had a conversation with a very interesting woman at one of the conferences that I was helping run. The reality is, her stance made really good sense, and it's very in line with the

things that were in that episode.

Trevor King:

Yeah, well, Suzanne Humphries, actually, who we saw in that episode.

Timmy Centner:

Mm-hmm (affirmative), absolutely.

Trevor King: Suzanne, the thing about all this stuff is people think we're interviewing

quacks sometimes because they're not mainstream.

Timmy Centner: Sure, I know.

Trevor King: Well, Suzanne was mainstream. She was absolutely 100% mainstream,

kidney specialist, and she basically made the move because she couldn't

handle what vaccines were doing to her clients.

Timmy Centner: To her clients.

Trevor King: Yeah.

Timmy Centner: That's amazing, that's amazing.

Trevor King: These are not quacks that we're interviewing, they are people who have a

real concrete standing in the health world who make decisions because of that, so that was an interesting thing. The only thing in this episode was

Robert Scott Bell.

Timmy Centner: Oh, one of my favorite people.

Trevor King: Yeah, you actually told me that a few nights ago. He is new to Live Longer

Feel Better.

Timmy Centner: Really?

Trevor King: Yeah.

Timmy Centner: Okay, that's fantastic. He's such a good addition. His breadth of knowledge

just from his past experience, I've had some incredible conversations with

him personally, and he's just a solid source of information.

Trevor King: Yeah, yeah. His bit about saunas you will have hopefully found interesting,

and he obviously tied in with the EMFs. Next episode, coming up tomorrow night, is nutrition, and part of that is a pretty long interview with this guy.

Timmy Centner: All right, here's the thing. Nutrition is controversial, believe it or not. I know

that sounds kind of strange, but I've been on a personal journey over the past several years and I've managed to lose close to 90 lbs using one methodology. What we want to do in this nutrition episode is give different perspectives from different points of view, and I think it's super important to

understand that as human beings there's no one size fits all for your

nutrition.

Timmy Centner: There's certainly things, the parameters, that you need to work within, but if

you're looking for a body transformation or to get yourself into better shape, there are multiple entry points that might seem contradictory or in direct opposition to one another that literally work for people and I'm

excited to talk about that.

Trevor King: I think that's crucial, because not only has Timmy got the experience of it

and losing so much weight, but he has worked on 10 different docuseries.

Timmy Centner: That's true.

Trevor King: Therefore, you've seen every permutation.

Timmy Centner: All of it.

Trevor King: You've seen every person that has a strong view, and you'll be able to give a

good, balanced view.

Timmy Centner: I think so, and I think that that's what's missing in the discourse. We always

want to take sides, and we always want to think that maybe we're 100%

right and this is the only way that you can do something.

Timmy Centner: You're right, there are so many different permutations for different people,

and I think the goal is trying to find what's right for you in your life and what works. We'll talk more about sustainability, we'll talk more about some of the different entry points in the next episode, and I'm quite excited.

Trevor King: Cool. Listen, join us for episode two. Click the button below to share on

Facebook, let people know this is happening, but make sure you tune in

tomorrow night and we'll see you then.